

## **ORIGINAL ARTICLES**

# **STRESS, ANXIETY AND DEPRESSION AMONG MPSC ASPIRANTS IN PUNE: A DESCRIPTIVE STUDY**

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## **ABSTRACT**

**Background:** Renowned for their rigorous selection criteria, competitive examinations in India serve as pivotal gateways for selecting qualified candidates through equitable processes. Competitive examinations, such as those conducted by the Maharashtra Public Service Commission (MPSC), attract aspirants seeking prestigious government positions amidst increasing national unemployment. However, the pursuit of these coveted roles amid the limited job market and the allure of government positions amidst escalating national unemployment rates contribute to significant stress, anxiety, and depression among candidates. Pune, a prominent hub for MPSC and UPSC exam preparation, witnesses an influx of aspirants from rural Maharashtra, drawn by the opportunities presented by civil service examinations. Nevertheless, the intense competition and demanding preparation regimen associated with MPSC exams often lead to heightened levels of stress, anxiety, and depression among aspirants, particularly in Pune, a prominent center for exam preparation. **Aims:** This study aims to explore the prevalence and factors influencing stress, anxiety, and depression among MPSC aspirants in Pune, considering demographic and socioeconomic variables such as gender, urban/rural background, and financial status. **Method & Material:** A cross-sectional study with quantitative method involved 60 respondents from Pune, aged 24-32 years, utilized a structured questionnaire and the DASS-21 scale for data collection. **Results and Conclusion:** It indicate high levels of anxiety (60%), depression (48.33%), and stress (38.33%) among aspirants, with notable variations across gender, urban/rural background, and income groups. Descriptive analyses reveal significant gender differences in depression levels, with males experiencing higher severity. As well as substantial difference were found in the level of stress, anxiety, and depression based on urban/rural background or income levels. The findings underscore the need for targeted mental health interventions to support the well-being of MPSC aspirants in Pune, enhancing their resilience amid competitive exam pressures.

**Keywords:** Stress, Anxiety, Depression, Competitive Exams, Gender, DASS 21.

## **INTRODUCTION**

With India's rapidly growing population, the education system has become increasingly

competitive (Lokhande & Joshi, 2023). The Maharashtra Public Service Commission

(MPSC), established on May 1, 1960, operates as an autonomous body under Article 315 of the Indian Constitution, entrusted with recommending candidates for government posts and advising on service matters (MPSC, n.d.). Annually, MPSC conducts the Rajya Seva Examination to recruit for Class A, B, and C posts within the Maharashtra Government, known for its competitiveness and allure due to higher salaries and prestigious status (MPSC, n.d.). During 2019-20, MPSC conducted 22 competitive exams, admitting 533,154 candidates and finalizing 10 exams for 1,848 posts. They made 2,414 recommendations, processed 8 requisitions for direct recruitment involving 288 posts and 125,911 applications, interviewed 1,039 candidates, recommending 279. A screening test for one post had 1,549 applicants and 1,399 participants. Notably, 905 candidates from backward classes were recommended for 2,673 reserved posts, in addition to 504 recommended for unreserved posts, underscoring MPSC's commitment to social equity (GoM, MPSC, 2022).

The National Mental Health Survey (NMHS) 2015-16 reveals that 6.4% of adults aged 18-29 in India suffer from mental disorders, with anxiety (3.1%) and mood disorders (2.9%) being most common (Gautam, et al., 2020). Each year, countless students from villages and towns migrate to cities to prepare for civil service exams, facing significant financial burdens from coaching fees, study halls, and living expenses, yet they persist in bearing these costs for years to succeed (Joshi, P., 2019). Aspirants of competitive exams, including those for the Maharashtra Public Service Commission (MPSC), often face significant physical and mental health challenges due to rigorous study schedules. This can lead to long-term effects such as stress, anxiety, and depression, which are more prevalent among these students than the general population (Rao & Nagendra, 2017).

