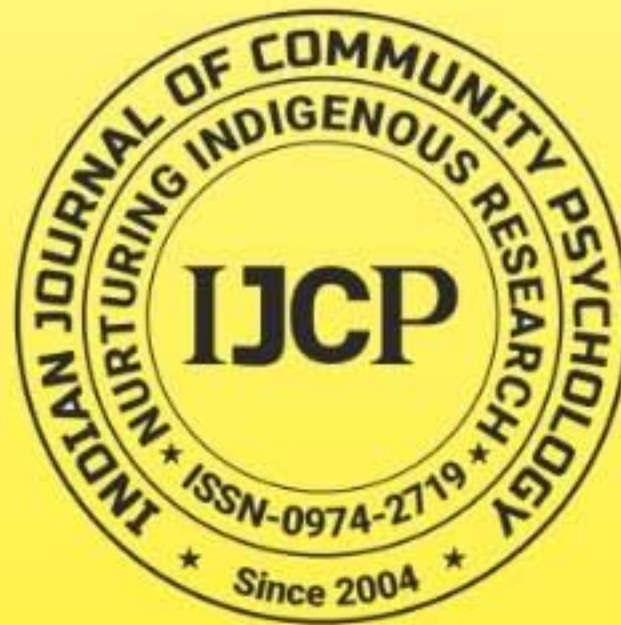


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Navigating transitions: A comparative study of students living at home and away from home through the lens of Chickering's Vectors

Disha Sharma,* ,Anoushka Suri* and Daisy Sharma**

The transition from school to college is a pivotal stage in students' life where they come across several changes and challenges. A lot of students move away from their homes to different places in order to seek higher education. This study aims to explore the changes and challenges encountered by the students, comparing the experiences of students living at home and away from home (in hostels, PGs, and flats). For this, 14 individual semi-structured interviews were taken from students of University of Delhi, between the ages of 18-21 years. These included students living in different accommodations. Thematic Analysis was used to assess the transcribed interviews and several factors emerged including, food, finances, academics, family and peer relationships, sleep and more. Further, the factors were assessed through Chickering and Reisser's Theory of Identity Development. Differences between the experience of students at home and away from home were observed based on the emerging themes. It was concluded that each student faced a unique set of problems while navigating college life due to added responsibility and freedom with varied intensity. This study can contribute towards enhancement of social support systems for students, fostering interpersonal and intrapersonal development. Moreover, it can enable the formulation of interventions on various levels, guiding them through this sensitive and overwhelming stage of life.

Keywords: Transition, Students At home and Away from Home, Chickering's Identity of Development, Social Support System

INTRODUCTION

The development of individuals in their later education years in terms of personal and psychosocial domains can be understood through a conducive framework of Chickering's Theory of Identity Development. The theory consists of seven vectors of development, these include, "Developing Competence", "Managing Emotions", "Moving through autonomy toward interdependence", "Developing Mature Interpersonal Relationships", "Establishing Identity", "Developing Purpose", and "Developing Integrity". (1969; Chickering & Reisser, 1993). These vectors become especially relevant among college students as they transcend their childhood

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and teenage years. They learn to develop competence alongside managing emotions, thereby leading to formation of identity and interpersonal relationships, and further strive towards purpose and integrity. Though these developments may not occur in a linear sequence, they represent the important dimensions of student development. Research has applied Chickering's Framework to understand student adjustment and development. A study conducted by Simpson & Burnett, (2017), found differences in GPA (Grade-Point Average) between commuters (students living at home) and residential students (students living away from home), supporting Chickering's conclusions of how students move through autonomy towards interdependence and development of competence and purpose.

As individuals face major changes and turning points in adolescence and adulthood while growing and developing where they make decisions regarding life (Orenstein&Lewis, 2022). With the commencement of university, students experience excitement along with apprehension while stepping into a new stage of their journey. The aspirations for a bright future are accompanied by letting go of the childhood dependency and taking over the adult responsibilities (Arnett,2000). Therefore, the environmental factors and support systems help in fostering the psychosocial development of an individual.

Over the last two decades, higher education in India has increased significantly. This has led to a change in the capacity of hostels as migrations for quality education have increased (Padhan,2023). This has resulted in challenges faced by students living away from their homes. The nature of academic demands and a different place, together create a stressful environment for the students and an increase in need for social support. Several studies across the globe discuss the various factors influencing students' life away from home include, loneliness, financial struggles, increased academic pressure (Joseph&N.T., 2023). The increased academic stress and being away from home impacts the healthy functioning of a student. Social relationships and academic stress are negatively correlated, thus having quality relationships is an essential part of one's well-being (Govindaraj & Kaur, 2017). Food plays a significant role in maintaining a healthy mind and body, living away from home may hamper the quality and quantity of meal intake (Rani, et al., 2018). Peer relations can be a double edged sword as seen in a study involving students in hostels at Delhi University campus where the students heavily rely on peers for emotional support. (Verma et. al, 2022). The differences in the challenges faced by students living at home and away from home will be explored in this study.

Entering higher education is a critical transition in a students' life and the living arrangements play an important role in this phase. Many Indian studies in the past have explored impact of different

living situations on social adjustment (Kanvad&Jansari, 2022), emotional intelligence and coping (Arya&Mathankar, 2025), financial burden due to accommodations (Shelkar&Ingle, 2025), dietary habits (Nayak et al,) and with many other factors. These studies, however, study these factors in isolation rather than considering a holistic view of a students' life where all these factors interact and impact each other. Moreover, hardly any study in India has explored or applied Chickering's vectors of identity development (Chickering& Reisser, 1969) in relation to students' struggles and their different living arrangements (at or away from home), leaving a gap in understanding the impact on their self concept, autonomy and social identity. This study aims to bridge these gaps by taking a holistic view of understanding students' experience. It takes in account the different living situations (at home and away from home) and its impact on various factors of students' lives via Chickering's (1969) theory.

METHOD

Design:

A qualitative approach was adopted to explore and understand the changes and challenges faced by students living at home and away from home through Chickering's Theory. This study took on an inductive route where an interview guide was prepared. The guide was inclusive of a variety of factors that were discovered through literature review. These factors included food and health, familial relationships, finances, sleep, academics, freedom/restrictions, and peer relationships. A pilot study was conducted to assess the feasibility of these factors as well as exploration of new ones. The new factors were included in the refined interview guide and further data was collected from three different groups- Students living at home, Students living away from home with supervision (Hostels & PGs), Students living away from home without supervision (Flats). The knowledge generated from this study will contribute to understanding students' perspective and devise strategies accordingly.

Sample:

Purposive sampling was used to recruit a sample of 14 students from different colleges of University of Delhi. It consisted of first, second and third year students with different living conditions- at home, hostel, PG, and flat. Participants were between the age 18-21 years including both male and female students.

Procedure:

One to one interviews were conducted in a span of 2 months, which followed a semi structured line of questioning. On average the interview lasted for 25- 30 minutes and they were audio recorded. Data was collected until saturation. Anonymity was maintained during transcription of data. Each student had been residing at their current accommodation for a minimum of 6 months when the interviews were conducted. This helped in maintaining a fair

assessment of the changes and challenges associated with the particular living environment.

Analysis:

Thematic Analysis was used to assess the interview transcripts for understanding the shared patterns among students. The steps outlined by Braun and Clarke (2001) were followed. The authors repeatedly viewed the transcripts with pre-determined factors in mind, and supplementing new factors along the process. A similar approach was followed for this study, by reviewing the transcripts, generating codes. Further, the codes were refined into themes which were then grouped in terms of similarity. Lastly, the themes were named and defined to capture the true meaning. The findings are reported on three levels.

FINDINGS

The beginning of college life progresses with a lot of changes and challenges for the students. As the study was done to navigate changes and challenges among college students living at home and away from home through Chickering's Vectors, the analysis was done at 3 levels.

- **factors affecting students living at home and away from home:**

It was reported that the transition from a familiar and supporting environment to an unfamiliar, diverse, and autonomous one, created a sense of uncertainty and excitement among the students. The responses suggested students' interests in trying out new friend groups, activities, and places in the initial months, giving themselves time to figure out their sense of self. They gradually adapt and adjust to the surroundings and available opportunities, paving the way for their long term goals. The changes and challenges experienced by the students can be categorised into comprehensive themes, inclusive of *Food and Health, Familial Relationships, Finances, Sleep, Academics, Freedom/Restrictions, and Peer Relationships*.

Food and Health :

The students living in hostels, flats, and PGs, raised concerns about changes in their dietary habits. These included poor quality of food and irregular consumption. Whereas, the students living at home reported consumption of good quality food and timely meals.

"maybe it could be less oily(Hostel 1;40-41)"

"the time we wake up the food has been eaten away or it has been removed. (PG2;63-64)."

"I have proper home cooked food, almost like three meals a day. Like proper breakfast, lunch and dinner. But junk food consumption has increased because everyday in college you have those small time periods in which you are free. (Home 3; 138-141)"

As college began, an initial increase in junk consumption was found in all the students; which decreased over time. Additionally, students living independently (in flats), reported an inconvenience of cooking meals on a regular basis.

Like I cook my own food and me and my flatmate cook, you know, make the food ourselves. So, it is difficult to manage. (F3;53-55).

A large number of students reported not engaging in physical activities and exercise due to time constraints

Familial Relationships:

An improvement in relationships with family was observed across all students. But the distance seemed to considerably contribute towards healthier relationships and better communication with the family. The students living away experienced an increased sense of freedom from being tied to familial routines and norms.

"after moving away from home I have become a lot closer (PG 2;31)"

"I think having that distance from your parents does allow you a lot of, you know, just your own leeway. (Hostel 1;11-12)."

Finances:

With the onset of college, the responsibility and freedom of finances increased collectively among all students. For students away from home, this responsibility was more emphasised and stressful, in comparison. It was found that most students were financially backed by their parents; few students supported themselves through internships and investments.

"My parents, they were like, now you are big. We trust you. You have so much money in your account. You are in control of your finances yourself. (F1;78-80). I managed all of my finances myself. (F1;87)."

"I get money from my parents for the rent and for living my life, to be precise. But I am also earning myself. So, that is something that I usually invest. (F3;98-102)."

A major portion of financial spending was devoted to bills, rent, and food for students away from home. For students at home, spending included transportation cost and food purchases.

"I usually spend my money on food. (F3;106). I get money for all the basic amenities that I need and I require in my daily life from my parents. I get money for rent, I get money for the food I am eating, I get food for the groceries I am buying. (F3;99-101)"

"I mostly spend on transportation and food. (Home 2;89)"

Sleep:

The students reported alterations in their sleep cycle to a great extent. They experienced troubles due to sleeping at odd hours and irregular sleep patterns. Majority of them got six to eight hours of sleep on average but not in one stretch. Students at home observed a better sleep cycle, in comparison, due to supervision.

"I think the sleep cycle has changed drastically. (Home 4;129)"

"I do get 8 hours of sleep. I do not get it in one stretch. (Home 2;141)"

"I sleep at very odd hours. I think at least 6 I get. 6 is something that is minimum. (F2;239-241)."

"There was a fixed timing at home. (Hostel 3;115)."

A negative shift in mood and behavior was made apparent, during exam time, due to sleep disturbances in most students. This further led to lack of focus and agitation among students.

"I feel tired and I feel a little agitated. (Home 1;177)"

"as we near the end of the semester, all the internals get compressed together, happen at the same time. So, for the last month of the semester, the sleep cycle gets pretty bad. (Hostel 1;191-193)."

"But when I couldn't sleep, I am like... Cranky."

Academics:

Transitioning from school to college, the students faced a more competitive environment leading to an increase in pressure and individual responsibility. Students noted a change in study pattern, focusing more on self study, and less dependency on teachers. Additionally, practical knowledge was primarily gained through exposure via projects and internships rather than the college curriculum.

"I think my grades went down. That was basically because the transition from school to college was a bit hard. Like, I didn't expect college to be this different from school. (Home 2;30-32)."

"Yeah, the method of studying, of course, it changed a lot. Like in school, we say our spoon feeding was there. And here in college, like teacher doesn't care about you at all.. (PG 1; 104-105)."

"The course has been helpful. But primarily my learnings come from my internship. (Home 1;129)"

The added responsibilities and extensive workload impacted the mental health and productivity of the students. These included burnout, frequent procrastination and lack of focus in students living away from home.

"I just recently went through a burnout. (F1;108-109)."

"It is quite difficult to manage when you have a lot of work load from the college or from anything else. (F2;66-67)."

"Since I started living alone. A big challenge is, I procrastinate a lot. Because back at home, you are monitored by your parents. Some way or the other. But when I'm alone, it's all on me. So I feel like I need to manage my time. (PG 4; 102-105)."

Freedom/Restrictions:

A vast difference was observed in terms of sense of freedom and responsibility among students living at home away from home, where the former enjoyed more freedom and less restrictions than the latter. Students living with supervision seemed to have more time restrictions than students living independently. Moreover, girls faced stricter time restrictions than boys in PGs and Hostels. Similarly, for students living at home, more freedom was given to the boys than girls.

"the level of freedom I experience here is far more than back at home. Because I don't have to answer anyone while living alone. I don't have to think, oh, I have to go out at this time and I need to be

back home at this time. Because there's no such restrictions here. (PG 4;41-43)."

"I was given freedom to come, go, not go. In that sense, I never had as such pressure. (Home 1;65-66)."

"I guess in PG the main issue for me is that you have to be on time for each and everything. The guard doesn't let us go out after 11 pm.(PG 2; 56-57)."

Lack of Privacy was a common issue expressed by students living at home. They experienced lesser physical and emotional boundaries and increased invasion of privacy, due to the presence of family members.

"The boundaries are never maintained in Indian households. So, I do feel like I have grown up enough to have my own private space even at home. (Home 1;65-66)"

"I have all the privacy I want and when it comes to freedom, I have all the freedom I want. I would not have my parents checking up on me where I am going at midnight. Then you do not have that urge to rebel (F3;65-68)."

Peer Relationships:

Different perspectives were reported by students about peer interactions. Students living away from home developed an increased dependence on social relationships. Some students seemed to be apprehensive in forming deeper friendships. Whereas, others were able to make strong and meaningful bonds with people around them. They collectively reported reduced contact with older/school friends since moving away.

"I think, in school, it was much easier to make, like, deeper friendships. It is very easy for me to make a lot of surface level, you know, friendships here.(Hostel 1;97-100)."

"The thing is, you find difficulty to find the right person actually. This is the main problem you face here. Like people here, it's about they are in your good time. Like people use you here basically.(PG 1 ;77-79)."

"we face each and every situation together. So, it's kind of a family. (PG 3 ;98)."

"Because, like, pretty much of them are scattered now. But, yeah, like, whenever they come, I am not over there. Whenever they are far from their home, I go. So, like, in a year, we don't get much of the time to hang out and all..(PG 3 ;20-23)."

Students living at home also seemed to be cautious while making friends. They had mixed experiences with relevance to social interactions, some toxic and some pleasant relationships.

"I'm really cautious whenever I'm making friends.(Home 2;186)."

"Everyone is something else on the face and other on the back.(Home 4;203)"

"But now I think there is a lot of calculation and all involved. You do not tell and speak about anything and everything. So, you

think it has kind of put a barrier.. More of like a boundary. (Home 3;73-75)."

"I met good friends, I met bad friends. .(Home 4;18-19)."

The themes reflect a sense of self awareness about their ongoing struggles and ability to deal with them. Most students assessed their notion of happiness and satisfaction in terms of academic as well as social validation and support; setbacks resulted in increased stress or apprehension among them. Students living at home stated having better emotional stability and security than those living away, who reported enjoying more independence and individuality.

- **Changes and challenges in the light of Chickering's Vectors of Identity Development**

The analysis was done using Chickering's Vectors of Identity Development.

Development Competence:

According to Chickering, this stage involves developing intellectual, physical, and social abilities that consist of enhancing academic skills, physical competence and social interactions. In sync with this theory, this study found out that the students living away from home developed a deeper sense of independence and responsibility of balancing college pressure along with a new living environment. In contrast, students living at home had to only adapt to the college setting. They learnt self-sustaining skills such as cooking, budgeting, cleaning and more. Whereas, the students living at home seem to still be dependent on their family for basic chores. Both groups of students developed advanced academic competence and individual learning, growing out of the spoon feeding system of school. The social competence also increased due to the diverse student population among all students; though increased social support was observed in students living away from home.

Managing Emotions :

According to this vector, individuals gain a nuanced understanding of emotional expressions and manage their feelings and thoughts better. Students living away from home often experienced feelings of homesickness and loneliness along with stress related to adapting to the new environment and responsibility. The major source of emotional support came mostly from the peers whereas the students living at home had a safety net in the form of family. This study found that managing emotions became an integral part of both the groups of students due to formation or break ups of relationships. Anxiety and Excitement also stemmed in both groups due to future uncertainties.

Autonomy to Interdependence :

Chickering, in his theory, emphasises that individuals understand the importance of mutual support and connection with others and begin to create a balance between self and others. This study observed a major shift towards autonomy was observed in students living away from home in terms of finance, decision

making, and crisis management. They relied more on their peers for emotional and social support. In contrast, students living at home had familial influence on decision making and other restrictions such as curfew or accountability of every action, to their family. Lack of Privacy was a major concern for both the groups due to shared accommodations or familial interference.

Developing Mature Interpersonal Relationships:

Through this vector, Chickering sheds light on the formation and maintenance of healthy and lasting relationships. It also comprises inclusivity and minimising the differences. In this study, students living away from home reported improved communication with family due to distance in comparison to students living at home. All students were exposed to a variety of values and beliefs which enhanced their understanding of different perspectives and relationships. Students living away had relatively deeper connections as friends were their primary source of support, and they formed deeper and lasting relationships. Students living at home had familial commitments and conflicts leading to comparatively less social or cultural exploration.

Establishing Identity:

Chickering explains that individuals start to get a stable sense of understanding of oneself and get comfortable with it. It was seen that the independence and responsibilities gained from living away from home led to a stronger individual perspective and independent establishment of identity in students. This is due to the individual's curiosity to shape their identity without the influence of their family members. On an individual level, they took into account what's wrong or right for them through their everyday encounters or hardships. The identity and ideas of students living at home were still deeply influenced by their family's beliefs systems. Their actions were guided by their ongoing family customs or ethics which may have restricted their independent thinking. Despite the guidance, one's actions and knowledge of right or wrong shapes the identity.

Developing Purpose:

In this vector, according to Chickering, individuals develop future goals and commitment to achieve them. The development of a sense of purpose was observed to be driven by parents or other family members of students living at home. They were heavily influenced by the expectations of their family members and were invested to take up the career paths desired by their family. Meanwhile, students living away from home had greater freedom to explore their career interests. Their freedom also allowed them to set goals for self, thus enhancing motivation and an increased sense of purpose to thrive for success.

Developing Integrity :

Through this vector, Chickering states aligning one's values and beliefs with one's actions. This acts as a guiding light to help individuals gain perspective of self and others. The moral influence for students living at home was through their parents or guardians.

They facilitated this notion as they were surrounded by their family members most of the time. On the contrary, students living away from home were found to be motivated through the increase in exposure to new people and new challenges that they encounter. Their social setting was found to be more nuanced that helped to foster their life's integrity.

- **Comparative Narratives of experiences of different groups undertaken for the study**

In addition to Chickering's vectors, the issues faced by students at home settings in contemporary times revolved around food, relationships, commuting, curricular and co curricular performance, sleep, and going out restrictions. Students living away from home with supervision experienced issues related to poor quality of food, hygiene concerns, lack of privacy due to shared accommodations, roommate troubles and adjustment, going out curfew (stricter for girls), loneliness and homesickness. Students living away from home without supervision faced problems like unhealthy food consumption, daily chores, financial responsibility, and looking after themselves but they enjoyed more freedom to live on their own terms.

Students living at Home :

Students living at home reported consuming good quality food though the eating patterns were irregular. An increase in junk food consumption has been observed since the onset of college. The students were not burdened with house chores which cleared their schedules for other activities. The relationship with family improved but the students still experienced lack of privacy and personal boundaries at home. In terms of going out, while students usually had to inform their families beforehand, the boys faced fewer restrictions than girls. Students became more independent and financially responsible. A major portion of their spending was commuting resulting in long travelling hours; further impacting their curricular and co curricular performance. All students reported variation in sleep patterns due to changes in their everyday routine following shifts in moods and behavior. The majority of students maintained connections with their old school friends while making new friendships in college with peers from diverse backgrounds. In conclusion, students navigated changes in their personal, social and familial relationships, with increased independence and responsibilities balancing changes between college life and home environment.

Students living away from home with supervision:

Students living in hostels and PGs reported complaints of poor quality food, and time limitations with respect to availability of food. The students were assisted by the staff members of their accommodation; for daily chores inclusive of laundry, cooking, and cleaning. The relationships with families improved due to distance; students experienced an increased sense of responsibility and independence. In terms of going out, time restrictions were more

strict for girls in comparison to boys. Additionally, permission had to be granted by wardens or authorities prior, along with rigid curfews. Students gained slightly more financial independence and responsibility, but the majority of them were dependent on their parents for rent and other expenses. They experienced higher levels of dependence on their peers in times of difficulties or emotional support. The students raised hygiene concerns along with lack of privacy due to sharing living space with fellow residents. Additionally, the differences among roommates led to stressful situations and adjustment problems. The presence of security cameras and guards ensures security of students living within the facility. The students frequently experienced feelings of loneliness and homesickness more in the initial days of college, with time, these feelings eased as they adapted to the environment. In conclusion, students reported an adequate adaptation to their new living situations, despite their initial and ongoing difficulties. A sense of purpose among students outweighed the challenges faced.