Excessive stress can result in severe psychological and physical health issues, and in extreme cases, may lead to suicidal tendencies (Larson, 2006).

According to WHO, 10-20% of children and adolescents experience mental health conditions, with most not receiving care, and suicide is the third leading cause of death among 15-19-year-olds; the 2016 National Mental Health Survey also revealed that nearly 9.8 million young Indians aged 13-17 need active interventions (Charit, 2021). As per the National Institute of Mental Health and Neuro Sciences, one in five Indian teenagers suffers from mental illness. Examination stress can lead to lower academic performance, depression, substance abuse, eating disorders, and psycho-physiological problems (Barmola & Shrivastava, 2010). Rangarjan (2020) found UGC-NET aspirants experience moderate levels of stress, depression, and anxiety, affecting their performance, with male students reporting more stress than females. Female participants used more coping strategies, and urban adolescents were more stressed and used more coping strategies than rural adolescents (Srivastava et al., 2014). A study assessed 261 students preparing for medical entrance exams at a coaching institute using the DASS-21 and Brief COPE Inventory. The findings revealed that 63.8% of participants experienced depression, 82% anxiety, and 51.3% stress. Severe cases included 8% with extreme depression, 23% with severe anxiety, and 1.9% with severe stress (Mishra et al., 2020). The DASS-21 was administered to a non-clinical sample that broadly represented the general adult UK population (N = 1,794). Competing models of the latent structure of the DASS-21 were evaluated using confirmatory factor analysis (CFA). One of these models included a general factor representing psychological distress, along with orthogonal specific factors for depression, anxiety, and stress (Henry &

Crawford, 2005; Lovibond. et al., 1995). Rao and Nagendra (2017) highlighted the neglect of physical exercise and nutritious food among aspirants of competitive exams due to their rigorous study schedules, which often leads to stress, anxiety, and depression. Larson (2006) discusses extreme cases of suicide resulting from high levels of stress, while Joshi (2019) emphasized the burden of living expenses and the fear of not meeting parental expectations. Although stress is a natural part of life, it can effect an aspirant's mental and physical health as well as their productivity, either positively or negatively. The strong attraction towards government jobs and limited employment opportunities further exacerbates stressful situations. Sources of stress among competitive exam aspirants include self-inflicted, parent-inflicted, and peer-inflicted stress (Saha & Deb, 2020). However, the existing literature does not sufficiently explore the gender-specific effects of stress, anxiety, and depression. Additionally, factors such as aspirants' geographical location and income levels have not been thoroughly examined. Therefore, this study aims to address these gaps by framing the following research questions.

1. Do female MPSC aspirants experience higher levels of stress, anxiety, and depression compared to male aspirants?
2. Do MPSC aspirants from rural areas experience higher levels of stress, anxiety, and depression compared to those from urban areas?
3. Do MPSC aspirants from low financial backgrounds experience higher levels of stress, anxiety, and depression compared to those from higher financial backgrounds?

This study adapted the DASS-21 to investigate the levels of stress, anxiety, and depression among MPSC aspirants in Pune. It aims to explore how these mental health challenges vary among aspirants, taking into account

financial disparities and urban-rural differences. The findings highlight the importance of understanding and addressing the mental health needs of MPSC aspirants in Pune. Interventions such as stress management techniques, mindfulness training, and counseling services are essential to support these individuals and improve their overall well-being.

## METHODOLOGY

The study consists a descriptive cross-sectional research design. It was completed in the years 2021 to 2022. Sadashiv peth, Navipeth and Karvenagar of Pune city was the universe chosen for this study, as observed this area with high presence of aspirants of different competitive exams. Population consisted all MPSC aspirants engaged in the preparation for the MPSC examinations in Pune city. Aspirants from urban area of Pune and migrated from rural areas of Maharashtra were included. Respondents were selected voluntarily, and informed consent were obtained from each respondent. Sampling design comprises stratified sampling of probability sampling where the sample size included 60 respondents (30 male and 30 female) MPSC aspirants with specific age group of 24 to 32 years from various coaching institutes and study centres in Pune.

In this research Survey method were used for which a tool of a structured questionnaire has been used to collect data on stress, anxiety, and depression levels with application of DASS 21. The DASS-21 (Depression, Anxiety, and Stress Scale-21) is a self-report tool used to measure depression, anxiety, and stress. It has 21 items, with 7 items per subscale, rated on a 4-point Likert scale (0 to 3). A shorter version of the DASS-42, it provides a reliable assessment of emotional states, making it valuable for both clinical and research purposes (Henry & Crawford, 2005; Lovibond, S. et al., 1995). In the study, respondents'

profiles include personal, family, study, financial, and area-related information. Coping strategies and the DASS-21 scale are employed to evaluate the stress, anxiety, and depression levels among MPSC aspirants. The data collection process completed in the duration of December, 2021 to February, 2022. Data analysis was conducted using MS-Excel. Descriptive statistics (percentages) were computed for all variables. The analysis summarised stress, anxiety, and depression levels across the entire sample and within subgroups (gender, residence, financial background).

The study has adhered to ethical guidelines for research involving human respondents. Confidentiality and anonymity of respondents were ensured, and participation was voluntary.

**RESULTS**

In the present study, levels of depression, anxiety, and stress were notably high among MPSC aspirants. Previous research indicates that factors such as low self-esteem, strained family relationships, insufficient support from teaching staff, and financial constraints contribute to these mental health issues. The proportions of stress, anxiety, and depression among aspirants were 38.33%, 60%, and 48.33%, respectively, as assessed using the DASS 21 scale. Specifically, 18.33% of students experienced mild depression, 15% moderate depression, and 15% severe depression. Regarding anxiety, 10% of aspirants had mild anxiety, 16.67% moderate anxiety, and 33.34% severe anxiety. For stress, 6.67% reported mild stress, 16.67% moderate stress, and 15% severe stress.

Table 1

*Gender based Severity of Stress (in %)*

Gender	Normal Stress	Mild Stress	Moderate Stress	Severe Stress	Extremely Severe Stress
Female	31.67%	3.33%	11.67%	1.67%	1.67%
Male	30%	3.33%	5%	5%	6.67%

Table 1 gender-based severity of stress reveals a gender difference in stress levels among MPSC aspirants. Normal stress (no stress) was reported by 31.67% of females and 30% of males. Moderate stress was the highest among females at 11.67%, while moderate, severe, and extremely severe stress levels found higher in males at 5%, 5%, and 6.67%, respectively.

Table 2

*Gender-Based Severity of Anxiety (in %)*

Gender	No Anxiety	Mild Anxiety	Moderate Anxiety	Severe Anxiety	Extremely Severe Anxiety
Female	21.67%	5.00%	8.33%	1.67%	13.33%
Male	18.33%	5.00%	8.33%	5.00%	13.33%

Table 2 gender-based severity of anxiety indicates that severe anxiety is higher among male aspirants, while mild, moderate, and extremely severe anxiety levels are equal between genders. Among female respondents, 21.67% reported no anxiety, 5.00% mild anxiety, 8.33% moderate anxiety, 1.67% severe anxiety, and 13.33% extremely severe anxiety. Among male respondents, 18.33% reported no anxiety, 5.00% mild anxiety, 8.33% moderate anxiety, 5.00% severe anxiety, and 13.33% extremely severe anxiety.

Table 3

*Gender-Based Severity of Depression (in %)*

Gender	No Depression	Mild Depression	Moderate Depression	Severe Depression	Extremely Severe Depression
Female	31.67%	10.00%	5.00%	1.67%	1.67%
Male	20.00%	8.33%	10.00%	3.33%	8.33%

Table 3 gender-based severity of depression reveals gender differences in depression severity among MPSC aspirants. Among female respondents, 31.67% reported no depression, 10% mild depression, 5% moderate depression, 1.67% severe depression, and 1.67% extremely severe depression. Among male respondents, 20% reported no depression, 8.33% mild depression, 10% moderate depression, 3.33% severe depression, and 8.33% extremely

severe depression. The data indicates that moderate, severe, and extremely severe depression are higher among male aspirants.