Students living away from home without supervision:

Students living in flats reported discomfort regarding increased unhealthy food consumption by excessive ordering in. Additionally, responsibilities to cook for themselves along with purchasing groceries and other essentials, added to their troubles. They were liable to cater to their own needs of food, laundry, cleanliness, budgeting. Students required financial assistance from their parents primarily for rent, however, some students partially supported themselves through investments and internships. Their relation with the family also improved due to distance and sense of independence, enabling better and open communication. Living independently allowed them the freedom to go out as they pleased, without imposed restrictions. In terms of social relationships, an increase in dependence on friends was observed along with adjustments with people from varied backgrounds. Living away from family came with a lot of responsibility which further enabled them to tackle multiple tasks along with academics. In times of illness, they lacked familial support and had to take care of themselves on their own. The security of the students living in flats was in their own hands despite the availability of security cameras in most vicinities, and presence of landlords. Living away from family came with a lot of responsibility which further enabled them to tackle multiple tasks along with academics. In conclusion, these conditions transformed them into responsible and self-sufficient individuals with a sense of maturity among them.

Limitations and Future Suggestions:

This study had a few limitations that should be acknowledged. The sample was confined to the students of Delhi University only, so the findings may not be generalisable to the whole student population. Further studies can include diverse university backgrounds. A quantitative analysis of factors provides numerical data for statistical understanding that can enhance the generalizability

of student experience. There was reluctance from students with the mention of a few factors such as substance use. Further studies can take measures focusing on sensitive topics such as these. Moreover, researchers can build a stronger rapport by conducting follow up interviews to get in depth understanding of the individuals' perspective. There is a need to develop interventions for student support to enhance adaptability to the process of transition. Future studies can work upon interventions such as a functional mentor-mentee program, support groups, life skills and well being programs, one to one counselling sessions and many more.

Conclusion:

This study dives into various factors such as eating habits, sleep patterns, health, financial responsibility, academics, familial and peer relationships, and more that affect the students during this time. It explores how students tackle various situations and living conditions along with the additional responsibilities of taking care of oneself and focusing on career prospects. Psychological and social guidance along with learning basic skills like cooking, financial literacy, time-management, social communication contribute to shaping the university life. Applying Chickering's Vectors of Identity Development further highlights the unique changes and challenges faced by students living in different environments in terms of identity establishment, autonomy, emotional management and relationship formation.

Prior preparation regarding independent living like budgeting, basic cooking and self management can be fostered among the students by parents. Further, one to one interactions with academic staff can offer enhanced emotional, social and academic management. Mental health support from professionals can contribute towards better adjustment of an individual.

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Phobia, depression, anxiety and quality of life among working and non-working patient with diabetes

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Diabetes mellitus is a metabolic disease, and it is the major public health issue across the world. Earlier research observed that patients with diabetes and comorbid depression had poor quality of life. Hence, this research aims to compare the depression, phobias, anxiety, and quality of life of working and non-working patients with diabetes who are insulin dependent. Methods: This research is a cross-sectional, hospital-based study conducted at SGT Hospital, Gurugram. 100 patients with diabetes, 50 working and 50 non-working insulin-dependent patients, were selected using the purposive sampling method. Results: The present study found that the quality of life, especially in the physical and environmental domains, is better in non-working patients with diabetes than in the working patients with diabetes. Further, there is a significant positive correlation between depression and phobia in non-working patients with diabetes. Conclusion: This research recommends individualised psychological counselling for patients with diabetes mellitus, which helps them manage their significant comorbidities, such as depression and anxiety, because it has a direct impact on their quality of life.

Keywords: diabetes mellitus, depression, anxiety, quality of life, phobia, purposive sampling.

INTRODUCTION

Diabetes mellitus is a metabolic disease, and it is one of the major public health issues across the world (WHO, 2014). Earlier research observed that patients with diabetes and comorbid depression had poor quality of life (Goldney et al., 2004). Individuals with diabetes experience anxiety (Grigsby et al., 2002). In a meta-analysis of 27 studies, it was observed that significant association between depression and diabetes complication such as diabetic retinopathy, nephropathy, neuropathy, and sexual dysfunction (de Groot et al., 2001). Conversely, it was also studied that depression leads to the onset of diabetes mellitus (Sernyak et al., 2002). Furthermore, the fear of hypoglycemia is another common psychological issues in people with diabetes than the non-diabetes (Nefs et al., 2015). In a study conducted at Nepal which analyzed 296 patients with diabetes and reported 57.8% suffering from depression and 49.7% from

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anxiety (Sharma et al., 2021). Similarly, in another study by Baxi et al. (2025) 200 adults with Type 2 diabetes mellitus examined and reported that 31% had clinical depression and 30% had anxiety. In addition to this it was observed that duration of diabetes is more than 10 years then the rate of depression and anxiety is much higher (Baxi et al. 2025).

METHOD

Sample:

This research is a cross-sectional, hospital-based study conducted at SGT Hospital, Gurugram. 100 patients with diabetes, 50 working and 50 non-working insulin-dependent patients, were selected using the purposive sampling method. The current study aims to compare the depression, phobias, anxiety, and quality of life of working and non-working patients with diabetes who are insulin dependent. The present research hypothesises that there will be no significant difference in fear, phobia, depression, anxiety, or quality of life among working and non-working insulin-dependent patients with diabetes.

Tools Used:

1. The Hospital Anxiety and Depression Scale (Zigmond & Snaith, 1983) comprise 14 items, 7 items each in anxiety and depression, to identify the presence and severity of depression and anxiety in non-psychiatric settings.
2. The Severity Measure Specific Phobia – Adult (Craske et al., 2013) is a 10-item measure that assesses the severity of specific phobia in individuals age 18 and older. The total score range between 0 and 40, with greater scores indicating greater severity of specific phobia.
3. The World Health Organization Quality of Life-BREF (WHO, 1996) is a 26-item self-reported questionnaire which measures physical health, psychological health, social relationships, and environment.

Procedure:

Permission from the institutional ethics committee was obtained. Following this approval, the Department of Medicine in SGT Hospital, Civil Hospital Chakkarpur and Lal Pathology Lab were approached, and permission was obtained to conduct the study in patients with diabetes. Afterward, those patients with diabetes who fulfilled the inclusion and exclusion criteria were selected for the study. Informed consent was taken after explaining the objective of the study. Subsequently, hospital anxiety and depression scale, severity measure specific phobia – adult, and WHOQOL-BREF were

administered to all the patients with diabetes. Data analysis was executed using the Statistical Package for Social Science (SPSS) version 16.0. Descriptive statistics were used to analyse the sociodemographic details, and an independent sample “t” test was conducted to compare the differences in phobia, depression, and anxiety between insulin-dependent working patients and non-working patients with diabetes. Pearson correlation was analysed to see the relationship among the variables.

RESULTS

Table 1: Socio demographic and clinical variables of working patients with diabetes and non-working patients with diabetes.

Variables		Working diabetes Mean±SD, n(n%)	Non-Working diabetes Mean±SD, n(n%)
Age		49.26±14.76	40.88±10.68
Duration		5.51 ± 3.11	4.90±3.23
Gender	Male	31(62.0%)	22 (44.0%)
	Female	19(38.0%)	28 (56.0%)
Marital status	Unmarried	6(12.0%)	6(12.0%)
	Married	44(88.0%)	44 (88.0%)
SES	Lower	12(24.0%)	6 (12.0%)
	Middle	35(70.0%)	34 (68.0%)
	Upper	3 (6.0%)	10 (20.0%)
Habitat	Rural	22(44.0%)	19 (38.0%)
	Urban	28(56.0%)	31 (62.0%)
Family type	Nuclear	24(48.0%)	28(56.0%)
	Joint	26(52.0%)	22 (44.0%)
Family history of diabetes	Yes	30(60.0%)	29(58.0%)
	No	20(40.0%)	21(42.0%)

Note: N=100 (50 in each group)

Table 1 shows that the mean age of the working patient with diabetes is higher than that of the non-working patient with diabetes. However, the mean duration of illness is similar in both groups. Likewise, both groups had higher married patients. Both groups had an equal number of responses indicating a family history of diabetes in the family.

Table 2 shows the comparison of depression, anxiety, phobia and quality of life between working and non-working patients with diabetes using an independent sample “t” test. The quality of life is better in non-working patients with diabetes than in the working patients with diabetes. Similarly, non-working patients with diabetes

were having a better quality of life in the physical and environmental domains.

Table 2: Comparison of depression, anxiety, phobia and quality of life between working patients with diabetes and non-working patients with diabetes.

Variables	Working patient with diabetes Mean±SD	Non-Working patient with diabetes Mean±SD	t	df	p
Depression	10.44±1.90	10.84±2.02	-1.017	98	.312
Anxiety	10.10±1.89	10.20±2.08	-.251	98	.802
Phobia	1.04±.72	1.06±.86	-.125	98	.901
Quality of life	43.90±8.13	51.08±10.54	-3.81	98	.001*
Physical	11.76±4.25	14.16±6.22	-2.25	98	.027*
Psychological	13.20±5.18	13.44±4.85	-.239	98	.812
Social relationship	5.34±2.60	6.18±3.52	-1.35	98	.178
Environment	13.66±4.68	17.04±7.95	-2.58	98	.011*

Note: N=100 (50 in each group)

Table 3: The relationship between anxiety, depression and phobia and quality of life in working patients with diabetes

Variables	Depression	Anxiety	Phobia
Depression	----	.200	.066
Anxiety	.200	----	.092
Phobia	.066	-.092	----
QOL	-.393**	.100	.092
Physical	.003	.042	.203
Psychological	.240	.169	.197
Social Relationship	.053	.165	.085
Environment	-.315*	.206	.109

Note: n=50, *.05 ** 0.01

Table 3 shows the association between anxiety, depression, phobia, and quality of life when working with diabetes using the Pearson correlation. There is a significant negative correlation between depression and overall quality of life as well as the environmental quality of life for patients with diabetes who are working.

Table 4: The relationship between anxiety, depression, phobia and quality of life in non-working patients with diabetes

Variables	Depression	Anxiety	Phobia
Depression	----	.114	.400**
Anxiety	.114	----	.064
Phobia	.400**	.064	----
QOL	-.346**	.043	.156
Physical	-.327*	.188	.084
Psychological	.232	.056	.032
Social Relationship	.013	.236	.049
Environment	.155	.255	.182

Note: n=50, *.05 ** 0.01

Table 4 shows the relationship between anxiety, depression, phobia and quality of life in non-working patients with diabetes using Pearson's correlation. There is a significant positive correlation between depression and phobia. Conversely, there is a negative correlation between depression and quality of life. Additionally, there is a correlation between depression and the physical domain of quality of life specifically in non-working patients with diabetes.

Discussion:

The present study found that the quality of life is better in non-working patients with diabetes than in the working patients with diabetes. This finding is in support of the previous research (Glasgow et al., 1997), which reported that the type II diabetic patients on insulin reported a greater impact on the quality of life than did those on oral medications, diet only, and patients with type I diabetes.

Similarly, the current research observed that non-working patients with diabetes were having a better quality of life in the physical and environmental domains. This finding agrees with the previous research that reported lower physical quality of life (Glasgow et al., 1997). Jacobson et al. (1997) reported quality of life decreased in relation to the number of complications. This research found that depression increases and the overall quality of life decreases in working patients with diabetes. This finding is in accord with the previous research, which reported that the development of co-morbid anxiety and depression in people with diabetes not only leads to increased disease severity but also leads to complications, work disability and poor quality of life (Khwaja et al., 2010). The present study found that when depression increases the environmental domain of quality of life decreases in working patients with diabetes. This finding agrees with the previous research (Davis et al., 2005) reported that quality of life decreased as the severity of hypoglycaemia increased. The present study found that depression decreases; phobia also decreases in non-working patients with diabetes. This finding is in accord with the earlier research reported that the occurrence of depression and anxiety is high among admitted patients with diabetes (Sharma et al., 2021).

Conclusion:

This research recommends individualised psychological counselling for patients with diabetes mellitus, which helps them manage their significant comorbidities, such as depression and anxiety, because it

has a direct impact on their quality of life.

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Perfectionism and academic procrastination among college students: A systematic review

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Perfectionism and Academic Procrastination among college students is a growing concern in today's world. The stressful environment and tight deadlines often shift individuals with perfectionist tendencies to gravitate towards negative coping styles such as procrastination. To study this phenomenon, a systematic review of empirical studies was conducted to understand the association between perfectionism and academic procrastination. The review was conducted in accordance with the PRISMA guidelines, and established sources and databases, including PubMed, Google Scholar, and Scopus, were searched to select studies published within the past twenty-five years. Among the 115 studies reviewed, 52 studies were selected on the basis of the inclusion criteria. Studies assessing the multidimensional facets of perfectionism and academic procrastination using structured and validated questionnaires on undergraduate and postgraduate students were included in the study. The reviewed literature suggested that the maladaptive patterns of perfectionism, namely socially oriented perfectionism, doubt over action, and concern over mistakes, are positively associated with higher levels of academic procrastination. On the other hand, the adaptive patterns of perfectionism, such as organisation and some dimensions of self-oriented perfectionism, show weak, inconsistent, or non-significant relationships with academic procrastination.

Keywords: Perfectionism, Academic Procrastination, College Students, Academic Delay, Avoidance Coping

INTRODUCTION

Academic procrastination, also defined as the intentional, voluntary, and irrational delay of academic tasks in spite of knowing the fact that it may lead to negative consequences, is one of the most widely studied constructs in behavioural challenges in the educational context. Steel (2007), in an extraordinary meta-analysis, estimated that procrastination affects 80-85% of college students in their academic terms, with at least 50% stating it as a habitual and problematic pattern (Day, Mensink, & O'Sullivan, 2000). The effects and consequences of such actions are more than just missed deadlines: consistent academic procrastination is associated with lower academic grades, heightened academic stress, diminished psychological well-being, and increased rates of dropout intention (Tice & Baumeister, 1997; Balkis & Duru, 2016). Given its

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prevalence and negative consequences, understanding the psychological antecedents of academic procrastination in college is both a theoretical priority and a practical necessity.

Among the various variables related to behaviour and cognition in procrastination, perfectionism stands out. Perfectionism is generally defined as the tendency to hold excessively high and personal standards for oneself, to evaluate one's performance with excessive criticism, and the tendency to accept anything other than perfection as utter failure of oneself. (Frost, Marten, Lahart, & Rosenblate, 1990). Since the 1990s, previously treated as a monolithic trait, perfectionism has since moved away from that perspective. Frost et al. (1990) identified six distinct dimensions: concern over mistakes, parental criticism, parental expectations, doubts about actions, personal standards, and organisation, while Hewitt and Flett (1991) distinguished between self-oriented, other-oriented, and socially prescribed variants.

The link between academic procrastination and maladaptive perfectionism is well known. When talking from a self-worth protection perspective (Covington, 1992), students with unrealistically high standards often delay the start of tasks so as not to disappoint themselves. If something never starts in the first place, it cannot disappoint one. Fear of judgment and perfectionist distortions, such as all-or-nothing thinking, compound this avoidance (Burns, 1980; Flett & Hewitt, 2002). Steel's (2007) Temporal Motivation Theory adds upon the fact that when one expects their success rate to always be low, the motivational value of starting the task loses its value, making the delay the most obvious choice with the least resistance.

Despite the growing literature, inconsistencies are evident: evidence on adaptive perfectionism is mixed, key mediators and moderators remain unintegrated, and no systematic review has extensively examined this phenomenon within college populations. The present review addresses this gap by laying out the map of the relationship between the two perfectionism subtypes and procrastination, identifying the variables that shape and affect it, and extracting implications for academic support and teaching practice.

Models of Perfectionism:

According to Frost et al. (1990), six perfectionism dimensions exist, namely concern over mistakes, parental criticism, parental expectations, personal standards, doubts about actions, and organisation, of which concern over mistakes and doubts about actions have consistently shown association with avoidance, anxiety, and rumination. Hewitt and Flett (1991), on the other hand provided a model displaying the complex interplay between dimensions such as self-oriented, other-oriented, and socially prescribed perfectionism; the last rooted in the view that others hold impossibly high standards for self has been repeatedly linked to procrastination, as perceived distress and external judgement increases the fear of failure and reduces task engagement (Flett et al., 2012). The most conceptualised

distinction between adaptive and maladaptive perfectionism for this review has been formalised by Slaney et al. (2001) through the Almost Perfect Scale-Revised. Adaptive perfectionists tend to set high standards for themselves and then, in turn, experience satisfaction when those standards are met through task completion; whereas maladaptive perfectionists tend to experience a discrepancy though the standards they set and the actual work done by them. It is this discrepancy subscale, capturing the subjective experience of eternal inadequacy, that has been most seen and predicted procrastinatory behaviour in college student samples (Rice, Richardson, & Clark, 2012).

Theories of Academic Procrastination:

Steel and König's (2006) Temporal Motivation Theory remits one's motivation to act and work upon tasks is a function of the subjective expectancy that one has of success, task value, and sensitivity to delay. For maladaptive perfectionists, expectancy is eternally subdued; the standards for perfect work are set so high that they are perceived as unlikely to be reached or met by the students themselves, leading to systematically undervaluing the task and making the decision to ignore it, in fact, a rational choice. Covington's (1992) self-worth theory offers an interrelated account: students inherently choose to protect their ability sense, and procrastination in turn acts as a self handicapping ability, providing an inevitable reason for the task delay. Failure that is attributed to a loss of and inadequate time [provided is more acceptable to an individual, the reason being their own inadequate ability, a logic that is favoured by maladaptive perfectionists whose inherent self-worth often relies on academic outcomes.

The Perfectionism–Procrastination Interface:

Together, ultimately, all these theories point to the same conclusion. Maladaptive perfectionism, characterised by concern over mistakes, doubts about actions, fear of failure, and a persistent perceived gap between standards and performance, produces a motivational and affective profile that is very similar to procrastination. Low viewed expectation rate (TMT), the need to limit oneself by self-handicapping to protect self-worth (Covington), and the reduction of self-regulatory capacity through continued anxiety (Baumeister & Heatherton) each contribute a distinct but mutually strengthening pathway from perfectionism to delay.

METHOD

The current review was undertaken and organised in line with the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) guidelines (Page et al., 2021). These guidelines provide a standardised framework for identifying, screening, appraising, and synthesising empirical literature, ensuring transparency and replicability in the review process.

Search Strategy:

An intense literature search was carried out across multiple databases that include but are not limited to Psych INFO, PubMed,

and Google Scholar. These databases were used on the basis of their wide coverage of various disciplinary fields and backgrounds relevant to the review topic at hand.

The search was managed using a structured combination of specific keywords related to the review topic. Searches were limited to publications appearing between 2000 and 2025, to reflect the main period of research where adaptive/maladaptive distinction became a main topic of discussion and validated procrastination started being implemented.

Eligibility Criteria:

Studies were selected using a specific set of inclusion and exclusion criteria, defined beforehand following the PICO framework (Population, Intervention/Exposure, Comparator, Outcome).

Inclusion criteria:

Only those empirical and review-based articles were selected where:

- The studies involved the sample population of participants who were college or university students (undergraduate or postgraduate level)
- The study measured perfectionism using a standardised and validated instrument (e.g., Hewitt-Flett MPS, Frost Multidimensional Perfectionism Scale, Almost Perfect Scale-Revised)
- The study measured academic procrastination using a structured, standardised, and validated questionnaire (e.g., Procrastination Assessment Scale for Students, Academic Procrastination Scale, Tuckman Procrastination Scale)
- The study reported a relationship between perfectionism and procrastination.

Study Selection :

The study selection adhered to the four-stage PRISMA framework, undergoing identification, screening, eligibility, and inclusion. Titles and abstracts that were initially reviewed were evaluated against a predefined inclusion and exclusion criteria, and the studies that satisfied these criteria at the abstract screening stage were recovered in full text for comprehensive assessment.

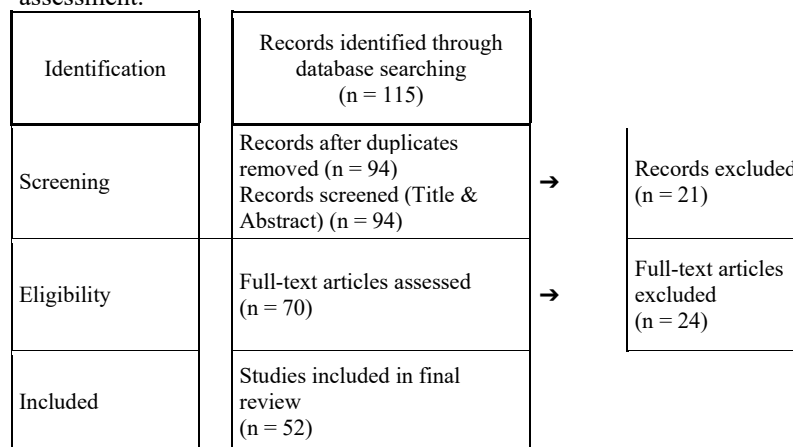


Figure 1. PRISMA 2020 Study Selection Flow Diagram

Quality Assessment:

The quality of each of the studies included was examined using the Mixed Methods Appraisal Tool (MMAT; Hong et al., 2018), which provides a standardised framework for appraising quantitative, qualitative, and mixed-methods studies. Each study was rated on five criteria: representativeness of the sample, measurement reliability and validity, adequacy of sample size, quality of statistical methods, and handling of competing variables.

Thematic Synthesis of Findings:

The selected papers were reviewed and thematically analysed to identify and understand the recurring patterns in the relationship between perfectionism and academic procrastination in college students. The results are presented with the major and main themes that emerged across the empirical and review-based papers.

RESULTS

The final structured search and screening process ended with 52 empirical and review-based studies meeting the eligibility and inclusion criteria, publications from 2000 to 2025. The included studies sampled university students across North America, Europe, Asia, Australia, and the Middle East. The selected studies were mainly cross-sectional and correlational, with a few of them being meta-analyses, theoretical, and narrative reviews. Most studies employed perfectionism measures were the Frost Multidimensional Perfectionism Scale (FMPS; Frost et al., 1990), the Hewitt-Flett Multidimensional Perfectionism Scale (MPS-H; Hewitt & Flett, 1991), and the Almost Perfect Scale-Revised (APS-R; Slaney et al., 2001). Academic procrastination was most commonly tested using the Academic Procrastination Scale (APS) and the Procrastination Assessment Scale for Students (PASS; Sollomon & Rothblum, 1984). Findings are systematically and thematically viewed across four main areas: the relationship between maladaptive perfectionism and academic procrastination, the relationship between adaptive perfectionism and procrastination, psychological mediators and moderators, and academic and psychological outcomes.

Maladaptive Perfectionism and Academic Procrastination:

The most consistent findings across the reviewed papers were the positive association between maladaptive perfectionism and academic procrastination. When talking about the different dimensions and subtypes of maladaptive perfectionism, concerns over mistakes and doubts about actions emerged the most consistently. According to Frost et al. (1990) anxiety and avoidance were mostly commonly associated with the dimensions, while the dimension 'personal standards' was mainly along the lines of distress, a pattern that was consistently replicated and observed cross-culturally by Jadidi et al. (2011), where doubts over actions, concern over mistakes, and parental criticism, all positively predicted procrastination, and by Stöber and Joormann (2001), who found that FMPS maladaptive dimensions were closely associated with worry, which remained a significant correlate of procrastination after

controlling for variables such as anxiety and depression, while the dimension of personal standards showed no such association.

According to Flett et al. (1992) socially prescribed perfectionism can be counted as one of the strongest predictor of procrastination, the key mediator functioning as fear of failure, repeated in a study by Onwuegbuzie (2000), who pointed out the argument that is avoidance is driven by not by self-standards but rather the anticipation if the external judgement of the task; Saddler and Buley (1999) similarly in their study found that primary regression predictor was concerning the negative evaluation. The two major meta-analyses taken in this review confirmed this: Sirois et al. (2017), who found $r=+.23$ across 43 studies and Xie et al. (2018) found $r=+.200$ across 21 studies, with both noting effects attenuated or reversed under unidimensional operation alisation explaining the negative overall correlation ($r=-.52$) reported by Sudirman et al. (2023) as combining opposing subscales cancels their effects, hiding real relationships in the total score.

Adaptive Perfectionism and Academic Procrastination:

The meta-analyses papers acted as the best directional guidance papers. Both Sirois et al. (2017) and Xie et al. (2018) reported significant negative associations between perfectionistic strivings, the adaptive dimension capturing high personal standards and achievement orientation, and academic procrastination. Stoeber, Stoeber, and Otto (2006) reached the same conclusion, where concerns were noted to be consistently associated with maladaptive aspects, and strivings were inversely associated with procrastination. Frost and Marten (1990) specified them within proper dimensions: one's personal standards imposed on oneself were negatively correlated with procrastination, while externally imposed standards, such as parental expectations, showed positive correlations, hence determining that it is not solely the intensity but also the source of the perfectionism that determines the path of procrastination.

However, several studies had rather contradictory results as well. Capan (2010) found that the dimension of self-oriented perfectionism significantly predicted procrastination in Turkish undergraduates, partially affecting its characteristic and status as an adaptive form of perfectionism. Steel (2007) found that when perfectionism was studied in its unidimensional context and factors such as impulsivity, conscientiousness, and self-efficacy were controlled, the relationship with procrastination reached zero, suggesting that rather than having a direct protective effect, the negative associations could rather be a reflection of the shared variance with conscientiousness. Chu and Choi (2005) added a fresh perspective by differentiating active and passive procrastination, noticing that individuals who had high standards for self would deliberately engage in a strategic delay with positive outcomes, therefore raising the inevitable question of whether the occurrence of reduced procrastination in adaptive perfectionists was due to reduced avoidance of tasks or rather simply a more functional form of it.

Psychological Mediators and Moderators:

The most consistent and common supported mediator that came out in the analysis was self-efficacy, with the meta-analyses having evidence of full mediation (Xie et al., 2018) and it being replicated individually in studies as well (Huang et al., 2025), though partial mediation with resilience emerging as an additional moderator in nursing students (Huang, Ding et al., 2023). The most dominant procrastination driving factor was fear of failure, which accounted for nearly half of the variance (Solomon & Rothblum, 1984), and was a trait that was consistently replicated across decades (Flett et al., 1992; Onwuegbuzie, 2000; Hasan, 2025), who added on imposter syndrome as a potential under study related pathway.

Self-control failure and ego depletion act as mechanisms that carry distinct intervention implications (Zhang et al., 2022) and short-term mood relief, maintaining emotional dysregulation (Sirois & Pychyl, 2013). Cultural context also moderated all the pathways, for example, China's Gaokao system amplifying the maladaptive effects (Huang et al., 2025), whereas the Indonesian Islamic sample showed a rather atypical negative correlation, attributing norms that framed delay as a moral failing of one, and suppressing typical avoidance (Sudirman et al., 2023).

Discussion:

This systematic review reviewed a total of 52 papers that were empirical and theoretical studies on perfectionism and academic procrastination. The evidence supported a varied but coherent picture: where, while perfectionism does not entirely predict procrastination, it isn't also completely protective of it either. The direction, magnitude, and operative mechanism of the relationship depend on which perfectionism dimension is examined, which psychological processes mediate the association, and within which cultural and educational context the student is situated.

The most robust and theoretically significant findings of this review are that the direction of the perfectionism-procrastination relationship is dependent on its subtype. Maladaptive perfectionism-which includes concerns over mistakes, doubts about action, parental expectations and criticism, self and socially prescribed perfectionism-has consistently predicted higher procrastination in the reviewed literature, whereas adaptive perfectionism- personal standards, organisation- was negatively associated with delay and task aversion. These patterns can be followed from the established theory; Covington's (1992) self-worth framework that states how to protect one's self-concept from evaluative threat, and an individual engages in maladaptive perfectionism; Temporal Motivation Theory (Steel and König, 2006) predicts how chronic and consistent concern over mistakes suppresses one's success expectancy, making the path of delay the least psychologically resistant and most effective route. Aggregating subtypes whose effects oppose in direction produces composite scores that cancel real relationships, most plausibly explaining Steel's (2007) near-zero association under multivariate

control. Subtype disaggregation is a methodological necessity, not an optional refinement.

To understand why maladaptive perfectionism produces delay means to move beyond simply fear of failure, which although is robust, is not entirely sufficient in itself. Zhang et al. (2022) identify a resource exhaustion pathway, which dictates how perfectionism depletes self-regulatory capacity and produces delay through self-control rather than simple deliberate avoidance. Sirois and Pychyl (2013), on the other hand, located the mechanism of emotion regulation failure, where avoidance is maintained in the short-term mood relief it provides. These accounts are not isolated but rather complementary, where together they position perfectionism-driven procrastination as something that is simultaneously driven by cognitive appraisal, negative reinforcement, and affective dysregulation. Self-efficacy runs all three mechanisms, also the most commonly cited mediator in this review (Xie et al., 2018). If the driving force of procrastination is perfectionism, then simply targeting the factor of self-efficacy and fixing it will not be enough; efficacy needs to be targeted through mastery experiences and a more realistic standard setting.

Practical Implications:

There are several practical implications of this study. Campus counselling services should move beyond simply basic time management interventions and target the cognitive and affective bases of perfectionist-based procrastination directly. CBT that addresses concerns over mistakes and its catastrophic appraisal of imperfectionism is one of the most empirically structured and validated approach (van Eerde & Klingsieck, 2018), while ACT (Acceptance and Commitment Therapy) is best suited to the emotional regulation aspect of it by building a psychological flexibility towards the aversive internal states of self. Accounting for the important role of self-efficacy, counselling protocols should involve graduated task completion, and reattribution of difficulty from ability to strategy alongside perfectionism-focused cognitive work.

At an institutional level, restructuring important assessments into repeated formats, stages, submissions, etc., distributes the value into smaller, lower-risk tasks and therefore reduces the catastrophic effect that is attributed to a single task.

At the individual level, students who gradually learn to respond to imperfection with self-compassion rather than pure self-criticism show a significantly reduced perfectionism-driven delay (Burnam et al., 2019). Structured and organised self-regulatory habits, deciding in advance when and how to start a task, and intentionally scheduling the recovery time will further enable students to at least act on their intentions even when anxiety and self-doubt are present (Baumeister & Heatherton, 1996).

Limitations:

There are several limitations in the review that limit and constrain the conclusions and outcome of this review. The majority of the studies selected for this review were cross-sectional in nature, not longitudinal; they established associations but did not study causal direction. The questionnaires used in the studies were self-report in nature, which in turn introduces social desirability bias and shared method variance that may inflate the observed correlations. Although there are studies from China, India, Indonesia, Pakistan, Iran, and Turkey that show the effect of cultural context on these variables, there are far too few to generalise them to the general population and public. Future research should prioritise longitudinal designs and cross-cultural studies in under-represented non-Western cultural contexts.

Conclusion:

Across the whole review three main findings consistently emerged; maladaptive perfectionism (concern over mistakes, doubt over action, self-doubt, socially prescribed standards) reliably predicts procrastination while adaptive perfectionism does not, and treating them as one construct hampers this and explains much of the field's inconsistent results in the previous results. The relationship is consistently mediated through self-efficacy, fear of failure, and emotion dysregulation, which means that interventions would have to target multiple mechanisms at once. Even though cultural context heavily affects these results, the large Western sample poses a barrier to truly understanding these concepts. Perfectionism is not a fixed trait but rather something that can be worked with, and there are real points of intervention available at the level of individual thinking, therapeutic practice, and how institutions are designed and run.

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Parenting practices and career decision making among indian college students : A systematic review

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Career decision making is a crucial phase in an individual's life. Career decisions are shaped not only by personal factors but also by environmental factors. Particularly in Indian socio-cultural context, parenting practices such as parental support, involvement, and family dynamics play an important role in influencing individuals career choices. The present systematic review aims to examine and synthesise empirical studies on the influence of parenting practices on career decision-making among Indian college students. A systematic search was conducted across multiple databases (google scholar, PubMed, ResearchGate etc). A total of 22 studies meeting the inclusion criteria were included in the final review. The findings indicate that positive parenting practices, such as emotional support and encouragement, are associated with higher career decision making, self efficacy and greater clarity in career choices. In contrast, excessive control and parental pressure are associated with career indecision, stress and low autonomy. Also, parental involvement appears to have a dual role, where moderate involvement facilitates better decision making, while over-involvement may hinder independence. The findings are important for educators, counsellors and policy makers, as they highlight that supportive and balanced parenting can help students make confident and independent career choices.

Keywords: Parenting Practices; Career Decision-making; Indian College students; Parental Influence; Career Choices.

INTRODUCTION

Making decisions regarding one's career path is a key phase in students life as it influences their occupational identity and long term life outcomes. This complex process is an interplay of personal factors such as interests, abilities, and personality traits as well as contextual factors particularly, family and parenting practices (Lent, Brown & Hackett, 1994). In a collectivist society, like India , where there is a strong emphasis on values like connectedness, family commitment and adherence to societal norms, parents often play an active and decisive role in shaping an individual career and occupational choices. (Arulmani, 2013).

Career Decision Making:

Career decision making refers to the process of identifying, evaluation and choosing a career path amongst multiple occupational options. It is a complex and multidimensional process shaping one's

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personal and professional domain. According to *Social cognitive career theory* (SCCT) (Lent, Brown & Hackett, 1994), career choices are shaped by the three interactive factors i.e. self-efficacy, outcome expectations and personal goals. Self efficacy is defined by one's beliefs about his/her ability to perform a particular behaviour or action. Individuals' belief about what will be the consequence or result of performing such action is termed as outcome expectation. Personal growth refers to one's intention or willingness to engage in such actions. Therefore, a person with a strong level of self-efficacy and supportive environment is more likely to engage in effective career decision making. Positive parenting practices, such as guidance, support and involvement foster self confidence and a sense of autonomy in an individual leading to independent decision making.

Parenting Practices:

The word 'parenting' has its roots in the Latin word 'Parere' which means 'upbringing'. Thus, in simple terms, parenting refers to the process of upbringing a child by providing care, protection and guidance. Parenting Practices refer to behaviours and attitudes adopted by parents in raising and guiding their children. Baumrind (1991) conceptualised these parenting practices under the broader framework of parenting styles, namely, authoritarian, authoritative and permissive. Parenting practices characterised by high warmth and moderate control are linked with positive outcomes such as high self-esteem, better decision making skills and greater autonomy (Steinberg, 2001; Baumrind, 1991).

Researchers in Vocational psychology have highlighted the active role of parenting in shaping children's aspirations and motivations. Supportive parenting enhances confidence and foster career exploration among children which leads to positive career development and career commitment (Winston & Keller, 2004).

Although there are empirical studies, exploring the influence of parenting practices on individual career decisions among students, there is a noticeable lack of systematic review synthesizing these findings within Indian Context. Therefore, the present systematic review aims to bridge this gap by integrating findings from various empirical studies to provide a holistic overview of parenting practices and its influence on career decision making among college students.

Objectives of Review:

- To conduct a systematic review of existing empirical studies on parenting and career decision making among Indian students.
- To synthesize and integrate key findings on parenting practices and career decision making.
- To provide a comprehensive understanding of how parenting practices influences career decision making among Indian college students.

METHOD

Study Design:

This systematic review aims to identify and summarise existing empirical evidence on the influence of parenting practices on career decision making among Indian college students. Relevant studies were carefully selected based on predefined inclusion criteria and were analysed to synthesise key findings.

Search Strategy:

A systematic search of empirical studies was conducted across multiple databases such as Google Scholar, PubMed, Science Direct, Scopus and Research Gate. Relevant studies were identified using keywords such as “parenting practices”, “parenting styles”, “family influence”, “career decision making”, “career choices”, “college students”, “India” etc.

Inclusion criteria:

1. Studies examining the influence of parenting practices on career decision making.
2. Studies conducted on students in India.
3. Any studies (qualitative, quantitative and mixed method studies) were included.
4. Studies published in the English language.
5. Studies conducted in the past 10 years i.e. from 2015-2025 only.

Study Selection Process:

The process of selecting studies for review was conducted systematically. Relevant studies were initially identified from multiple databases and duplicate records were removed. The remaining studies were screened based on titles, abstracts and full text to assess eligibility. Based on the predefined inclusion and exclusion criteria, a total of 22 studies were included in the final review.

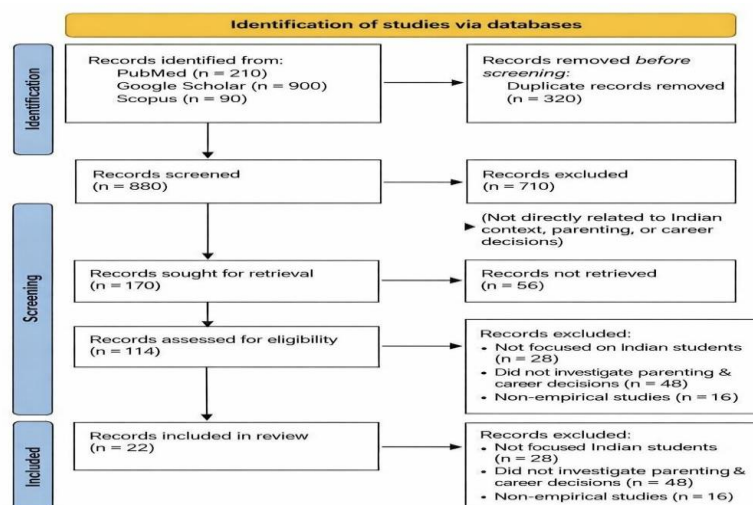


Figure 1: Flow diagram of study selection process.

Data Extraction:

Relevant information was extracted from each study including author(s), year of publication, sample characteristics, study design and measurement tool used. Additionally, key findings related to the influence of parenting on career decision making were recorded. The data from the included studies was systematically organised in excel sheets.

Quality Assessment of studies:

The methodological quality of included studies were evaluated to ensure the reliability of the findings. For assessing the quality of studies, each study was assessed for sample adequacy, clarity of research design and reliability and validity of measurement tools used to measure the study variables namely parenting practices and career decision making.

RESULTS

The findings from the selected studies were systematically analysed to identify similar and recurrent themes in the role of parenting practices on career decision making among Indian students. This systematic review highlighted both positive and negative influence of parental involvement in shaping career related outcomes.

Supportive parenting builds confidence in career decisions:

Many empirical findings highlighted the crucial role of supportive and encouraging parenting in enhancing students' confidence in career decision making. Parental emotional and psychosocial support significantly predicts higher self efficacy among college students (Disha et al., 2023; Jha & Hassan, 2024). Jeyabanu et al. (2025) found that parental involvement reduces career indecision. This indicates that when parents are supportive and show active involvement, children tend to have clarity and guidance in their decision making process and thus tend to make effective career choices.

Excessive parental pressure leads to stress and poor decision outcomes:

While balanced parental involvement is beneficial, its opposite is also true. Excessive pressure from parents can have negative effects. High parental expectations can lead to stress, low self esteem, and reduce interest in chosen careers (Mazumder & Begum, 2025). Also, when parents impose career choices on their children, it negatively affects their academic performance (Padhay & Mahapatra, 2023). Studies have shown excessive parental control also reduces autonomy which can negatively impact one's motivation and leads to career dissatisfaction (Sakthi & Maruthivijayan, 2025).

Dual role of Parenting : Guidance vs Control:

One of the common findings across many studies is that parenting has both positive and negative influences. A study on parental control and academic decision making highlighted that supportive guidance fosters autonomy while restrictive control diminishes autonomy (Meena et al., 2024). Another study highlights that parental involvement does not always increase career

decidedness, implying that over involvement can limit independent decision making and can create confusion (Jeyabanu et al., 2025). This is a crucial finding which highlights that for a healthy career development, a balanced parenting approach is crucial.

Career decision making is shaped by Indian socio-cultural expectations :

In India, there is a strong role of cultural and social factors in influencing one's decision. Parents often encourage careers associated with security, financial stability and social prestige such as engineering and medicine (Mazumder & Begum, 2025; Disha et al., 2023). Along with parental influences, family expectations, societal norms and at times extended family or relatives also contribute in shaping career decisions (Sakthi & Maruthuvijayan, 2025). These findings show us how in collectivistic cultures like India career decisions are not limited to individual personal choices but they are closely tied to family expectations.

Socio-economic and gender factors influence parental impact:

It is important to note that in India, parental influence on children is not uniform. It varies across social, economical and gender contexts. Bhatia and Babu (2021) in their qualitative study on adolescent girls, found that girls belonging from underprivileged backgrounds had lower career aspirations due to lack of awareness, limited opportunities and restrictive parental expectations. Whereas girls from privileged backgrounds, often view their parents as their role models and aspire to follow their path. Gendered differences in perceived parenting and career decision making indicated boys and girls experience parenting differently.

Need for balanced parenting and career guidance interventions :

The systematic review of these studies emphasizes on the strong need for balanced parental involvement. Mazumder & Begum (2025) recommend reducing excessive pressure and promoting open communication between parents and students. Sakthi (2025) highlighted the importance of career counselling and informed guidance to support student's decisions. Parents should act as a facilitator rather than decision makers in their children's career journey (Disha et al., 2023).

Discussion:

This systematic review focuses on understanding the role parenting practices play in career decision making among students within Indian context. The findings from selected empirical studies indicate that parents act as both a supportive and sometimes a restrictive force. Supportive parenting practices, like encouragement, guidance, involvement, significantly associated with higher confidence, reduced career indecision and better career-related outcomes. On the other hand, excessive parental pressure and control leads to diminished autonomy, stress, confusion, indecisiveness and dissatisfaction with career choices.

A crucial theme emerging from the review is the need for a balanced parenting. Over involvement of parents can foster lack of

clarity and lack of ability to make independent choices. Effective career decision-making requires personal exploration as well. However, the review also highlighted how strongly socio-cultural factors affect one's career decisions. Overall, the review highlights how balanced parenting, which involves support without excessive control, is crucial for healthy career development.