**Table 4**

*Geographic location wise and severity of Stress (in %)*

Stress Level	Rural	Urban
No Stress	45.00%	16.67%
Mild Stress	6.67%	0.00%
Moderate Stress	6.67%	10.00%
Severe Stress	3.33%	3.33%
Extremely Severe	5.00%	3.33%
Total	66.67%	33.33%

Table 4 geographical location wise severity of stress shows the geographic differences in stress levels among MPSC aspirants. Among rural aspirants, 45% reported normal stress, 6.67% mild stress, 6.67% moderate stress, 3.33% severe stress, and 5% extremely severe stress. Among urban aspirants, 16.67% reported no stress, 0% mild stress, 10% moderate stress, 3.33% severe stress, and 3.33% extremely severe stress. The data indicates that moderate stress is higher among urban aspirants, while mild and extremely severe stress levels are higher among rural aspirants.

**Table 5**

*Geographic location wise and severity of Anxiety (in %)*

Anxiety Level	Rural	Urban
No Anxiety	25.00%	15.00%
Mild Anxiety	6.67%	3.33%
Moderate Anxiety	16.67%	0.00%
Severe Anxiety	3.33%	3.33%
Extremely Severe	15.00%	11.67%
Total	66.67%	33.33%

Table 5 geographical location wise severity of anxiety shows the geographic differences in anxiety levels among MPSC aspirants. Among rural aspirants, 25% reported no anxiety (normal anxiety), 6.67% mild anxiety, 16.67%

moderate anxiety, 3.33% severe anxiety, and 15% extremely severe anxiety. Among urban aspirants, 15% reported no anxiety, 3.33% mild anxiety, 0% moderate anxiety, 3.33% severe anxiety, and 11.67% extremely severe anxiety. This data indicates that mild, moderate, and extremely severe anxiety levels are higher among rural aspirants compared to urban aspirants. Therefore, anxiety levels are generally higher in rural aspirants.

**Table 6**

*Geographic location wise and severity of Depression (in %)*

Depression Level	Rural	Urban
No Depression	36.67%	15.00%
Mild Depression	15.00%	3.33%
Moderate Depression	6.67%	8.33%
Severe Depression	3.33%	1.67%
Extremely Severe	5.00%	5.00%
Total	66.67%	33.33%

Table 6 geographical location wise severity of depression indicates that among rural aspirants, 36.67% reported no depression, followed by 15.00% with mild depression, 6.67% with moderate depression, 3.33% with severe depression, and 5.00% with extremely severe depression. In contrast, urban aspirants reported 15.00% with no depression and 8.33% with moderate depression, with lower percentages across all categories compared to rural aspirants.

**Table 7**

*Severity of Stress by Income or Financial background (in %)*

Income Group	Normal Stress	Mild Stress	Moderate Stress	Severe Stress	Extremely Severe Stress
< 1 lakh	28.33%	3.33%	6.67%	1.67%	5.00%
1 to 3 lakhs	18.33%	0.00%	3.33%	1.67%	0.00%
3 to 6 lakhs	11.67%	1.67%	1.67%	1.67%	3.33%
6 to 8 lakhs	1.67%	1.67%	1.67%	1.67%	0.00%
> More than 8 lakhs	1.67%	0.00%	3.33%	0.00%	0.00%