Implications:

The findings have important implications for educators, counsellors and policymakers. Career counselling programs should actively involve parents and focus on promoting balanced parental engagement that fosters students autonomy and independence.

Integrating career guidance services within educational institutions can help students make informed and autonomous career decisions.

Future direction:

Future research should focus on conducting more qualitative and mixed method studies to capture the lived experiences of students and parents, particularly in the Indian context. Future studies can also examine the effectiveness of career counselling interventions that involve both students and parents.

Conclusion:

In conclusion, this systematic review aims to understand the role parenting practices plays in career decision making by examining the existing literature and empirical studies. The findings emphasise the importance of balanced parental involvement that provides guidance and allows independent decision making. Promoting awareness, strengthening career counselling systems, encouraging students autonomy are important for effective and healthy career development. The findings contribute to deeper understanding of the interplay between parenting and career decision making and provide foundation for future research in the area of education and youth development.

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A systematic review on the role of perceived parental emotional responses

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Adolescence is a critical developmental period marked by rapid emotional and social changes, where emotional intelligence (EI) plays a central role in psychological adjustment and well-being. The present systematic review examines the relationship between perceived parental emotional responses and emotional intelligence among adolescents, synthesizing findings from 53 empirical studies across diverse cultural contexts. The findings consistently indicate that supportive parental emotional responses, such as warmth, validation, and emotion coaching, are associated with higher emotional intelligence, better emotion regulation, and positive psychosocial outcomes. In contrast, unsupportive responses, including rejection and emotional invalidation, are linked to emotional dysregulation and maladaptive adjustment. Emotional regulation emerged as a key mechanism underlying these associations, while contextual factors such as gender and cultural background further influenced outcomes. Overall, the review highlights the relational nature of emotional intelligence and underscores the importance of family emotional environments in shaping adolescents' emotional development. It also identifies methodological limitations in existing research and emphasizes the need for more longitudinal and multi-informant studies to advance the field.

Keywords: Emotional Intelligence; Parental Emotional Responses; Emotion Socialization; Adolescence; Emotion Regulation; Parenting Styles; Psychosocial Adjustment; Family Environment

INTRODUCTION

Adolescence represents a critical developmental period characterized by rapid emotional, cognitive, and social changes, during which individuals refine their ability to understand, regulate, and utilize emotions effectively. Emotional intelligence (EI), conceptualized as the capacity to perceive, process, and manage emotional information, has been consistently associated with psychological adjustment, resilience, and interpersonal competence during this stage of life. At the same time, family environments, particularly parents' emotional responses to adolescents' emotional expressions, serve as a primary context through which emotional competencies are shaped. Perceived parental emotional responses, including supportive or dismissive reactions to adolescents' emotional experiences, play a significant role in influencing how young people interpret, express, and regulate their own emotions.

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Theoretical frameworks such as emotion socialization theory and attachment-based models suggest that parental reactions to children's emotions function as social learning mechanisms that contribute to emotional development. Empirical research has demonstrated associations between parental emotional warmth, supportive emotion coaching, and positive developmental outcomes, including higher emotional competence, prosocial behavior, and psychological well-being. Conversely, unsupportive or negative parental responses—such as punishment, neglect, or emotional invalidation—have been linked to emotional dysregulation and increased internalizing difficulties. Despite growing interest in these constructs, the literature remains fragmented, with studies often examining parental emotion socialization, emotional intelligence, or adolescent adjustment in isolation rather than integrating these variables within a unified framework.

Existing research also reveals inconsistencies in findings regarding how adolescents' perceptions of parental emotional responses relate to emotional intelligence outcomes. While some studies emphasize the protective role of supportive parenting behaviors, others highlight contextual moderators such as gender, cultural background, and interpersonal relationships that influence emotional development. Additionally, many investigations focus on early childhood or general parenting styles, leaving a relative gap in systematic syntheses centered specifically on adolescents' perceived parental emotional responses and their relationship with emotional intelligence. This fragmentation makes it difficult to draw cohesive conclusions about underlying mechanisms or to identify patterns across diverse empirical findings.

Given these limitations, a systematic review is necessary to synthesize current evidence, evaluate methodological trends, and clarify the relationship between perceived parental emotional responses and emotional intelligence in adolescents. By integrating findings across multiple empirical studies, the present review aims to identify common themes, theoretical convergences, and gaps that remain underexplored in the literature. Addressing this research gap is essential for advancing conceptual clarity and informing future interventions that support adolescents' emotional development within the context of family relationships.

Objectives of the Review:

1. To systematically synthesize existing empirical evidence examining the relationship between perceived parental emotional responses and emotional intelligence among adolescents.
2. To identify patterns, associations, and underlying mechanisms through which parental emotion socialization influences adolescents' emotional development and related psychosocial outcomes.

3. To highlight gaps, inconsistencies, and underexplored areas within the current literature in order to inform future research directions and intervention frameworks.

Eligibility Criteria:

The eligibility criteria were developed to ensure conceptual alignment with the review focus on perceived parental emotional responses and emotional intelligence in adolescents. Studies were selected based on the following predefined parameters:

Population Characteristics:

Studies were included if participants belonged to late childhood, adolescence, or emerging adulthood, as these developmental stages are critical for emotional intelligence and emotion regulation development. Research focusing solely on early childhood or adult clinical populations was excluded unless adolescent experiences of parental emotional responses were examined retrospectively.

Conceptual Variables:

Eligible studies were required to examine parental emotional processes such as parental emotional responses, emotion socialization, emotional warmth, parental emotion regulation, family emotional communication, or related constructs. Additionally, studies investigating adolescent emotional intelligence, emotion regulation, internalizing symptoms, resilience, psychosocial adjustment, or socio-emotional developmental outcomes were included when these variables were theoretically connected to parenting emotional behaviors.

METHOD

Design of Study:

Only empirical quantitative or mixed-method studies published in peer-reviewed journals were included. Cross-sectional, longitudinal, experimental, correlational, and multilevel modeling studies were considered eligible. Purely theoretical papers, editorials, commentaries, and non-peer-reviewed grey literature were excluded to maintain methodological rigor.

Publication Characteristics:

Studies published in English and accessible through academic databases were included. Although no strict temporal boundary was imposed, emphasis was placed on contemporary literature reflecting current theoretical and empirical developments in parental emotion socialization and adolescent emotional functioning.

Exclusion Criteria:

Studies were excluded if they:

- Did not involve parental emotional constructs,
- Focused exclusively on unrelated academic or behavioral outcomes without emotional variables,
- Lacked sufficient methodological transparency,
- Or did not examine adolescent developmental contexts.

Information Sources:

Relevant studies were identified through systematic searches of major psychological and interdisciplinary research databases. Primary information sources included databases commonly used within developmental and clinical psychology literature, such as PsycINFO, PubMed, Scopus, ScienceDirect, SpringerLink, Taylor & Francis Online, Frontiers in Psychiatry, and Google Scholar.

In addition to database searches, manual screening of reference lists from relevant empirical papers was conducted to ensure comprehensive coverage of the literature. This snowballing approach helped identify additional studies addressing parental emotional socialization, adolescent emotional development, emotional intelligence, and related constructs that may not have appeared in initial keyword searches.

The final pool consisted of fifty-three studies that collectively represented diverse cultural contexts, methodological designs, and developmental frameworks relevant to adolescent emotional functioning.

Search Strategy:

The search strategy was guided by a conceptual framework integrating parental emotional processes with adolescent emotional development outcomes. Searches were conducted using combinations of keywords representing three main domains:

Parental Emotional Constructs:

Parental emotional responses, emotion socialization, emotional warmth, parenting emotional regulation, parental emotion coaching, parental rejection, emotional availability, supportive parenting, and family emotional climate.

Adolescent Emotional Outcomes:

Emotional intelligence, emotion regulation, internalizing symptoms, resilience, psychosocial adjustment, prosocial behavior, academic stress, peer relationships, and social competence.

Developmental Context:

Adolescence, youth, teenagers, parent-child relationships, family communication, and emotional development.

The search process was iterative and adaptive. Initial searches generated a broad pool of studies, after which refined searches were conducted to ensure inclusion of literature examining mediational mechanisms (e.g., emotional intelligence, attachment, gratitude, or emotional self-efficacy) linking parental emotional behaviors with adolescent outcomes.

The aim of the search strategy was conceptual breadth rather than narrow keyword restriction, ensuring that studies examining closely related constructs were captured within the systematic review.

Study Selection Process:

Initially, titles and abstracts retrieved from database searches were screened to identify studies broadly relevant to parental emotional responses and adolescent emotional functioning. During

this phase, articles unrelated to emotional constructs or developmental populations were removed.

Following preliminary screening, full-text versions of potentially eligible studies were examined in detail. Each study was evaluated against the predefined eligibility criteria, including population characteristics, emotional constructs assessed, methodological design, and relevance to adolescent emotional development.

Studies meeting inclusion criteria were retained, while those lacking empirical data, conceptual alignment, or sufficient methodological clarity were excluded. Through this multistage process, a final sample of fifty-three empirical studies was identified for synthesis.

Data Extraction:

A structured data extraction framework was used to systematically organize information from each included study. For every article, key details were recorded to facilitate comparative analysis and thematic synthesis.

Extracted information included:

Author(s) and publication year, allowing chronological mapping of theoretical developments in parental emotion socialization research.

Sample characteristics, including age range, gender distribution, cultural context, and population type (community samples, school-based samples, or clinical risk groups).

Study design and methodology, such as cross-sectional surveys, longitudinal models, experimental interventions, multilevel modelling, or structural equation modelling approaches.

Measurement tools and constructs, including scales assessing parental emotional warmth, emotion coaching, emotional regulation, emotional intelligence, internalizing symptoms, peer relations, or psychosocial adjustment.

Major findings, particularly relationships between parental emotional responses and adolescent emotional intelligence, emotional regulation abilities, psychological well-being, or developmental outcomes.

This structured extraction process enabled identification of recurring theoretical themes, methodological patterns, and gaps within the literature, which informed the subsequent synthesis of findings in the systematic review.

Quality Assessment :

To ensure methodological rigor and enhance the credibility of the synthesized findings, the quality of the included studies was evaluated through a structured appraisal process. Rather than relying on a single checklist, studies were assessed across multiple methodological dimensions that are commonly emphasized in psychological research synthesis, including sampling adequacy, measurement validity, analytical rigor, and potential sources of bias.

Assessment of Sample Adequacy:

Each study was reviewed for clarity regarding sample characteristics, recruitment procedures, and representativeness. Particular attention was given to sample size, demographic reporting, and developmental relevance to adolescent populations. Studies with clearly defined participant criteria and sufficiently powered samples were considered to demonstrate stronger methodological quality, whereas research with highly restricted or poorly described samples was interpreted with caution during synthesis.

Measurement, Validity and Reliability:

The psychometric soundness of measurement tools constituted a central component of the quality assessment. Studies employing standardized, validated instruments to assess parental emotional responses, emotion socialization practices, emotional intelligence, or related constructs were considered to exhibit greater internal validity. Evidence of reliability indices (e.g., Cronbach's alpha) and established theoretical grounding of constructs were examined to evaluate consistency across studies.

Study Design and Analytical Rigor:

Methodological strength was further evaluated based on research design and statistical procedures. Longitudinal designs, multi-informant approaches, and advanced analytical models (e.g., structural equation modeling, multilevel modeling, or mediation analyses) were considered to provide stronger evidence regarding developmental processes and relational mechanisms. Cross-sectional designs were included but interpreted with recognition of their limitations in establishing causal relationships.

Risk of Bias Considerations:

Potential risks of bias were identified through examination of self-report dependency, cultural or regional sampling constraints, and common method variance. Studies relying exclusively on single-informant data were carefully contextualized, while those incorporating parent, adolescent, or observer reports were regarded as methodologically more robust. Additionally, publication bias was acknowledged as a possible limitation, given the predominance of peer-reviewed sources reporting significant associations.

Integration into the Review:

The quality assessment was used to guide the interpretation of findings rather than to exclude studies after selection. Studies with stronger methodology, such as clear sampling procedures, validated measures, and more rigorous research designs, were given greater consideration while discussing overall patterns in the literature. At the same time, findings from studies with certain limitations were included carefully, with their methodological constraints acknowledged during the synthesis of results.

RESULTS

The present systematic review incorporated a diverse body of empirical and theoretical literature examining perceived parental emotional responses, emotion socialization practices, and emotional

intelligence among adolescents. The included studies span multiple cultural contexts, methodological approaches, and developmental perspectives, reflecting the multifaceted nature of emotional development within family environments.

In terms of publication trends, the majority of studies were published between 2013 and 2025, with a noticeable increase in empirical research during recent years. Several recent investigations conducted in Asian contexts, particularly China, Korea, and Pakistan, such as Gao et al. (2025), Lee et al. (2025), and Khan et al. (2025), employed large adolescent samples ranging from approximately 300 to over 1800 participants, highlighting a growing focus on parental emotional socialization within collectivistic cultural frameworks. Similarly, European studies including Simao et al. (2025) in Portugal, Lisboa et al. (2024), and Cabello et al. (2023) contributed cross-cultural perspectives on emotional intelligence and parental influence. North American samples were also represented through longitudinal and cross-sectional investigations, such as Boullion et al. (2023) and Ratliff et al. (2023), reflecting broader international engagement with adolescent emotional development research.

Across studies, adolescent samples typically ranged from early to late adolescence, with most participants aged between 12 and 18 years. Sample sizes varied substantially, from smaller dyadic or daily-diary investigations such as Jobe-Shields et al. (2013) involving 104 adolescents, to large-scale panel datasets such as Lee et al. (2025) which analyzed 1852 Korean adolescents. Several studies included family-based samples or parent-child dyads, such as Cabello et al. (2023), Gurdal et al. (2016), and Clark et al. (2021), emphasizing intergenerational emotional processes. In addition, some investigations extended into young adulthood or university populations, such as Alati et al. (2020), reflecting long-term outcomes of parental emotional socialization.

Regarding research design, the included literature demonstrated substantial methodological diversity. Cross-sectional quantitative designs were most prevalent, including studies by Khan et al. (2025), Simao et al. (2025), Ratliff et al. (2023), and Yadav et al. (2021), which relied primarily on standardized self-report measures assessing parental emotional responses, emotional intelligence, and psychological outcomes. Longitudinal research was represented by studies such as Boullion et al. (2023) and Gurdal et al. (2016), which tracked developmental trajectories over time and examined how parental warmth or emotional regulation predicted later adjustment outcomes. Daily-diary and ecological methods, as seen in Jobe-Shields et al. (2013), provided micro-level insights into adolescents' perceptions of maternal responsiveness in real-time contexts.

A number of studies employed advanced analytical approaches, including latent profile or person-centered analyses, such as Gao et al. (2025), which identified distinct parental response patterns associated with depression risk and emotional dysfunction

among Chinese adolescents. Correlational and regression-based models were commonly used to examine relationships between parenting variables and adolescent emotional outcomes, as demonstrated in studies like Ratliff et al. (2023), Aniemeka et al. (2020), and Boullion et al. (2021). Additionally, several systematic reviews and theoretical analyses, including Srivastava and Bharti (2022), Hajal and Paley (2020), Lisboa et al. (2024), and Gonzalez et al. (2021), synthesized broader conceptual frameworks regarding emotional socialization and emotional intelligence.

Across the included studies, consistent patterns emerged regarding parental emotional warmth, emotional availability, and supportive emotional expression. For instance, Boullion et al. (2023) demonstrated that higher parental warmth predicted stronger emotional regulation and lower internalizing and externalizing symptoms among adolescents. Similarly, Ratliff et al. (2023) found that supportive emotional expression was associated with enhanced adolescent emotion regulation, whereas dismissive or punitive responses predicted poorer outcomes. Studies focusing on emotional availability, such as Babore et al. (2017) and Gokce and Yilmaz (2017), reported links between parental emotional support and reduced aggression, improved self-esteem, and healthier psychological adjustment.

Research examining emotional intelligence specifically highlighted both parental and contextual influences. Large-scale investigations such as Lee et al. (2025) emphasized the multifactorial nature of emotional intelligence, demonstrating contributions from family dynamics, educational environments, and broader socio-emotional contexts. Cross-cultural studies including Yadav et al. (2021) and Aniemeka et al. (2020) identified parenting styles, particularly authoritative or democratic approaches, as significant predictors of adolescent emotional intelligence and psychological well-being. Similarly, Cabello et al. (2023) reported intergenerational associations between parental and offspring emotional intelligence, with maternal emotional intelligence showing particularly strong effects.

Systematic reviews and meta-analytic studies within the dataset further contextualized these findings. For example, Llama-Dias et al. (2022) identified consistent associations between emotional intelligence and subjective well-being across adolescent samples, while Gonzalez et al. (2021) highlighted parental emotional intelligence as a protective factor for child mental health. Neurodevelopmental perspectives were introduced by Clark et al. (2021), who linked parental emotional availability with improved stress regulation and adaptive neurobiological outcomes in youth.

Overall, the included studies represent a comprehensive and methodologically diverse body of literature spanning theoretical reviews, cross-sectional surveys, longitudinal analyses, and systematic syntheses. Despite variations in cultural context and research design, a converging trend across studies indicates that

adolescents' perceptions of parental emotional responses, particularly warmth, responsiveness, and supportive emotion socialization, are consistently associated with emotional intelligence, emotional regulation, and broader psychological adjustment.

Thematic Synthesis of Findings:

The thematic synthesis integrates findings across the 53 included studies by organizing them into conceptually coherent domains reflecting the central focus of this review: perceived parental emotional responses, emotional intelligence, and adolescent emotional development. Rather than examining studies individually, this section synthesizes recurring empirical patterns, theoretical convergences, and contextual variations observed across the reviewed literature.

Parental Emotional Socialization as a Foundational Influence on Adolescent Emotional Development:

A dominant theme across the reviewed studies is the central role of parental emotional responses in shaping adolescents' emotional competence and psychological functioning. Multiple empirical investigations consistently demonstrated that adolescents' perceptions of parental emotional warmth, availability, or supportive responses were associated with healthier emotional outcomes.

For instance, Gao et al. (2025) reported that adolescents perceiving their parents as disengaging, demanding, or emotionally unsupportive exhibited increased depressive tendencies and emotional dysfunction, highlighting the active role of parental responses in shaping emotional well-being rather than merely reflecting it. Similarly, Boullion et al. (2023) and Ratliff et al. (2023) found that supportive parental emotional expressions predicted improved emotional regulation and reduced internalizing and externalizing symptoms, whereas dismissive or punitive reactions were linked with emotional distress. These patterns were further reinforced by Simao, Diniz, and Babore (2025), who observed that higher perceived parental emotional availability corresponded with better health-related quality of life among adolescents.

Narrative and theoretical works, including Wu (2025) and Hajal and Paley (2020), emphasized that parental emotional expression functions as a modeling mechanism through which adolescents learn emotional competence and coping strategies. Likewise, Srivastava & Bharti (2022) concluded that emotional warmth, communication, and responsiveness form a core set of socialization practices facilitating adaptive emotional expression. Collectively, these findings indicate that adolescents' emotional intelligence and regulation abilities are deeply embedded within relational contexts defined by perceived parental responsiveness.

Emotional Regulation as a Central Mechanism Linking Parenting and Emotional Intelligence:

Another major theme emerging across studies concerns emotional regulation as a mediating or explanatory pathway connecting parental emotional responses with adolescent outcomes.

Several empirical works demonstrated that supportive emotional climates foster adolescents' regulatory capacities, which in turn predict psychological adjustment and emotional intelligence.

Boullion et al. (2023) demonstrated emotional regulation as a mediator between parental warmth and reduced behavioural problems, particularly during the COVID-19 pandemic context. Similarly, Alati et al. (2020) found that unsupportive emotional socialization predicted maladaptive coping and heightened trait anxiety through poorer emotional regulation habits. Ratliff et al. (2023) reinforced this pathway, showing that adolescents exposed to supportive parental emotional expression displayed stronger regulatory skills compared to those experiencing neglectful or punitive responses.

Theoretical contributions also supported this pattern. Wu (2025) described emotional competence as largely shaped by parental emotional expression, while Hajal and Paley (2020) proposed that parents' own emotion regulation capacities influence how they guide, coach, or model emotional responses for their children. These converging findings suggest that adolescents' emotional intelligence does not emerge independently but develops through repeated regulatory experiences embedded in parent-child emotional exchanges.

Emotional Intelligence as a Multifaceted Outcome Influenced by Family and Contextual Factors:

Across the reviewed literature, emotional intelligence emerged as a multidimensional construct influenced by family dynamics alongside broader contextual variables. Lee et al. (2025), using large-scale panel data, demonstrated that adolescents' emotional intelligence was shaped collectively by parental, familial, and educational factors, highlighting its multifaceted nature. Khan, Khan, and Waqas (2025) further established significant relationships between parental expressed emotions, social-emotional competence, and vocational identity, suggesting that emotional intelligence extends into developmental domains such as identity formation.

Complementing these findings, Lisboa et al. (2024) identified strong links between emotional intelligence, personality traits, and pro-environmental behaviours, illustrating the broader psychosocial implications of emotional competence during adolescence. Clark et al. (2021) added a neurobiological dimension, showing that parental emotional availability influences stress regulation systems and adaptive brain functioning, thereby positioning emotional intelligence within biological as well as relational frameworks.

Psychological Adjustment, Well-Being, and Behavioural Outcomes:

A significant portion of the literature linked perceived parental emotional responses to adolescents' mental health, aggression, and overall psychological adjustment. Studies consistently reported that supportive emotional environments predicted healthier adjustment

patterns, whereas unsupportive socialization was associated with maladaptive outcomes.

Babore et al. (2017) found that higher parental emotional availability related to lower aggression and greater self-esteem, with self-esteem functioning as a mediating factor. Similarly, Gokce and Yilmaz (2017) demonstrated that lower perceived parental emotional support corresponded with poorer psychological health and dysregulated emotional patterns. Jobe-Shields et al. (2013) provided micro-level evidence through daily diary methods, showing that supportive maternal responses were linked with adaptive adolescent reactions, whereas neglectful responses were associated with avoidant or attacking emotional behaviors.

Longitudinal evidence from Gurdal, Lansford, & Sorbring (2016) further indicated that early parental warmth predicted later child agency and lower behavioural problems, reinforcing the long-term developmental significance of emotional socialization. Collectively, these findings suggest that adolescents' psychological adjustment is closely intertwined with how they perceive parental emotional responses, particularly in terms of warmth, responsiveness, and validation.

Gender, Cultural, and Contextual Variations in Emotional Socialization:

Although consistent patterns were observed across studies, contextual variations emerged as an important theme. Simao et al. (2025) reported gender differences in health-related quality of life, particularly among girls from separated or divorced families, suggesting that family structure may shape emotional outcomes. Cross-cultural analyses such as Srivastava and Bharti (2022) showcased that parenting practices influencing emotional competence vary across cultural settings while maintaining similar underlying principles of warmth and responsiveness.

Additionally, pandemic-related contexts, as discussed by Boullion et al. (2023) and Lee et al. (2025), demonstrated that external stressors can amplify the influence of parental emotional responses, positioning families as critical buffers against emotional disruption. These findings emphasize that emotional intelligence development is not uniform but influenced by gender roles, sociocultural expectations, and situational stressors.

Convergence of Theoretical and Empirical Perspectives:

Across the body of literature, theoretical models of emotional socialization aligned closely with empirical findings. Narrative and theoretical reviews (Hajal & Paley, 2020; Wu, 2025) consistently described emotional coaching, modeling, and regulation as core mechanisms, while empirical studies provided supporting evidence through cross-sectional, longitudinal, and neurobiological approaches. This convergence suggests a growing coherence in the field, where perceived parental emotional responses are increasingly recognized as central to adolescent emotional intelligence and adjustment.

Synthesis Summary:

Overall, the thematic synthesis reveals several consistent patterns across the reviewed studies:

- Supportive parental emotional responses, characterized by warmth, availability, and validation, are strongly associated with higher emotional intelligence, effective emotion regulation, and positive psychological adjustment.
- Emotional regulation functions as a key mechanism through which parenting influences adolescent emotional outcomes.
- Emotional intelligence emerges as a multidimensional construct shaped by family relationships, personality factors, and contextual influences.
- Cultural, gender-related, and situational factors modify how emotional socialization processes operate across adolescents.
- Theoretical frameworks of emotional socialization are strongly supported by empirical findings spanning psychological, developmental, and neurobiological perspectives.

Discussion:

Summary of Major Findings:

The present systematic review synthesized evidence from the selected studies to examine how perceived parental emotional responses and broader emotion socialization processes relate to adolescents' emotional intelligence, emotional regulation, and psychological adjustment. Across the included literature, several consistent patterns emerged that collectively highlight the central role of parental emotional environments in shaping adolescents' emotional development.

First, a strong and recurring finding across studies was that supportive parental emotional responses, including emotional warmth, emotion coaching, validation, and enhancing reactions to adolescents' affect, were associated with more adaptive emotional outcomes. Adolescents exposed to emotionally responsive parenting tended to demonstrate higher emotional competence, greater emotional intelligence, improved resilience, and more positive socio-emotional functioning. These supportive behaviours appeared to foster emotional awareness and regulation skills, which in turn contributed to better psychological adjustment and interpersonal functioning. Longitudinal and transactional studies further suggested that supportive emotion socialization operates as a dynamic process, with adolescents' emotional behaviours and parental responses influencing each other over time.

Conversely, unsupportive or negative parental emotional responses, such as rejection, magnification of distress, punishment, neglect, or dismissing emotional expressions, were consistently linked with maladaptive outcomes. Studies indicated associations between non-supportive emotion socialization and increased internalizing symptoms, emotional dysregulation, peer difficulties, and lower self-efficacy in managing emotions. These patterns suggest that when adolescents perceive parental emotional responses as

invalidating or controlling, their ability to develop effective emotional intelligence skills may be compromised.

Another major finding concerned the mechanisms underlying these associations. Multiple studies highlighted mediating pathways through emotional intelligence, gratitude, attachment security, or emotion regulation self-efficacy. For instance, parental emotional warmth and regulation behaviours were found to influence adolescents' psychological adjustment indirectly through emotional competencies, suggesting that emotional intelligence functions as an intermediary process linking parenting to developmental outcomes. Additionally, parental mental health factors, interparental conflict, and personality characteristics were shown to shape emotion socialization practices, indicating that the broader family emotional climate plays an important contextual role.

The review also revealed important developmental and contextual nuances. Although peers and teachers become increasingly influential during adolescence, the literature consistently emphasized that parental emotional responses remain a foundational influence on adolescents' emotional functioning. Gender-related patterns were noted as well, with some studies suggesting that girls may benefit more strongly from supportive parental emotion socialization in relation to internalizing symptoms and peer adjustment. Cultural and contextual diversity across studies further underscored that emotional socialization processes operate within specific social environments, yet the overall direction of findings remained broadly consistent.

Taken together, the synthesized evidence demonstrates that perceived parental emotional responses are deeply intertwined with adolescents' emotional intelligence and broader psychological development. Supportive emotional climates appear to facilitate adaptive emotional skills and resilience, whereas unsupportive practices are associated with risk for emotional and behavioural difficulties. These findings collectively reinforce the theoretical view that parental emotion socialization is a central developmental pathway through which adolescents learn to understand, regulate, and utilize emotions effectively.

Implications:

Theoretical Implications:

The present synthesis contributes to the growing body of developmental and family psychology literature by reinforcing the centrality of perceived parental emotional responses within adolescents' emotional intelligence development. Across the reviewed studies, consistent associations emerged between supportive emotional socialization, attachment processes, and emotional competence outcomes. These patterns strengthen theoretical frameworks such as attachment theory, emotion socialization models, and ecological systems perspectives by highlighting how adolescents' interpretations of parental emotional behaviour function as proximal mechanisms shaping emotional awareness, regulation, and interpersonal functioning.

Importantly, the findings suggest that emotional intelligence should not be conceptualized solely as an individual trait but rather as a relationally embedded construct influenced by family emotional climates and social learning processes. The integration of parental warmth, emotion coaching, and regulation modelling into emotional intelligence research extends traditional ability-based models by situating emotional development within dynamic interpersonal contexts. The observed bidirectional influences between adolescents' socio-emotional functioning and parental responses further support transactional developmental theories, emphasizing that emotional development unfolds through reciprocal interactions rather than unidirectional parental influence.

Research Implications:

From a research perspective, the synthesis highlights the need for more integrative and multi-variable approaches when examining adolescent emotional intelligence. Many studies examined isolated predictors; however, the collective evidence suggests that emotional intelligence is shaped through complex interactions among parenting behaviors, peer relationships, family communication patterns, and contextual stressors such as academic pressure or socioeconomic challenges. Future empirical models may benefit from incorporating mediation and moderation frameworks to better capture these interdependencies.

Additionally, the review underscores the importance of refining measurement approaches. Several included studies relied on adolescents' perceptions of parental responses, which are theoretically meaningful but may also introduce interpretative bias. Integrating multi-informant designs, observational methods, and longitudinal frameworks would strengthen causal interpretations and enhance conceptual clarity regarding how emotional intelligence develops over time.

Practice, Intervention, and Policy Implications:

The findings hold meaningful implications for educational, clinical, and family-based interventions. Evidence across the reviewed literature suggests that supportive parental emotional responses, including validation, emotional warmth, and constructive emotion coaching, may serve as protective factors fostering emotional competence and resilience among adolescents. Consequently, parenting interventions and psychoeducational programs could emphasize emotion-focused communication strategies rather than solely behavioral management approaches.

Within school contexts, the observed interaction between teacher–student relationships and parental emotional warmth showcases the need for collaborative ecosystems involving families and educators. Programs aimed at reducing academic stress or promoting emotional intelligence may achieve greater effectiveness when they integrate parental involvement and socio-emotional skill development simultaneously. At a broader policy level, these findings

support initiatives that promote family well-being, parental mental health resources, and accessible parenting education.

Limitations of the Review:

Methodological Limitations: Despite providing a comprehensive synthesis, several methodological limitations should be acknowledged. A substantial proportion of the included studies employed cross-sectional research designs, limiting the ability to infer developmental directionality or causality. While associations between perceived parental emotional responses and emotional intelligence were consistently observed, the temporal sequencing of these relationships remains uncertain.

Measurement and Reporting Constraints: Many studies relied heavily on self-report measures from adolescents or parents. Although perceptions of parenting are theoretically significant, exclusive reliance on subjective reporting may introduce response bias, social desirability effects, or shared method variance. The absence of consistent observational or experimental methodologies across studies may therefore constrain the robustness of conclusions drawn from the synthesis.

Conceptual and Cultural Limitations: Cultural representation within the included literature was uneven, with a notable concentration of studies conducted in specific cultural contexts such as East Asia, Europe, and North America. Parenting practices, emotional expression norms, and developmental expectations vary widely across sociocultural settings, which may limit the generalizability of the findings to broader populations. Additionally, variability in conceptual definitions and measurement tools for emotional intelligence and parental emotional responses created heterogeneity across findings. Publication bias also cannot be ruled out, as studies with significant findings are more likely to appear in peer-reviewed literature.

Future Directions:

Advancing Methodological Rigor: Future research should prioritize longitudinal and prospective designs to clarify the developmental pathways linking perceived parental emotional responses to emotional intelligence trajectories across adolescence. Multi-method and multi-informant approaches combining adolescent reports, parental perspectives, teacher observations, and behavioural assessments would provide a more comprehensive understanding of emotional development and reduce reliance on single-source data.

Expanding Contextual and Cultural Perspectives: Another promising direction involves exploring contextual moderators such as gender, cultural norms, family structure, and socioeconomic stressors. Several studies within the review suggested differential effects based on these variables, indicating that emotional socialization processes may not operate uniformly across populations. Greater cultural diversity and cross-cultural comparative research would therefore enhance the ecological validity of future findings.

Exploring Emerging and Strength-Based Domains: Future investigations should expand beyond deficit-focused frameworks and examine strengths-based developmental processes, including resilience, prosocial behaviour, and adaptive coping. Integrating positive psychology perspectives with family systems research may offer a more holistic understanding of adolescent emotional development. Additionally, emerging domains such as digital communication patterns, social media influences, and contemporary family dynamics remain relatively underexplored and represent valuable avenues for future inquiry.

Conclusion:

The present systematic review synthesizes contemporary research examining the relationship between perceived parental emotional responses and emotional intelligence in adolescents, highlighting the profound role of family emotional environments in shaping developmental outcomes. Across diverse cultural contexts and methodological approaches, the collective evidence suggests that adolescents' interpretations of parental warmth, regulation, and emotional communication consistently emerge as meaningful predictors of emotional competence, resilience, and psychosocial adjustment. Supportive emotional socialization appears to foster adaptive emotional understanding and regulation, whereas dismissive or negative parental responses are more frequently linked with emotional difficulties and maladjustment.

Beyond reinforcing existing theoretical perspectives, the review underscores the inherently relational nature of emotional intelligence, demonstrating that adolescents' emotional growth unfolds through dynamic interactions within family systems and broader social contexts. While methodological limitations and conceptual variability remain, the convergence of findings across studies provides a compelling foundation for future inquiry and intervention development. Ultimately, understanding adolescents' emotional intelligence through the lens of perceived parental emotional responses offers valuable insight into promoting healthier developmental trajectories and nurturing emotionally competent generations.

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Exploring the relationship between emotional regulation, perfectionistic self-presentation and instagram addiction among emerging adults

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Social media platforms such as Instagram have become an integral part of the daily lives of emerging adults and may influence the way individuals regulate emotions and present themselves to others. Emotional regulation strategies and perfectionistic self-presentation may therefore play an important role in shaping individuals' engagement with social media platforms. However, limited research has examined the combined role of emotion regulation and perfectionistic self-presentation in relation to Instagram addiction, particularly among emerging adults in the Indian context. Therefore, the present study aimed to examine the relationship between emotion regulation, perfectionistic self-presentation, and Instagram addiction among emerging adults. A correlational research design was employed and data were collected from 181 emerging adults aged between 18 and 25 years through digital platforms. The study used the Emotion Regulation Questionnaire, the Perfectionistic Self-Presentation Scale, and the Instagram Addiction Scale. Spearman's rank correlation test was used for analysis. The findings revealed that cognitive reappraisal showed a significant negative relationship with total Instagram addiction and the social effect subscale, but did not show significant relationships with compulsion or the dimensions of perfectionistic self-presentation. Expressive suppression showed significant positive relationships with self-promotion, non-display of imperfection, and non-disclosure of imperfection, but did not show significant relationships with Instagram addiction or its subscales. In addition, the dimensions of perfectionistic self-presentation showed significant positive relationships with total Instagram addiction and the social effect subscale, while no significant relationships were found with compulsion. The findings highlight the importance of strengthening adaptive emotion regulation strategies and promoting healthier self-presentation practices to reduce vulnerability to problematic Instagram use among emerging adults.

Keywords: emotion regulation, perfectionistic self-presentation, Instagram addiction.

INTRODUCTION

Emerging adulthood, typically between the ages of 18 and 25, is recognized as a distinct developmental stage characterized by identity exploration, emotional fluctuations, and significant life

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transitions (Arnett, 2000). During this period, individuals often face academic demands, career uncertainty, and evolving interpersonal relationships, which may increase their reliance on social media for maintaining connections, accessing information, and coping with stress. Among various platforms, Instagram has become particularly popular among emerging adults due to its visually oriented format and continuous feedback mechanisms, such as likes and comments, which encourage frequent engagement (Andreassen, 2015). Emotional regulation, defined as the ability to understand, manage, and modify emotional responses in accordance with situational demands (Gross, 1998; Gross & John, 2003), plays a crucial role in how individuals cope with psychological challenges. Individuals with poorer emotional regulation capacities may increasingly rely on Instagram for distraction or short-term emotional relief, which may, over time, contribute to problematic patterns of use (Kircaburun & Griffiths, 2018). Perfectionistic self-presentation, which involves the tendency to present oneself as flawless while concealing imperfections (Hewitt & Flett, 1991; Hewitt et al., 2003), is also particularly relevant in online environments. Instagram provides opportunities for selective self-presentation and social validation through likes and comments (Seidman, 2013; Toma & Hancock, 2013), potentially reinforcing such tendencies. Collectively, these psychological factors may contribute to Instagram addiction, characterized by excessive engagement, diminished control, and negative consequences in daily functioning (Kircaburun & Griffiths, 2018).

Existing literature indicates a significant association between emotional regulation difficulties and problematic Instagram use, with maladaptive strategies such as expressive suppression and emotional avoidance linked to higher levels of excessive and compulsive engagement (Drach et al., 2021; Özer et al., 2024; Sundrani, 2023). Similarly, perfectionistic self-presentation has been associated with increased Instagram use, as individuals who strive to maintain an idealized self-image and seek validation from others are more likely to develop addictive patterns of engagement (Musicò, 2025; Goljović, 2024; Ubaradka et al., 2023). However, most existing studies have examined emotional regulation and perfectionistic self-presentation independently, with limited attention to their combined influence on Instagram addiction, particularly among emerging adults.

Moreover, much of the existing research has focused on social media use in general or on platforms such as Facebook, with relatively fewer studies specifically examining Instagram as a distinct platform despite its widespread use among emerging adults (Swan, 2021; Andreassen, 2015). In addition, a substantial proportion of the literature has been conducted in Western contexts, with limited research focusing on the Indian population (Ubaradka et al., 2023). Therefore, there is a need to examine the combined role of emotional

regulation and perfectionistic self-presentation in influencing Instagram addiction among emerging adults within the Indian context, which may contribute to a more comprehensive understanding of the psychological factors underlying problematic Instagram use.

METHOD

Aim:

To examine the relationship between emotional regulation, perfectionistic self-presentation, and Instagram addiction among emerging adults.

Sample:

The present study adopted a correlational research design. The sample consisted of 181 emerging adults (77 males and 104 females) aged between 18 and 25 years, including both males and females. Participants were selected using convenience sampling. Individuals who had been using Instagram daily for at least six months and possessed basic English reading ability were included in the study. Individuals with a history of severe mental health conditions were excluded from the study.

Procedure:

Data were collected through an online survey using Google Forms. The questionnaire link was circulated through digital platforms such as email and social media to reach emerging adults. The survey included informed consent, demographic details, and standardized scales. Ethical considerations were maintained by ensuring voluntary participation, confidentiality of responses, and the right to withdraw at any stage without any consequences.

Tools Used:

Emotion Regulation Questionnaire (ERQ):

The Emotion Regulation Questionnaire developed by Gross and John (2003) was used to assess emotional regulation strategies. The scale consists of 10 items measuring two dimensions: cognitive reappraisal and expressive suppression. Responses are recorded on a Likert-type scale ranging from strongly disagree to strongly agree. The scale has demonstrated good reliability, with Cronbach's alpha values of 0.79 for cognitive reappraisal and 0.73 for expressive suppression.

Perfectionistic Self-presentation Scale (PSPS):

The Perfectionistic Self-presentation Scale developed by Hewitt and Flett (2003) was used to measure the tendency to present oneself as perfect and conceal imperfections. The scale consists of 27 items assessing three dimensions: self-promotion, non-display of imperfection, and non-disclosure of imperfection. Responses are rated on a Likert-type scale. The scale has demonstrated good internal consistency, with reliability values ranging from 0.78 to 0.85.

Instagram Addiction Scale (IAS-15):

The Instagram Addiction Scale developed by Kircaburun and Griffiths (2018) was used to assess problematic Instagram use. The

scale consists of 15 items measuring two dimensions: Compulsion and Social effect. Responses are recorded on a Likert-type scale. The scale has shown excellent reliability, with a Cronbach's alpha of 0.96 for the total scale.

RESULTS

Table 1: Descriptive analysis of variable

Variables	N	M	SD	Possible Range
Cognitive Reappraisal	181	28.87	6.37	6–42
Expressive Suppression	181	17.06	5.00	4–28
Self-Promotion	181	41.23	10.61	10–70
Non-Display of Imperfection	181	41.88	10.60	10–70
Non-Disclosure of Imperfection	181	27.41	7.60	7–49
Instagram Addiction	181	46.80	16.30	15–90
Social Effect	181	19.70	8.72	7–42
Compulsion	181	24.61	8.49	7–42

Since the assumption of normality was not satisfied, non-parametric statistical techniques were used for further analysis. Therefore, Spearman's rank correlation was used to examine the relationship between the variables.

Table 2 : Spearman's Rank Correlation between Emotional Regulation, Perfectionistic Self-Presentation and Instagram Addiction.

Variable	1	2	3	4	5	6	7	8
1. Cognitive Reappraisal	—	-.14	.06	.09	.03	-.18*	-.21**	-.04
2. Expressive Suppression		—	.30**	.19*	.42**	.01	.13	-.04
3. Self-Promotion			—	.66**	.62**	.17*	.24**	.022
4. Non-Display of Imperfection				—	.44**	.16*	.20**	.02
5. Non-Disclosure of Imperfection					—	.17*	.22**	-.07
6. Instagram Addiction						—	.87**	.74**
7. Social Effect							—	.46**
8. Compulsion								—

* $p < .05$, ** $p < .01$

From Table 2, cognitive reappraisal showed a significant negative relationship with total Instagram addiction ($r_s = -.18$, $p < .05$) and social effect ($r_s = -.21$, $p < .01$), while it did not show a significant relationship with self-promotion ($r_s = .01$, $p > .05$), non-display of imperfection ($r_s = .09$, $p > .05$), non-disclosure of imperfection ($r_s = .03$, $p > .05$) and compulsion ($r_s = -.04$, $p > .05$). In contrast, expressive suppression showed significant positive relationships with

self-promotion ($r_s = .30, p < .01$), non-display of imperfection ($r_s = .19, p < .05$), and non-disclosure of imperfection ($r_s = .42, p < .01$), but did not show a significant relationship with total Instagram addiction ($r_s = .01, p > .05$), social effect ($r_s = .13, p > .05$), or compulsion ($r_s = -.04, p > .05$). Further, self-promotion showed a significant positive relationship with total Instagram addiction ($r_s = .17, p < .05$) and social effect ($r_s = .24, p < .01$), while no significant relationship was found with compulsion ($r_s = .02, p > .05$). Similarly, non-display of imperfection showed a significant positive relationship with total Instagram addiction ($r_s = .16, p < .05$) and social effect ($r_s = .20, p < .01$), but did not show a significant relationship with compulsion ($r_s = .02, p > .05$). Likewise, non-disclosure of imperfection showed a significant positive relationship with total Instagram addiction ($r_s = .17, p < .05$) and social effect ($r_s = .22, p < .01$), while no significant relationship was found with compulsion ($r_s = -.07, p > .05$).