Table 7 severity of stress by income or financial background shows that MPSC aspirants with less than 1 lakh annual income experience the highest proportion of normal stress at 28.33%, with mild (3.33%),

moderate (6.67%), and extremely severe stress (5.00%) levels also being higher compared to other income groups. Aspirants with 1-3 lakh annual income show lower stress levels, with 18.33% experiencing normal stress and no cases of mild or extremely severe stress, while moderate and severe stress levels are at 3.33% and 1.67%, respectively. For aspirants earning 3-6 lakhs annually, normal stress is 11.67%, and stress levels in other categories remain low. Those earning 6-8 lakhs annually have an equal distribution of stress levels across normal, mild, moderate, and severe (1.67% each), with no extremely severe stress reported. Aspirants with more than 8 lakhs annual income exhibit low stress levels, with 1.67% experiencing normal, mild, and severe stress, and 3.33% moderate stress, with no extremely severe stress reported. The data suggest higher stress levels among lower-income aspirants (<1 lakh), indicating financial constraints as a significant stress factor.

Table 8

Anxiety Severity by Income or Financial background (in %)

Income Group	Normal Anxiety	Mild Anxiety	Moderate Anxiety	Severe Anxiety	Extremely Severe Anxiety
< 1 lakh	15.00%	5.00%	10.00%	3.33%	11.67%
1 to 3 lakhs	11.67%	1.67%	5.00%	0.00%	5.00%
3 to 6 lakhs	10.00%	0.00%	0.00%	1.67%	8.33%
6 to 8 lakhs	1.67%	1.67%	1.67%	0.00%	1.67%
> More than 8 lakhs	1.67%	1.67%	0.00%	1.67%	0.00%

Table 8 anxiety severity by income or financial background displays the severity of anxiety among MPSC aspirants based on annual income. For those earning less than 1 lakh annually, 15.00% have normal anxiety, 5.00% mild, 10.00% moderate, 3.33% severe, and 11.67% extremely severe anxiety. Aspirants with an annual income of 1 to 3 lakhs show 11.67% with normal anxiety, 1.67% mild, 5.00% moderate, 0.00% severe, and 5.00% extremely severe anxiety. For the 3 to 6 lakhs income group, 10.00% have normal anxiety, 0.00% mild and moderate, 1.67% severe, and

8.33% extremely severe anxiety. Aspirants earning 6 to 8 lakhs and more than 8 lakhs exhibit 1.67% and 0% anxiety across all levels of severity, respectively. Overall, lower-income groups (<1 lakh) exhibit higher anxiety levels compared to higher-income groups (> 6 lakhs).

Table 9

Severity of Depression by Income or Financial background (in %)

Income Group	Normal Depression	Mild Depression	Moderate Depression	Severe Depression	Extremely Severe Depression
< 1 lakh	26.67%	5.00%	6.67%	1.67%	5.00%
1 to 3 lakhs	11.67%	6.67%	1.67%	3.33%	0.00%
3 to 6 lakhs	8.33%	3.33%	3.33%	0.00%	5.00%
6 to 8 lakhs	1.67%	3.33%	1.67%	0.00%	0.00%
> More than 8 lakhs	3.33%	0.00%	1.67%	0.00%	0.00%

Table 9 severity of depression by income or financial background analyses the relationship between annual family income and depression severity among MPSC aspirants. For those with an income of < 1 lakh, 26.67% have no depression, 5.00% mild, 6.67% moderate, 1.67% severe, and 5.00% extremely severe depression. In the 1 to 3 lakh income group, 11.67% have no depression, 6.67% mild, 1.67% moderate, 3.33% severe, and 0.00% extremely severe depression. For the 3 to 6 lakh group, 8.33% have no depression, 3.33% mild, 3.33% moderate, 0.00% severe, and 5.00% extremely severe depression. In the 6 to 8 lakh group, 1.67% have no depression, 3.33% mild, 1.67% moderate, and 0.00% severe or extremely severe depression. For those with an income of > 8 lakhs, 3.33% have no depression, 0.00% mild, 1.67% moderate, and 0.00% severe or extremely severe depression. Overall, moderate and extremely severe depression is higher among aspirants with an annual family income of < 1 lakh, while mild and severe depression is higher among those with an income between 1 and 3 lakhs. Aspirants with higher family incomes (above 3 lakhs) generally show lower levels of depression severity.

## DISCUSSION

The findings of this study shed light on the prevalence and factors influencing stress, anxiety, and depression among MPSC aspirants in Pune. The study encompassed demographic and socioeconomic variables such as gender, urban/rural background, and financial status to provide a comprehensive understanding of mental health challenges in this cohort.

The descriptive analysis of gender-based severity of stress reveals equal proportion of normal and mild severity of stress among male and female aspirants. Whereas, the severity of stress is slightly found increased at the level of severe and extremely severe in case of male aspirants. In case of anxiety, both male and female aspirants found equal with mild, moderate, and extremely severe anxiety levels. Only in case of severe anxiety, it is higher among male aspirants. The study revealed substantial gender differences in depression severity among MPSC aspirants. Male aspirants exhibited higher levels of moderate, severe, and extremely severe depression compared to their female counterparts. The finding on stress and depression is consistent with previous research highlighting that male students often experience higher stress levels during competitive exam (UGC-NET) preparations (Rangarajan, 2020). This study brought new light on the fact of MPSC aspirants where it revealed gender-based difference in the severity of stress, anxiety, and depression. Although no important gender differences were observed in stress and anxiety levels, the higher prevalence of severe depression among male aspirants underscores the need for gender-specific interventions to support mental health during exam preparation.

The proportion of normal stress among rural aspirants is higher compare to urban. Stress level at the level of mild, moderate, severe, and extremely severe is slight similar with

averagely low proportion. The higher level of normal, mild, moderate, and extremely severe anxiety and depression among rural aspirants compared to urban aspirants is matter of concern. Overall, rural aspirants reported higher proportions of normal, mild and extremely severe stress, anxiety, and depression. This demands urgent requirement of the policy decisions along with appropriate social work intervention such as mental health counselling, carrier guidance and promoting support systems tailored to their unique challenges.

The financial background also meaningfully influences stress, anxiety, or depression levels among MPSC aspirants. Aspirants from lower-income groups (<1 lakh annual income) found higher levels of stress, anxiety, and moderate to extremely severe depression. Overall, the severity of stress level is higher at normal level among income groups < 1 lakhs to 6 lakhs. The proportion is found decreased in case of income group in the range of 3 lakhs to more than 8 lakhs. The similarity found with the findings in the study of Mishra et al, (2020) which highlights high proportion of stress, anxiety, and depression among aspirants of medical entrance exam at a coaching institute. As well as Joshi (2019) emphasized the burden of living expenses on rural aspirants residing in the city for the preparation for competitive exams.

This study is an add on to the knowledge exploring the stress, anxiety and depression of MPSC exam aspirants in the Pune city (Maharashtra). Whereas the low sample size from only three locations of Pune city limit to find the fact. The truth might be varying cities or states of India.

## CONCLUSION

This study contributes valuable insights into the mental health landscape of MPSC aspirants in Pune. The findings underscore the high prevalence of stress, anxiety, and

depression among aspirants, with notable gender differences in depression severity. Despite the intense competition and demanding preparation regimen associated with MPSC exams, urban-rural disparities and financial backgrounds emerge as significant determinants of mental health outcomes in this dataset. Moving forward, targeted interventions such as stress management workshops, counseling services, and mindfulness training should be integrated into MPSC exam preparation programs to mitigate mental health challenges. Addressing gender-specific mental health needs and providing equitable support systems for aspirants from diverse socioeconomic backgrounds are crucial steps towards fostering a healthier exam preparation environment. Future research could explore longitudinal studies and qualitative methods to delve deeper into the lived experiences of MPSC aspirants, providing nuanced insights into the multifaceted nature of mental health challenges in this population. By prioritizing mental health support and well-being initiatives, policymakers, educational institutions, and coaching centers can enhance the overall resilience and academic success of MPSC aspirants preparing for competitive examinations.

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