Discussion:

From Table 2, it can be observed that cognitive reappraisal showed a significant negative correlation with overall Instagram addiction as well as the social effect subscale. This suggests that individuals who frequently use cognitive reappraisal tend to experience lower levels of Instagram addiction and are less influenced by the social effects associated with Instagram use. Cognitive reappraisal refers to an adaptive emotion regulation strategy in which individuals change the way they think about a situation in order to regulate their emotional responses. According to the Process Model of Emotion Regulation proposed by Gross (1998), individuals can manage emotional reactions by reinterpreting emotionally relevant situations before the emotional response becomes fully developed (Gross, 1998). When individuals can reinterpret situations in a more balanced way, they may regulate negative emotions more effectively. As a result, they may be less likely to depend on social media platforms such as Instagram for emotional coping or reassurance (Drach et al., 2021). The present findings are consistent with previous research examining the relationship between emotion regulation and problematic social media use. Studies have reported that individuals with stronger emotion regulation abilities tend to report lower levels of social media addiction (Özer et al., 2024). Similarly, research examining Instagram use among young adults has found that higher levels of cognitive reappraisal are associated with lower levels of Instagram addiction (Sundrani, 2023). In addition, it has been suggested that individuals sometimes use social networking platforms as a way of regulating their emotions, indicating that those who already possess effective emotion regulation strategies may be less dependent on social media for emotional management (Drach et al., 2021). However, the results also showed that cognitive reappraisal did not have a significant relationship with the compulsion subscale of Instagram addiction, nor with the Perfectionistic Self-presentation

dimensions of Self-promotion, Non-display of imperfection, and Non-disclosure of imperfection. One possible explanation is that cognitive reappraisal mainly involves internal emotional regulation processes, whereas Perfectionistic Self-presentation reflects external behaviours related to how individuals present themselves to others on social media platforms. Therefore, the way individuals regulate their emotions internally may not necessarily influence how they choose to present themselves online.

From Table 2, it can be observed that expressive suppression showed significant positive correlations with the perfectionistic self-presentation dimensions of self-promotion, Non-display of imperfection, and non-disclosure of imperfection. Expressive suppression refers to an emotion regulation strategy in which individuals attempt to control or inhibit the outward expression of their emotions after the emotional response has occurred (Gross, 1998). Individuals who frequently use expressive suppression may try to hide their emotional experiences and maintain a controlled appearance during social interactions. Perfectionistic Self-presentation refers to individuals' attempts to appear perfect and avoid revealing imperfections to others, which may occur through behaviours such as Self-promotion, Non-display of imperfection, and Non-disclosure of imperfection (Hewitt et al., 2003). Individuals who rely on expressive suppression may therefore attempt to regulate their visible emotional expressions in order to maintain a favourable image in social situations. This may lead them to present themselves in a more positive manner, avoid displaying personal flaws, and refrain from revealing weaknesses, which correspond to the three dimensions of perfectionistic self-presentation.

In comparison with the findings related to cognitive reappraisal, expressive suppression showed a different pattern of results. Cognitive reappraisal did not show significant relationships with the perfectionistic self-presentation dimensions, whereas expressive suppression showed significant correlations with these variables. This difference may be explained by the way these two emotion regulation strategies operate. Cognitive reappraisal mainly involves changing the internal interpretation of emotional situations, while expressive suppression focuses on controlling the outward expression of emotions (Gross, 1998). Since perfectionistic self-presentation is concerned with how individuals appear to others, strategies that regulate outward emotional expression may be more closely related to these behaviours.

However, expressive suppression did not show a significant relationship with Instagram addiction or its subscales, including social effect and compulsion. One possible explanation is that expressive suppression mainly influences how individuals regulate and express emotions in social interactions rather than influencing their level of social media use. Therefore, while expressive suppression may affect how individuals present themselves to others,

it may not necessarily determine the extent to which they engage in or become dependent on Instagram.

From Table 2, it can be observed that self-promotion showed a significant positive correlation with Instagram addiction and its social effect subscale. Self-promotion refers to the tendency of individuals to highlight their abilities, achievements, or desirable qualities in order to create a favorable impression on others (Hewitt et al., 2003). On social media platforms such as Instagram, users can carefully select and share content that reflects positive aspects of their lives, including achievements, appearance, or lifestyle (Goffman, 1959). Because of this, individuals who engage in higher levels of self-promotion may spend more time managing how they appear online and may become more involved in activities such as posting content, editing images, and monitoring responses from others. This increased involvement may contribute to higher levels of Instagram use.

This relationship can also be understood through the concept of impression management, which suggests that individuals attempt to control how they are perceived by others in social situations (Goffman, 1959). Social media platforms provide an environment where individuals can actively manage their online identity and present themselves in ways that gain approval or recognition from others. Previous research has also reported similar findings. Studies have shown that perfectionistic self-presentation tendencies are associated with problematic Instagram use and stronger involvement with the platform (Musicò, 2025). Research examining behaviour in digital environments has also indicated that individuals with higher levels of perfectionistic self-presentation often show greater engagement in online self-presentation and image focused activities (Gavrichenko & Kim, 2024). In addition, studies on social media users have found that individuals who strongly focus on presenting a favourable image online tend to be more concerned about how they are perceived by others and may invest greater effort in maintaining their online appearance (Ubaradka et al., 2023). These findings support the idea that individuals who frequently engage in self-promotional behaviours may become more involved in Instagram use as a way of maintaining a desirable online identity and receiving validation from others.

From Table 2, it can be observed that non-display of imperfection showed a significant positive correlation with Instagram addiction and the social effect subscale. Non-display of imperfection refers to the tendency of individuals to avoid appearing imperfect in front of others.

People high in this dimension try to ensure that their flaws or mistakes are not visible to others and may carefully manage how they present themselves in social situations (Hewitt et al., 2003). On Instagram, where users can carefully select the content they share, individuals may choose to post images or experiences that present them positively while avoiding posts that reveal difficulties or negative situations. This behaviour can also be explained through the

concept of impression management, where individuals attempt to control how they are perceived by others in social situations. Social media platforms provide a space where users can carefully shape their online identity (Goffman, 1959). People may avoid displaying imperfections because they want others to view them as confident, successful, or socially desirable. As a result, individuals who try to hide imperfections may spend more time thinking about what to post and how they appear online, which may increase their involvement with Instagram.

Previous studies have also reported similar findings. Research has shown that perfectionistic self-presentation is associated with stronger engagement with Instagram and greater concern about online appearance (Musicò, 2025). Studies examining digital behaviour have also suggested that individuals who are highly concerned about presenting a favourable image online tend to invest more effort in managing their online identity (Gavrichenko & Kim, 2024). Similarly, research on social media engagement indicates that individuals who attempt to maintain a perfect image online often become more involved in self-presentation activities on social media platforms (Ghosh, 2023).

From Table 2, it can be observed that non-disclosure of imperfection showed a significant positive correlation with Instagram addiction and the social effect subscale. Non-disclosure of imperfection refers to the tendency of individuals to avoid publicly admitting their imperfections.

Such individuals may prefer not to reveal their weaknesses, failures, or personal shortcomings to others (Hewitt et al., 2003). On Instagram, this behaviour may appear in the form of selective sharing of information while avoiding posts that reveal personal struggles or vulnerabilities (Ubaradka et al., 2023).

Similar to the earlier discussion, this behaviour can also be understood through impression management, where individuals attempt to control how they are perceived by others in social situations (Goffman, 1959). Social media platforms allow individuals to manage their online identity and maintain a socially desirable image. In this context, individuals who avoid disclosing imperfections may use Instagram to present themselves in a way that reflects competence, confidence, or success while keeping personal difficulties private. This may lead them to spend more time managing their online presence and monitoring how they are perceived by others.

Previous studies have also reported similar findings. Research has suggested that perfectionistic self-presentation is related to increased engagement with social media and greater concern about maintaining a favourable online image (Ubaradka et al., 2023). Studies examining Instagram behaviour have also indicated that individuals who engage in perfectionistic self-presentation may become more involved in online self-presentation activities and social media interactions (Goljović, 2024). In addition, research on

social media users has shown that individuals who focus strongly on managing their online image often invest greater effort in controlling the information they share with others (Sandeep & Moulya, 2023).

However, the results showed that self-promotion, non-display of imperfection, and non-disclosure of imperfection did not have a significant relationship with the compulsion subscale of Instagram addiction. This indicates that although individuals may engage in behaviours that help them present a favourable image on Instagram, their use of the platform may not necessarily become compulsive or uncontrollable (Kircaburun & Griffiths, 2018). Instead, these behaviours may be more related to managing how they are perceived by others and maintaining a positive social image. In this sense, individuals may use Instagram mainly as a space for impression management and seeking social approval rather than because they feel a strong internal urge to use the platform (Hewitt et al., 2003).

Conclusion:

The study found that cognitive reappraisal had a significant negative relationship with total Instagram addiction and social effect, but showed no significant relationship with self-promotion, non-display of imperfection, non-disclosure of imperfection, or compulsion. In contrast, expressive suppression showed significant positive relationships with self-promotion, non-display of imperfection, and non-disclosure of imperfection, while no significant relationships were found with total Instagram addiction, social effect, or compulsion. Further, self-promotion showed significant positive relationships with total Instagram addiction and social effect, but no significant relationship with compulsion. Similarly, non-display of imperfection and non-disclosure of imperfection showed significant positive relationships with total Instagram addiction and social effect, but did not show significant relationships with compulsion.

Implications:

The findings of the present study provide useful insights into the psychological factors associated with Instagram addiction among emerging adults. The significant negative relationship between cognitive reappraisal and Instagram addiction suggests that adaptive emotional regulation strategies may help protect against problematic social media use. Cognitive reappraisal, as described in Gross's (1998) process model of emotion regulation, involves interpreting situations in a more balanced and constructive way, which can reduce the need to rely on maladaptive coping strategies such as excessive Instagram use (Gross, 1998; Gross & John, 2003). These findings indicate that interventions focusing on improving emotional awareness and promoting healthier ways of thinking may help reduce the risk of Instagram addiction.

In contrast, the significant positive relationship between expressive suppression and perfectionistic self-presentation suggests that individuals who tend to hide or suppress their emotions may be more likely to carefully manage how they present themselves online.

This is consistent with theories of perfectionism, which explain that the need to appear perfect is often linked to fear of negative evaluation and a strong desire for social approval (Hewitt & Flett, 1991; Hewitt et al., 2003). The finding that perfectionistic self-presentation is also positively associated with Instagram addiction and its social aspects further highlights its role in problematic use. Therefore, interventions such as counseling and psychoeducational programs that encourage self-acceptance, reduce perfectionistic tendencies, and address unhealthy social comparison may be particularly helpful for emerging adults. Overall, the study emphasizes the importance of promoting healthy emotional regulation and more realistic self-presentation in reducing the risk of Instagram addiction.

Limitations:

1. The study used convenience sampling, which may limit the representativeness of the sample and restrict the generalizability of the findings to the broader population of emerging adults.
2. The cross-sectional design of the study allows identification of relationships between variables but does not permit conclusions about causal relationships.
3. Data were collected using self-report questionnaires, which may be subject to response bias, including social desirability, potentially affecting the accuracy of the results.

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Understanding emotional intelligence in adolescents: the role of perceived parental emotional responses

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Adolescence, is often understood as an essential and a crucial stage in one's development across life. It is majorly characterized by a wide number of changes in social, cognitive, emotional and physical capacities of individuals. The aim of the current study is to assess if there exists a relationship, between how adolescents perceive their parents emotionally respond to them and their emotional intelligence. Theoretically, this study draws from the framework of emotional socialization to find out whether the emotional intelligence of adolescents is influenced by supportive and unsupportive parental emotional responses. The study follows a quantitative, cross-sectional research design which was carried out on sample of 121 Indian adolescents ($n = 121$), between the age range of 12 to 18 years. The data were collected utilizing the Coping with Children's Negative Emotional Scale – Adolescents Perception of Parents (CCNES-APP) given by Fabes, Eisenberg, & Bernzweig (1998) and the Trait Emotional Intelligence Questionnaire – Adolescent Short Form (TEIQue-ASF) by Petrides, Sangareau, Furnham, & Frederickson (2006). Analysis was done using the Pearson's correlation which revealed a significant negative relationship between unsupportive perceived parental responses and emotional intelligence, and a significant positive correlation was found between supportive perceived parental responses and emotional intelligence of adolescents. Further, an independent samples t-test was carried out to look for gender differences in both emotional intelligence and perceived parental emotional responses along with multiple regression analysis to find whether perceived parental emotional responses predict emotional intelligence.

KeyWords: *Adolescence, Emotional Intelligence, Emotion Socialization, Mental Health, Parental Emotional Responses*

INTRODUCTION

Adolescence is a stage of development associated with crucial changes specifically with respect to emotional states, physiological growth, behaviour, and social aspects of life. Children in this stage experience a significant shift from relying on parental figures to gradually becoming independent, by gaining physical and psychological maturation. In a definition given by WHO (2014), adolescence is referred to as a transitional period of life, that takes place between the ages of 10 to 19 years and is linked to amplified emotions and rapid physical growth due to neurochemical changes

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and onset of puberty. Developmental psychologists like Steinberg (2014) have explained the nature adolescence as something that evolves with time and is not just limited to age but goes beyond it by rearranging overall life mechanisms in various fronts of life.

Childhood is often linked to emotional expressions that are guided externally. This changes in the stage of adolescence as individuals start to experience and make use of their internal states. This is because emotional development majorly takes place during this period and adolescents undergo an overall psychological maturation in terms of how they perceive, understand, experience and manage emotions. Recent literature persistently showcases how this phase, for adolescents, is a vulnerable period associated with affective difficulties and concurrent opportunities to acquire emotional and social skills (Steinberg, 2014).

Emotional socialization refers to the overall process of how individuals learn about emotions, particularly in relation to expressing, managing, understanding, or even modelling emotional experiences within the circumference of their social relationships (Eisenberg, Cumberland, & Spinrad, 1998). Parents serve as primary agents of emotional socialization both in childhood and adolescence. Children not only learn the values, beliefs and ideas from their parents but they also model and internalize emotional reactions, ways of expressing emotions, and understand and regulating them, from their parents. The way in which a child is likely to develop or exhibit an emotional response, largely depends on how the primary caregiver or the parents of the child, model emotional expression, communicate belief about emotion, and respond to their child's display of emotions. A large part of this process takes place in day-to-day interactions between parents and their children. Even though peer relationships and fondness for friendships increase during this phase, the emotional guidance and role modelling exerted by parents continues to play a significant role (Steinberg & Morris, 2001)

One of the defining features of this emotional socialization is determined by how parents respond to children's negative emotions. Researches persistently suggest that parental socialization can be differentiated in terms of supportive and unsupportive responses (Fabes, Eisenberg, & Bernzweig, 1990). Supportive parental responses include all those emotional responses that communicate validating and encouraging ways of expressing including adaptive ways to deal with stress. On the other hand, unsupportive responses comprises of ways in which parents may disregard, neglect, overlook or even punish emotional expression of the child. Studies have demonstrated how supportive responses of emotional socialization

have been linked to better emotional regulation, and overall optimal emotional awareness. Conversely, unsupportive responses result in emotional disturbances, dysregulated emotional activity and even negative self-perception and low self-esteem (Morris *et al.* 2007).

Emotional intelligence (EI) is an overall capacity of an individual to understand, regulate, perceive and manage emotions adequately in oneself and others. Emotional intelligence as defined by Salovey and Mayer (1990), is the capacity to observe one's own emotions and others' emotions, being able to differentiate between them and utilizing the capacity to navigate one's own thinking and behaviour. Goleman (1995) further conceptualized the applied aspect of emotional intelligence emphasizing how emotional intelligence is used in everyday interactions and functioning, giving it a social and interpersonal aspect.

Perceived parental emotional responses can be defined as the way in which adolescents interpret and subjectively evaluate the parental emotional reactions including emotional expressions, words of affirmation and support, tonality and all over validation, particularly in difficult and challenging situations. They include all distinctive patterns through which parents respond to their child's emotions expressions. These responses can range from supportive responses such as guidance, problem-solving and encouragement to unsupportive responses like punitive, negligent, minimization or discouragement (Eisenberg, Fabes & Murphy, 1996).

These parental responses are not latent in nature; they actively influence what perceptions adolescents create about the emotional receptivity and availability of parents as guiding figures. Positive perceptions of parental responses facilitate good quality parents-child relationship which contributes to the overall well-being and optimal emotional health of the child. Researches are highly indicative of how adolescents who perceive parental responses as supportive experience better emotional regulation, develop coherent and secure identities and even construct positive self-perceptions (Smetana, Campione-Barr, & Metzger, 2006).

Collectively, the ways in which adolescents perceive how their parents emotionally respond to them plays an inevitable role in moulding their own affective experiences and related abilities. For instance, how parents deal with the negative emotional expressions of the child plays a significant role in how child makes sense of those experiences subjectively as emotional intelligence majorly comprises of regulation and perceptions of emotions. Therefore, studying these variables together would yield a better understanding into how these day to day emotional interactions between the parent and the

adolescent shape the overall development of the individual in an emotional sense.

After conducting a thorough review of the literature that exists till date, it was evident that a major portion of studies have prominently studied general parental factors such as parenting styles, parental warmth, parental involvement, and emotional receptivity. This makes perceived parental emotional responses a relatively underexplored construct. Similarly emotional intelligence is another widely researched variable but most of the researches either cater to this independently or in relation to above mentioned general parental factors such as parenting styles, attachment styles, etc. A number of emotional states and related expressions get internalized by adolescents as a result of the emotional interactions that place within the familial context which ultimately serve as guiding forces for adolescents to process and comprehend these emotions. A teenager is likely to showcase a higher emotional intelligence when s/he perceives their parental figure to be emotionally responsive and sensitive to his/her emotional experiences.

Opposing to this, if subjected to unsupportive emotional responses such as neglect, punishment, irritability or simply invalidating, the individual would end up feeling emotionally rejected and discouraged which would ultimately impact his/her perceptions of emotions, overall well-being, adjustment, and self-regulatory capabilities. The present study, thereby, makes an attempt to fill in this gap by offering empirical evidence on how emotional mechanisms of adolescents are influenced by their perceptions of parental emotional responses. This research may significantly contribute to the fields of developmental and applied psychology while expanding on the need for applications in psychoeducation, parental guidance, counselling for both parents and children and overall adolescent well-being.

METHOD

The present study has used a quantitative, cross-sectional research design to assess the relationship between perceived parental emotional responses and the emotional intelligence of adolescents. The sample consists of 121 Indian adolescents ($n = 121$) ranging from ages 12 to 18 years. The data was collected via online platforms using the self-report measures namely, Coping with Children's Negative Emotional Scale – Adolescents Perception of Parents (CCNES-APP) given by Fabes, Eisenberg, & Bernzweig (1998) and the Trait Emotional Intelligence Questionnaire – Adolescent Short Form (TEIQue-ASF) by Petrides, Sangareau, Furnham, & Frederickson (2006).

Operational Definitions:

Perceived Parental Emotional Responses: Perceived parental emotional responses can be defined as the way in which adolescents interpret and subjectively evaluate the parental emotional reactions including emotional expressions, words of affirmation and support, tonality and all over validation, particularly in difficult and challenging situations. This will be evaluated through scores across six dimensions namely distress reactions, punitive reactions, minimization reactions, expressive encouragement, emotion-focused reactions, and problem-focused reactions.

Emotional Intelligence: Emotional intelligence (EI) is an overall capacity of an individual to understand, regulate, perceive and manage emotions adequately in oneself and others. High scores indicate higher emotional intelligence while low scores indicate lower emotional intelligence.

Tool Description:

- *Coping with Children's Negative Emotions Scale* (CCNES), was originally developed by Fabes et al. (1990), and assesses parental responses to negative emotions of children. The Adolescents' Perception of Parents (CCNES-APP) version has been adapted for adolescent respondents to enable them to report their perceptions of parental emotional reactions, further revealing parental emotional socialization through adolescents' perspective.
- The CCNES-APP comprises of 54 items that have been rated on a 7- point Likert scale. The scale ranges from 1 (*very unlikely*) to 7 (*very likely*). The tool further includes six subscales that assesses supportive and unsupportive parental reactions. The six dimensions are, Distress Reactions, Punitive Reactions, Minimization Reactions, Expressive Encouragement, Emotion-focused Reactions, and Problem-focused Reactions. Scores are obtained separately for each subscale. Higher scores on supportive subscales (EE, EFR, PFR) indicate emotionally validating parental behaviours, whereas higher scores on unsupportive subscales (DR, PR, MR) indicate emotionally invalidating or unsupportive behaviours. The CCNES-APP demonstrates an internal consistency of Cronbach's alpha values ranging from 0.74 – 0.85 (Fabes *et al.* 1994).
- The Trait Emotional Intelligence Questionnaire-Adolescent Short Form (TEIQue-ASF) is a concise, 30-item self-report measure designed to assess global trait emotional intelligence

among adolescents aged 11 years and above. It has been adapted from the long form of the TEIQue (Petrides & Furnham, 2001) and linguistically adapted for adolescent comprehension. Items are rated on a 7-point Likert scale ranging from 1 (*completely disagree*) to 7 (*completely agree*). A total Global Trait EI score is obtained by reverse-scoring 15 negatively keyed items and summing all item responses. The TEIQue showcases a high internal consistency (Cronbach's Alpha values 0.83 - 0.89) and high test-retest reliability across a 6-week interval ($r = 0.78$) (Petrides *et al.* 2015).

Data were majorly collected via online platforms while adhering to ethical considerations. The coded data was analysed using the SPSS software. Pearson's correlation analysis was used to examine the relationship between the emotional intelligence and dimensions of perceived parental emotional responses. Following this, multiple regression analyses was also done to determine whether supportive and unsupportive responses play a predictive role on emotional intelligence. An independent samples t-test was also done to assess gender differences in both perceived parental emotional responses and emotional intelligence.

Hypotheses :

H₁- There will be a significant positive relationship between supportive parental emotional responses and emotional intelligence in adolescents.

H₂- There will be a negative positive relationship between negative parental emotional responses and emotional intelligence in adolescents.

H₃- Supportive parental emotional responses will significantly predict higher emotional intelligence.

H₄- Unsupportive parental emotional responses will significantly predict lower emotional intelligence.

H₅- There will be a significant difference in emotional intelligence based on gender and perceived parental emotional responses.

RESULTS

Table 1: Mean and Standard Deviation for the scores of Perceived Parental Emotional Responses and Emotional Intelligence

Variable	Mean	SD
Emotional Intelligence	4.68	1.02
Expressive Encouragement	4.33	1.56
Emotion-focused Reactions	4.63	1.48
Problem-focused	4.70	1.51

Reactions		
Distress Reactions	2.55	1.39
Punitive Reactions	2.41	1.26
Minimization Reactions	3.92	1.16

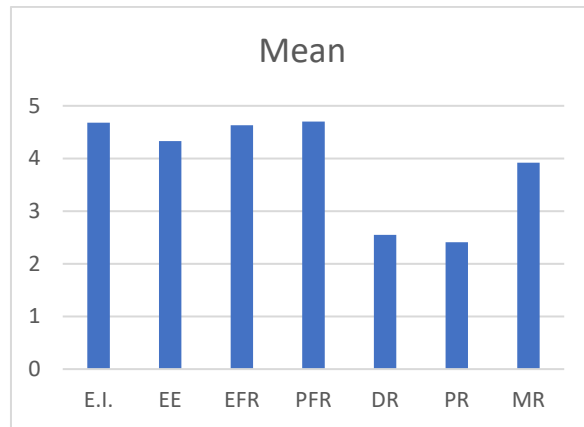


Fig 1 Graph shows mean scores for perceived parental responses and emotional intelligence

Table 2: Correlation between E.I. and Parental Emotional Responses

Variable	r with E.I.
Distress Reactions	-0.631**
Punitive Reactions	-0.676**
Expressive Encouragement	0.364**
Emotion-focused Reactions	0.581**
Problem-Focused Reactions	0.574**
Minimization Reactions	-0.101

**Significant at 0.01 level; $p < 0.01$

Emotional Intelligence was found to be significantly negatively correlated with distress reactions, and punitive reactions along with significantly positively correlated with expressive encouragement, problem-focused reactions and emotion-focused reactions. The correlation with minimization responses was non-significant ($p\text{-value} = 0.271$; $p > 0.01$).

Table 3: Regression Predicting Unsupportive Parental Emotional Responses (DR, PR, MR)

Predictor	Beta	t	Sig.
Distress Reactions	-0.201	-1.535	0.127

Punitive Reactions	-0.609	-4.570	0.000**
Minimization Responses	0.246	3.433	0.001**

$$R^2 = .514, F = 41.176, p < .001$$

The regression model was significant ($R^2 = .514, p < .001$). Punitive reactions ($\beta = -0.609, p < .01$) significantly negatively predicted emotional intelligence, while minimization reactions ($\beta = 0.246, p < .01$) significantly positively predicted emotional intelligence. Distress reactions were not significant predictors.

Table 4: *IV Regression Predicting Supportive Parental Emotional Responses (EE, EFR, PFR)*

Predictor	Beta	t	Sig.
Expressive Encouragement	-0.168	-1.506	0.135
Emotion-focused Reactions	0.414	1.886	0.062
Problem-focused Reactions	0.0309	1.396	0.165

$$R^2 = .357, F = 21.669, p < .001$$

The regression model was significant ($R^2 = .357, p < .001$); however, none of the supportive parental emotional response dimensions emerged as significant individual predictors of emotional intelligence.

Table 5: *Gender Differences in Emotional Intelligence*

Group	N	Mean	SD
Males	55	4.567	0.966
Females	65	4.768	1.060

T	df	Sig.
-1.079	118	0.283

The independent samples t-test revealed no significant difference in emotional intelligence across gender ($t = -1.079, p > .05$).

Table 6: *Gender Differences in Perceived Parental Emotional Responses*

Variable	Sig.
Distress Reactions	0.543
Punitive Reactions	0.105
Expressive Encouragement	0.487
Emotion-focused Reactions	0.228
Problem-focused Reactions	0.152
Minimization Reactions	0.072

No significant gender differences were found across any dimensions of perceived parental emotional responses ($p > .05$ for all variables).

Discussion:

Shortly after collecting the data, both descriptive and inferential statistical analysis were carried out. The correlational analysis (see TABLE 2) revealed significant negative relationships between unsupportive parental responses, particularly punitive reactions and distress reactions and emotional intelligence among adolescents. Supportive parental emotional responses such as expressive encouragement, emotion-focused and problem-focused reactions were also found to be positively correlated with emotional intelligence among adolescents. Minimizations reactions and their relationship with emotional intelligence were not found to be significant. This suggests that while supportive responses may help encourage emotional development in adolescents, unsupportive emotional responses may have negative impacts. This may be in an overall and varied sense since all unsupportive may exert different influence. For instance, previous researches by Ratliff *et al.* (2023) demonstrated how teenagers who are subjected to negative or invalidating responses by their parental figures may go on to develop maladjusted emotional coping mechanisms and may also experience affective dysregulation as a result of strained parent-child emotional interactions. Conversely, Srivastava & Bharti (2022) in their review study found that positive emotional interactions pertaining to emotional warmth and increased receptivity towards the negative experiences of the adolescent may help him/her to recognize and understand emotions better, ultimately leading them to develop better emotional intelligence. The findings for minimization reactions that yielded non-significant reveal a rather interesting and expected result. It may be noted that other unsupportive responses such as punitive reactions and distress reactions, when compared to minimization reactions are evidently overt in the sense that they are very visible to the adolescent. Whereas, minimization reactions are much more subtle and relatively indirect in nature and would also not be consistently noted as harmful or as aggressive by the adolescents when compared to the other two unsupportive reactions (Zhao *et al.* 2025). Therefore, these minimization responses do not reveal a direct negative correlation with the emotional intelligence in adolescents. But nevertheless, the significant correlation of other dimensions and emotional intelligence do reinforce the theoretical perspective that parents do function as the primary agents of emotional socialization among adolescents.

The regression analysis that examined unsupportive responses and their likelihood to predict emotional intelligence, the overall model though was statistically significant, herein, only

punitive reactions emerged as significant negative predictor of emotional intelligence. Distress reactions and minimization reactions were not found to be significant predictors. The emergence of punitive reactions as only significant negative predictor of emotional intelligence suggests that such reactions such as harsh invalidation of emotional expressions of the adolescents or criticizing them for being emotionally expressive have more detrimental effects on their conceptualizations of emotional. Jobe-Shields *et al.* (2013) in their study revealed that harsh and punitive emotional expressions of the parents may ultimately lead adolescents to withhold emotions which further may reduce their emotional awareness. The non-significant effects of distress and minimization reactions may be a result of other background factors such as peer support, individual resilience, or family environment, that have an indirect influence.

Building upon this, the regression model for supportive parental emotional responses was found to be significant overall ($R^2 = 0.357$, $F = 21.669$, $p < 0.001$; see Table IV) but none of the supportive parental emotional responses individually emerged as significant predictors of emotional intelligence. This indicates that rather than exerting an individual influence, supportive parental responses may shape the overall development of emotional intelligence. Thus, the interrelated nature of these supportive responses when entered into the regression model might have lost their predictive power. In the same way, a high emotional intelligence is a construct that may be developed as result of various interactions in an adolescent's life, many of which would go beyond just parental behaviour. A cross-sectional study by Luo *et al.* (2020) found that a related construct i.e., emotional warmth in parents towards adolescents would play a moderating or buffering role rather than a strong predictive role. Though there is a lack of individual significance of these responses but it may be noted that these responses do play an overall, cumulative role while exerting an indirect influence on emotional intelligence.

Furthermore, the independent samples t-test revealed no significant gender differences in neither emotional intelligence nor perceived parental emotional responses (see Table V and Table VI). This indicates that the development of emotional intelligence is rather a uniform process across genders who share the same socio-cultural environment. Instead of solely depending upon gender, emotional intelligence may be more prominently shaped by others factors pertaining to developmental experiences such as parenting practices, education, exposure to media and emotional socialization processes. Similar findings were reported by Yadav *et al.* (2021) in

their study of emotional intelligence among adolescents. It was noted a key factor at play would be contemporary socialization practices that do not give importance to traditional gender roles. Similarly, there were no significant gender differences found in the perceived parental emotional responses. This is suggestive of how adolescents, regardless of gender may perceive parental emotional responses in a largely similar manner. This is indicative of the fact that the way adolescents perceive these parental responses may not be dependent or differentiated by gender. Zhao *et al.* (2025) demonstrate that a lack of gender differences may be explained by the subjective nature of perception which is common across adolescents as they share similar cognitive-emotional frameworks.

Limitations of the Study:

- The study relies on self-report measures, which may be influenced by social desirability bias and subjective interpretation of parental emotional responses.
- The study is based solely on adolescents' perceptions of parental emotional responses, with no direct assessment or reports obtained from parents.
- Although adequate for statistical analysis, a larger and more diverse sample could enhance the generalizability of the findings across different socio-cultural contexts and educational settings.
- As the study follows a cross-sectional design, causal relationships between perceived parental emotional responses and emotional intelligence cannot be established.

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A correlational study of generative AI dependency, procrastination, and executive functioning

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In recent times, generative AI tools have become widely popular among university students for performing various academic tasks such as learning, writing, idea generation, and problem solving. Despite having many benefits, reliance on these AI tools can negatively influence the academic life of students. This study focused on studying the inter-relationship between Generative AI dependency, procrastination, and executive functioning among university students using a quantitative correlational research design. The data of 115 university students of Delhi NCR was collected using purposive sampling through google forms on standardized tools. The results revealed a statistically significant relationship of generative AI dependency with procrastination and executive functioning. Moreover, there was a significant relationship between procrastination and executive functioning. This justified the inter-relationship between the variables. Therefore, the present findings can inform educators and policymakers to develop ethical AI adoption policies, digital literacy programs, and education strategies.

Keywords: *Generative AI, AI dependency, Procrastination, AI and executive functioning, AI in university students*

INTRODUCTION

The growing advancement in the field of generative AI (GenAI) tools have changed the way students read, learn, and solve their academic tasks. These tools include large language models that are capable of providing detailed explanations, summaries, and complete written responses within seconds, which can significantly reduce the cognitive effort required to do the academic tasks. Generative AI tools such as ChatGPT, Anara, Grok, Gemini, and Claude, provide user generated information in the form of codes, images, texts, music, and videos. Generative AI is becoming widely popular; the top 40 generative AI tools receive about three billion visits each month (Qiang et al., 2024; Goh et al., 2025). Due to the widespread use of generative AI tools in higher education, students regularly use AI tools to write their assignments, idea generation, preparation of exams, and solving problems. Generative AI tools provide various benefits including, efficiency and accessibility, but researchers have started noticing that these tools are susceptible to making students AI dependent. Generative AI dependency can be described as the situation when AI tools become the only way to achieve academic and personal goals, which results in the lowering of internal cognitive processes (Zhang et al., 2024). The dependence

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on AI tools has some psychological and cognitive consequences. Past researches have stated that these language models can change the way learners think, plan, engage, and organize their academic tasks (Kasneci et al., 2023).

Procrastination can be one of the major outcomes of over-reliance on AI tools. Procrastination is basically defined as putting off necessary tasks, even after being aware of the negative consequences (Steel, 2007). Recent studies have shown that students use AI tools to ease the cognitive load required for a task, which is why they are able to procrastinate more. Although generative AI is made with an intent to help learners, it could end up encouraging students to procrastinate by postponing their effort of understanding the material to be learned. Goh et al. (2025) found that generative AI dependency was correlated with higher levels of academic procrastination and cognitive failures among university students. Similarly, Abbas et al. (2024) also found that students relying more on generative AI tools for writing end up procrastinating more and have poor memory of material.

In order to understand these patterns, it is important to look at their underlying cognitive processes such as executive functioning. Executive functions refers to the cognitive processes governing task initiation, making a change from previous actions or passing from one activity to the next. It includes components such as working memory, inhibitory control, cognitive flexibility, and task switching. According to Miyake et al. (2000), executive functions are the higher-order cognitive processes that are involved in planning, thinking, and other general functions that are necessary for governance of thought and actions. The abilities covered under executive functioning are essential for controlling many aspects of student behaviour, such as planning, paying attention, organizing behaviour, motivation, and learning from feedback. It is these executive functions that allow students to sustain focus and meet the demands of complex academic tasks. In this respect, there is extensive research that has linked impairment in executive functioning with procrastination and task initiation difficulties (Rabin et al., 2011).

In spite of a large body of research focused on procrastination and executive functioning, there is little research on their relationship with dependency on generative AI tools. Given the fact that students are interacting more and more with these AI technologies and their academic behaviours are being shaped by these technologies, exploring the relationship of dependency of these tools, procrastination, and executive functioning becomes highly relevant. The main goal of this study is to explore the relationship between generative AI dependency, procrastination, and executive functioning in university students and thus it aims to extend the current literature on the implications of AI-assisted learning in higher education in the context of executive functioning and procrastination.

Literature Review:

Generative AI tools have quickly integrated into academic institutions, leading scholars to explore both the advantages of AI and the negative effects of AI usage that may arise over time. One of the important work in this area is done by Goh et al. (2025) involving 1,333 subjects. They developed the Generative AI Dependency Scale and found a significant positive correlation with procrastination, reduced critical thinking, and greater cognitive failures. Similarly, Abbas et al. (2024) demonstrated a positive relationship between procrastination, memory impairment, and AI usage. The study done on 494 students found that students who experienced academic stress and time constraints were more likely to become AI dependent. Conceptually, Salah et al. (2024) coined the term “AIholic” to denote the students whose dependence on AI tools are similar to addiction. With the help of self determination theory, they stated that AI tools can fulfill unmet psychological needs of competency, relatedness, and autonomy. Over time, the reliance on these tools becomes addictive, which diminishes the academic autonomy of students.

Procrastination has been recognized as one of the most universal problems among students in higher education. Many researches show the intentional delay of academic tasks by the students even after being aware about the negative consequences. A meta-analysis done by Steel (2007), which integrated over 800 studies, identified procrastination as a failure of self regulation. The findings revealed that up to 80 to 95 percent of students struggle with task initiation, impulse control, and low self-efficacy. Recently, researchers have started to show AI tools as one of the main causes of procrastination among university students. Mukhtar et al. (2025) found a positive relationship between procrastination and AI usage. They gave the phenomenon of “safety net effect”, which states that students tend to procrastinate more often because they believe that AI would do their work before the deadline. Schuenemann et al. (2022) demonstrated procrastination as a coping mechanism to escape from negative emotions that arose from academic pressure. The study framed procrastination not as laziness, but as an emotional regulation strategy.

The concept of executive functioning is widely researched under its various sub-components such as working memory, task inhibition, planning, emotional regulation, behavioral regulation, and organization. Rabin et al. (2011) in their study done on 212 college students, found that several sub domains of executive functioning, especially planning, task initiation, and working memory were strong predictors of procrastination. At the genetic level, Gustavson et al. (2015) using twin study design found that procrastination and executive functioning share the same genetic roots related to emotional and motivational management. The results showed that these two variables are not only correlated but are also fundamentally interlinked. Furthermore, Nesayan et al. (2022) found both executive functioning and procrastination as predictors of academic outcomes.

The findings revealed that students with low academic performance have greater executive functioning impairments and higher levels of procrastination.

The theoretical linking of AI usage, procrastination, and executive functioning is best illustrated by Klarin et al. (2024), who discovered that students with greater executive functioning difficulties were more likely to use AI for task initiation and structuring. This study points at a possible cyclic mechanism, where pre-existing executive functioning deficits increase the AI usage, which then promotes procrastinatory behaviors over time through cognitive-offloading.

Therefore, the literature reviewed above firmly indicates that the three variables can not be considered independently. Instead, they are believed to form a psychological network with significant implications for academic functioning. The current study bridges this existing gap by studying the inter-relationship between generative AI dependency, procrastination, and executive functioning in the Indian university context.

Objective:

To study the inter-relationship between generative AI dependency, Procrastination, and executive functioning.

Hypotheses:

- H₁. There will be a significant relationship between generative AI dependency and procrastination.
- H₂. There will be a significant relationship between Generative AI dependency and executive functioning.
- H₃. There will be a significant relationship between procrastination and executive functioning.

METHOD

Design of the Study:

The present study used a quantitative correlational research design to examine the relationship between generative AI dependency, procrastination, and executive functioning among university students. The correlational design was chosen because the primary aim of the study was to explore the associations between the variables rather than to establish causal inferences. Data were collected on standardized psychological scales and analysed using SPSS V27.

Participants:

The participants of the study consisted of 115 university students from Delhi NCR region. The data were collected from both male and female students in the age range of 17-26 years old. A purposive sampling technique was used to select university students of Delhi NCR region, who were active users of generative AI tools and chatbots. Students above the age range of 17-26 years old, and unfamiliar with AI tools were not included. The participation in the study was voluntary and informed consent was taken before participation. The confidentiality and anonymity of the participants were also maintained and no identifying information was collected.

Instruments:

Generative AI Dependency Scale: The Generative AI dependency Scale developed by Goh, Hartanto, and Majeed (2025) was used to assess the levels of generative AI dependency among students. The scale includes 11 items measured on a five-point Likert scale, ranging from “Strongly Disagree” to “Strongly Agree”. The instrument is further divided into three dimensions of cognitive preoccupation, negative consequences, and withdrawal. The scale demonstrated strong internal consistency along with adequate construct and content validity. The higher scores on this scale indicate a greater level of dependency on AI tools.

Tuckman Procrastination Scale (TPS): Procrastination was measured using Tuckman Procrastination Scale (Tuckman, 1991). It is a widely used instrument to measure the tendency of delaying tasks. The scale used is the 16 item version adapted for college students. It is a four-point Likert scale, ranging from "That's not me for sure" to "That's me for sure". Four items were reverse coded. The scale demonstrates high internal consistency, and has strong predictive and concurrent validity with academic behavior outcomes. Higher scores on this scale indicate greater levels of procrastination among students.

Executive Skills Questionnaire-Revised (ESQ-R): Executive functioning was assessed using Executive Skills Questionnaire-Revised (Dawson & Gaure, 2018). The instrument consists of 25-items, scored on a four-point Likert scale; ranging from “Never” to “Very Often”. The scale assesses five domains of executive functioning which includes, plan management, time management, material organization, emotional regulation, and behavioral regulation. The scale demonstrates high internal consistency and good construct validity. The higher scores in this scale relates to greater executive functioning deficits.

Procedure:

The data were collected online through google forms. The survey link was circulated among university students across the Delhi NCR region through online platforms, academic groups, online committees, study groups and social media platforms. All the ethical considerations including, informed consent, voluntary participation, and confidentiality of the participants, were followed during the administration. The survey consisted of consent form, demographic section, three self-report instruments, taking approximately 10-15 minutes to complete. The responses were recorded and compiled in a spreadsheet for further statistical analysis.

RESULTS

After coding the scores, they were analysed using SPSS V27.

The table 1 confirmed that there is a statistically significant correlation among all three variables. The pearson product correlation revealed a significant relationship between generative AI dependency and procrastination ($r = .258^{**}$); generative AI dependency and executive functioning ($r = .251^{**}$) and; procrastination and executive functioning ($r = .560^{**}$).

Table 1: Correlation Coefficients for Generative AI Dependency, Procrastination, and Executive Functioning among University Students (N=115) Note. **p < .01.

	Generative AI Dependency	Procrastination	Executive Functioning
Generative AI Dependency	1		
Procrastination	.258**	1	
Executive Functioning	.251**	.560**	1

Discussion:

The present study examined the relationships between generative AI dependency, Procrastination, and executive functioning among university students. The sample of 115 university students from the Delhi NCR regions were collected through purposive sampling technique. There is an increased use of AI tools among university students which can impact procrastination tendencies and executive functioning of the students. The objective of the study was to study the inter-relationships among the three variables and Pearson product moment correlation helped to analyse this relationship. The results shown in table 1 revealed a statistically significant correlation among all three variables, thereby confirming all three hypotheses. The findings support the growing literature and have significant theoretical and practical implications for colleges in India and outside India.

The first hypothesis of the study suggested that there is a significant relationship between generative AI dependency and procrastination. The results supported this hypothesis ($r = .258$, $p < .01$). This has been reflected in the study of Abbas et al. (2024) in which they showed that students who use ChatGPT and other similar AI tools tend to procrastinate more due to the habitual delay and shortcutting of academic tasks. The authors stated that if students believe that AI can quickly write all their assignments, they tend to postpone the initiation of the task and don't put the required mental effort needed to complete the required task. These findings add value in the existence literature in Indian university context where many students have started using these AI tools after the launch of ChatGPT in late 2022.

Zhang et al. (2024) conducted a study on 300 students using the I-PACE (Interaction of Person-Affect-Cognition-Execution) model. They found that relying on AI tools is related to bad academic habits, like not trying hard, reduced creative thinking, and poor problem solving. All of these were closely related to procrastination. They showed that students who don't feel confident in doing their tasks independently without using AI tools are more likely to avoid their tasks, which forms a loop of delay. This theoretical framework supports the present significant relationship found between procrastination and generative AI dependency.

The second hypothesis stated that there will be a significant relationship between generative AI dependency and executive functioning. The hypothesis was stated true by the results shown in

table 1 ($r = .251$, $p < .01$). Executive Functioning refers to higher-order cognitive skills including, planning, attention, remembering what needs doing, starting tasks, and cognitive adaptability (Miyake et al., 2000). The current findings suggest that students who rely a lot on generative AI often face trouble related to executive functioning. These results are consistent with Gerlich (2025) mixed-methods study done on 666 participants. The study found a negative correlation between AI dependency and critical thinking. When people hand off their thinking, planning, and problem solving to AI tools, they decrease their internal cognitive load. This can negatively impact executive functioning of the students.

Similarly, Klarin et al. (2024) looked at generative AI usage among teens and how it impacts their cognitive skills. The study revealed that students above the age of 17 were spending more time on AI tools, reducing their cognitive effort. Therefore, the authors cautioned that excessive reliance on these AI tools should be prohibited in adolescence and early adulthood because the cognitive skills are still maturing in this developing stage. This is relevant with the current sample of university students aged between 17 to 26 years old. It is also worth noting that students with pre-existing executive functioning deficits tend to rely on AI tools more for assistance in performing the mental tasks required during academic work. This initial dependency on AI tools can further increase their executive functioning impairments.

Lastly, the third hypothesis stated that there will be a significant relationship between procrastination and executive functioning. The results shown in table 1 found a good correlation among these variables ($r = .560$, $p < .01$), indicating that procrastination tendencies are related to more executive functioning deficits. The present findings are consistent with several educational and neuropsychological researches. According to Bolden and Fillauer (2020), executive functioning acts as a mediator in the relationship between procrastination and attention problems among college students. Moreover, Gustavson and Miyake (2017) through their behavioral genetics studies found that procrastination, goal management, and executive functioning skills have similar genetic influences. The current research findings open up the possibility of exploring procrastination in relation to cognitive abilities in an Indian university context, where this theme is still less researched.

More specifically, in a study conducted by Rabin et al. (2011) on 212 university students, found that various components of executive functioning, such as task initiation, planning, organization, working memory, self monitoring, and task inhibition, are significant predictors of procrastination. Interestingly, task initiation difficulties were strongly related to procrastination, which means that students with pre-existing executive functioning impairments have difficulty in initiating tasks despite intending to do so. In the present sample, the moderate correlation between procrastination and executive functioning is consistent with the literature on self-regulation failure

as one of the main predictors of procrastinatory behaviors (Steel, 2007). Students who can not control irrational thoughts, organize their work properly, or switch between various tasks tend to delay their work the most.

Studies done using fMRI have found that too much activation in the ventromedial prefrontal cortex (vmPFC), which controls executive control, go hand in hand with delaying tasks (Zhang et al., 2016). Their study suggests that procrastination is the reflection of the weak executive control over emotional and motivational systems. Habitual use of AI tools might make this worse by cutting down how much prefrontal areas need to work.

Overall, the findings of the present study indicated that struggles related to procrastination and executive functioning are closely related to generative AI tools dependency. Though the relationships between generative AI dependency and the other two variables are relatively small but significant ($r = .258^{**}$ and $r = .251^{**}$), suggesting that usage of AI is linked with troubles related to managing tasks and putting things off. Because those connections are not that strong, there is clearly more going on beneath the surface level. Classroom settings, personal habits, motivational levels and other psychological variables are likely to affect this relationship. Past researches done on self-regulation and multi-factor model of procrastination segmented by Balkis and Duru (2016) are consistent with these results. Regardless, the present studies shows increased dependence on the AI tools by the students which meaningfully correlate with their procrastination tendencies and executive functioning impairments.

The present studies have various limitations that can be considered. The use of quantitative correlational research design restricts the exploring of cause and effect relationship among the variables. The purposive sampling technique limits the generability of the findings to the regions states and countries outside the Delhi NCR region. The sample size of 115 is adequate for the conduction of correlational analysis but is still relatively small. The future research can focus on acquiring more sample size to strengthen the confidence level between the variables. The data were collected on self-reported instruments which are susceptible to social desirability bias and self-perception bias.

Conclusion:

In conclusion, this research paper aimed to study the inter-relationship between generative AI dependency, procrastination, and executive functioning skills among university students. The results revealed that university students who excessively use generative AI, tend to procrastinate, and have poor executive functioning are significantly correlated. The procrastination itself showed strong associations with executive functioning. The findings provide a deeper understanding to an under-explored field of AI in educational and cognitive contexts. Since gradually generative AI tools are becoming inseparable from the academic environment of the

students, it is necessary to understand the psychological costs of the un-controlled reliance on AI tools.

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Role of perceived parenting and emotional competence in shaping self-compassion : A systematic review

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Self-compassion has become an important psychological concept that has been linked to emotional well-being, resilience, and adaptive coping. In conjunction with this, there has been the identification of emotional competence and perceived parenting as significant factors in the emotional and self-related development. Although there is increasingly available research, findings are still fragmented, and limited in studying how these constructs correlate. The gap is relevant to filling out a more sensible comprehension of the developmental processes that underlie adaptive self-functioning. The current review thus evaluates the connection between perceived parenting and emotional competence and self-compassion and also reveals the recurrent pattern and gaps in the literature. Peer-reviewed studies with various populations and methods were included in a PRISMA-guided systematic review. The studies were sampled under a multi-stage screening and thematic synthesis analyzed. Results show that emotional competence is linked to supportive parenting which consequently leads to self-compassion development. Self-compassion is also identified as one of the major mediating factors that lead to the enhancement of psychological well-being and lessening of emotional suffering.

KeyWords: *Self-compassion, Perceived Parenting, Emotional Competence, Emotional Regulation, Adolescence, Emerging adulthood*

INTRODUCTION

Self-compassion has become the major conception in modern day psychology especially in how people associate themselves with themselves when they are faced with failure, suffering and misery. Theorized to be the ability of benevolence to oneself, belonging to the human family, and being conscious of personal suffering (Neff, 2003; Neff, 2023). Contrary to self-esteem that is frequently mediated by an outside confirmation, self-compassion offers a consistent and innate means to react to adverse events, thus the susceptibility to stress, anxiety, and depression. Self-compassion does not only constitute an individual characteristic but a developmental process depending on both emotional abilities and relationships experiences. The critical ones are the adolescence stage and the emergent adulthood stage as the self-related processes are more intertwined, and individuals are burdened with more emotional loads and identity search. Self-compassion is a supportive process that is used at this stage to enable the experiences of emotional well-being, resilience and adaptive coping (Wu and Zhang, 2023).

Emotional competence is an important internal factor of self-compassion, in other words, the ability to assess, record, express, and manage emotions effectively (Saarni, 1990; Habib et al., 2016).

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Emotional competence has always been associated with psychological adjustment and well-being. There is empirical evidence that more emotionally competent individuals get reduced stress and improved emotional control (Rana et al., 2016) . In addition, emotional competence contributes to resilience, interpersonal effectiveness, adaptive functioning, and is one of the causes of core psychological resources (Marzuki, 2017).

Yet, emotional competence is constructed in the interpersonal domains and more so within the family. Perceived parenting or subjective understanding of the parental actions by individuals is an essential element in determining the development of emotional and psychological growth. Parenting styles in warmth, responsiveness, and autonomy are reported to lead to positive developmental outcomes, whereas parenting styles in controlling or rejecting are reported to lead to maladjustment (Baumrind, 1967; Thakre and Shet, 2022)). It has also been shown that positive parenting behavior is positively correlated with middle-aged adults on emotional competence and self-efficacy (Shukla and Waraich, 2023).

Perceived parenting also has an impact on self-compassion. Longitudinal research shows that positivity of parenting style of support correlates with the presence of more compassionate self-responding and that the negativity of parenting style of controlling is associated with increased self-criticism and less self-compassion (Kaufmann et al., 2023)). Emotional regulation systems theoretically are influenced by the caregiving environments and, as a result, they affect the response individuals have to their distress.

Taken together, these findings point to the fact that there is a developmental progression wherein the perception of parenting will inform emotional competence that will subsequently mediate the sense of self-compassion. Emotional competence can be a mediating factor whereby relational experiences are incorporated to adaptive self-related processes. In spite of the fact that these constructs have been researched separately or as bi- or tri-constructs, no thorough research has been conducted on synthesized effect of these constructs in the framework of a single construct.

Moreover, much of the literature has been written in a Western orientation where the relationship of these two factors in a culturally diverse environment has not been studied far. It is evident that the cultural norms have an effect on the parenting styles and expression of feelings and thus studies based on the culture such as the Indian culture are needed.

Based on these gaps, the current systematic review will address the knowledge gap on the factors surrounding perceived

parenting and emotional competence leading to self-compassion through synthesis of the various studies and pointing out the research directions and underlying mechanisms.

Objectives of the Review

- To explore how key variables i.e. self-compassion, emotional competence and perceived-parenting have been conceptualized across diverse theoretical frameworks and cultural contexts.
- To review the literature to see patterns and consistencies in the relationships among perceived parenting, emotional competence and self-compassion among different developmental stages and different populations.
- Highlighting the gaps, consistencies, inconsistencies and the limitations in the existing literature to gain understanding for future directions.
- To review the various types of methodologies, scales and statistical analysis employed.

METHOD

Design of Study:

A wide range of study designs was covered to allow synthesis on a massive scale. These were cross sectional survey, longitudinal design, correlational study, mediation and moderation model, randomized controlled trial, neuroimaging based study, qualitative study, conceptual or theoretical paper. Main methods of data collection included self-report measures that were standardized, experimental tasks, interviews and in the selected studies neurobiological measures.

Eligibility Criteria:

The studies that were taken into consideration in the review are those that concentrate on at least one of the central constructs of the review i.e. self-compassion, perceived parenting, emotional competence, emotional intelligence, or emotion regulation and how these constructs relate to psychological, emotional or mental health outcomes. Empirical and theoretically sound studies were all eligible. The articles were required to be published in peer reviewed journals.

Population Characteristics:

The articles reviewed encompassed those that were conducted on teenagers, emerging adults, and adults, which represent the developmental range of maximum relevance to the emotional development, parenting effects and mechanisms concerning the self. The sample included school going adolescents, university students and working adults, clinical and non-clinical adult populations and specific population (e.g., teachers, individuals with disabilities and

medical students). Early childhood population studies were limited to those that did not focus on retrospective parenting perceptions.

Publication Characteristics:

The papers that were incorporated in this review were published in the period of 2015-2025, which is a mixture of basic theoretical works and the controlled empirical research. Peer-reviewed journal articles in English only were used. There are no limitations that have been imposed on the country/cultural context so as to capture the global character of literature.

Search Strategy (Variable-Wise):

The search strategy revolved around the variables of primary interest. Keywords for self-compassion included *self-kindness, self-criticism and mindful self-compassion*.

Keywords related to emotional competence were emotional intelligence, emotional regulation, emotional skills and emotional awareness.

And for the variable of perceived parenting, keywords such as *parenting styles, parental warmth, parental control and parent-child relationships* were used.

At the end, these all keywords were combined with other outcome related terms such as *mental health, well-being, stress, coping, flourishing and psychological adjustment* along with some population or sample related terms such as *adolescents, young adults and emerging adults*.

Inclusion Criteria:

Studies were included if they:

- Employed well-defined and structured research designs appropriate to primary constructs i.e. self-compassion, emotional competence and perceived-parenting
- Examining associations, pathways or interactional relationships among the key variables.
- Employing systematic data collections and analytical procedures with the help of valid psychometric tools.
- Published in english language.
- Published within 2015-2025.

Information Sources :

The academic database searches were done in Researchgate, Taylor and Francis, Sciencedirect, PubMed, Scopus, Web of Science and Google Scholar, which are databases of psychological research studies.

Study Selection Process :

The selection of the study was made by reviewing studies as per the PRISMA-guided multi-stage screening process. To begin

with, titles and abstracts were filtered to filter off irrelevant records. Full text articles of studies that were potentially eligible for inclusion were then assessed against inclusion/exclusion criteria. The research in which this sequence of requirements was fulfilled was included until all data were gathered to include the final inclusion and synthesis.

Data Extraction :

A uniform method of extracting the data was used. Based on each study, study information was gathered on author(s) and year, study objectives, sample characteristics, research design and tools, and key findings that were pertinent to the review objectives. This allowed for consistency amongst studies and easier organised synthesis.

Quality Assessment :

Methodological quality was evaluated qualitatively among studies instead of a numerical scoring system. Evaluation focused on adequacy of sample, use suitable research design and clarity of analytical procedures, and use of validated instruments.

Assessment of Sample Adequacy:

Adequacy of the sample was measured with regard to its size, clarity of its characteristics and suitability of the sampling approach. Research that included a clear population and sufficient sample sizes were considered as having a superior methodological quality and limitations in terms of convenience sampling were observed in the process of synthesis.

Measurement Validity and Reliability:

Priority was given to the studies which used standardized and valid psychometric instruments. Where the indices of reliability and validity were provided, they were taken as an indicator of the rigor of the methods. Theoretical coherence and analytical transparency were used to review conceptual and qualitative studies.

RESULTS

The systematic review under consideration entailed the integration of empirical and theoretical studies on the issues of self-compassion, perceived parenting and emotional competence and concentrated on interrelationships between these concepts and implications of psychological adjustment. The studies incorporated represent a wide-ranging and heterogeneous literature of growing scholarly concern in self-related and emotional developmental processes of adolescence, emerging adulthood and adulthood.

The studies reviewed include the publications of the researches that were conducted within the period between 2015 and 2025. There were extensive Asian studies (e.g. India, China, Vietnam, Pakistan,

Indonesia), European, Australian, North and South American and Middle Eastern studies, indicating the cross-cultural relevance of these constructs. In the literature reviewed, several similar patterns of empirical findings were identified. Research investigating emotional competence and emotional intelligence has always indicated negative correlations with stress, anxiety and maladaptive coping, and positive correlations with well-being, resilience and adaptive functioning (Rana et al., 2016; Merida-Lopez et al., 2022).

In some research studies that concentrated on perceived parenting, it has been found that parental warmth, care and autonomy support positively correlated with emotional competence and more adaptive psychological outcomes, and that the controlling, rejecting parenting, or overprotective parenting styles were positively correlated with emotional distress and maladjustment (Anli and Karsli, 2010; Takahashi et al., 2017).

Many of the studies reviewed have prioritized self-compassion as an important protective factor that is not only a direct predictor of well-being, but also a mediator or moderator, between emotional processes and psychological outcomes. Increased self-compassion is usually associated with reduced stress, anxiety, depression and burnout, and increased flourishing, resilience and life satisfaction (Nayak, 2024; Ewert et al., 2024; Helminen et al., 2023).

Thematic Synthesis of Findings :

Emotional Competence, Emotional Intelligence and Psychological Adjustment :

In a number of studies, emotional competence and emotional intelligence were continuously discovered to be safeguarding psychological assets. Adolescents with higher emotional competence were better emotionally aware, emotionally regulated, and had better stress management and those with low ecological competence were psychologically distressed. Indicatively, Rana et al. (2016) found out that emotional competence and stress show a significant and negative correlation because emotional competence indicates a lower degree of anxiety and pressure in adolescents. In the same respect, Habib et al. (2016) found that there are gender differences in emotional competence in which level of competence was higher in girls than boys, showing developmental and gender differences in emotional competence.

Emotional intelligence had a positive relationship with subjective happiness, office citizenship behaviour, creativity, and well-being among adults and professionals. Merida-Lopez et al. (2022) demonstrated that factors of emotional intelligence predicted happiness of teachers who perceived stress above the norm, and

Pradhan et al. (2016) demonstrated that emotional intelligence increased the correlation between psychological capital and organizational citizenship behaviour. Research also showed that emotional regulation is a key mediating variable between sensitivity, stress and negative affect (Brindle et al., 2015; Lam et al., 2024).

Perceived Parenting and Emotional Development :

Results in research studies made it very evident that perceived parenting is a significant contextual determinant of emotional and psychological outcomes. Emotional warmth, care and autonomy support are some of the attributes of supportive parenting which were associated with higher levels of emotional competence, improved coping and mental health. The results also found that positive perceived parenting made significant predictions of emotional competence and self-efficacy in young adults (Shukla & Waraich, 2023).

On the other hand, maladaptive outcomes were linked to controlling, rejecting, overprotective or affectionless parenting styles. Takahashi et al. (2017) established that affectionless control upbringing was related to more neuroticism and Anli and Karsli (2010) established that parental rejection and overprotection were related to more depression and anxiety. Longitudinal evidence also indicated that authoritative parenting foresaw adaptation Internalization of value (Williams and Ciarrochi, 2013) and augmentations in a multidimensional self-responding, which was characterized by compassion (Kaufmann et al., 2023).

These associations were also consistent with neurobiological evidence. Realizing the emotional effect brought by the perception of parents during the teenage years, Carranza et al. (2024) discovered that the parental care was connected to the depressive symptoms and certain connectivity patterns of the amygdala.

Self-Compassion as a Protective and Mediating Mechanism:

A fair share of the studies discovered that self-compassion was a major protective variable at various developmental stages. An increased level of self-compassion was always associated with better psychological well-being, flourishing, resilience, and life satisfaction, reduced levels of stress, anxiety, depression and burnout and maladaptive coping. Nayak (2024) discovered that the emerging adults who reported a greater self-compassion level were more hedonic and eudaimonic well-being.

Mediating and moderating effects of the self-compassion were present in different studies. The proposition of Cruz, L., Cereza, A., Mora, A., and Lie is that emotional well-being is the mediator in the connection between self-compassion and basic psychological needs

among adolescents. The entire mediation of the connection between proactive coping and perceived stress and self-compassion was reported by Bui et al. (Bui, et al., 2021). In the same way, Ewert et al. (2024) demonstrated a longitudinal sample-based study showing that the correlations between self-compassion and affects were mediated by general stress and coping (engagement).

Intervention studies were included in the evidence of the causal role of self-compassion. Randomized controlled trials also discovered that short-term self-compassion programmes produced a big reduction in stress, burnout, anxiety and depression, and in maladaptive perfectionism (Woodfin et al., 2021; Eriksson et al., 2018).

Contextual, Developmental and Differential Effects:

In some of the studies, it was emphasized that the effects of self-compassion and emotional competence vary as the development progresses and the gender and situation. Tavares et al. (2024) stated that the lifelong differentiation of the components of self-compassion has been reported in adults, whereas Wu and Zhang (2023) emphasized that parenting, gender and emotion regulation influenced the development of self-compassion in adolescents. Other researchings also discovered context-specific effects, such as the buffering effect of self-compassion in response to sexual minority young adults (Helminen et al., 2023) or selective effect of self-compassion in risky decision making among individuals at risk of gambling (Bailis et al., 2023).

Discussion :

Summary of Major Findings :

The current systematic review provided evidence of the connections between self-compassion and the perceived parenting and emotional competence in the age of adolescence, emerging adulthood, and adulthood based on 50 studies. The findings generally indicate a latent and consistent trend of these constructs across diverse cultural contexts and approaches.

First, emotional regulation and emotional competence were reported to be significant protective psychological resources. In several research works, an increased degree of emotional competence was connected to a reduction in stress levels, anxiety and depression, and well-being (Rana et al., 2016; Merida-Lopez et al., 2022). In most cases, emotional regulation served as a mediating factor between stressors and psychological outcomes (Brindle et al., 2015; Ewert et al., 2024), which means that it is an adaptive capacity of primary importance.

Second, the concept of perceived parenting was always one of

the contextual agents of emotional and psychological development. Positive and nurturing parenting was associated with higher emotional competence, adaptive coping and improved self-related outcomes (Shukla and Waraich, 2023; Williams and Ciarrochi, 2013). On the contrary, high distress levels were linked to the rejection, overprotective or controlling styles of raising children (Anli and Karsli, 2010; Takahashi et al., 2017). Longitudinal results also indicated that parenting practices predetermined subsequent trends of self-compassion (Kaufmann et al., 2023), which was an indication of long-term development.

Third, the concept of self-compassion emerged as an important protective and integrative theory in the research. The researchers concluded that greater self-compassion was consistently associated with greater psychological well-being, resilience and flourishing, lesser levels of stress, anxiety, depression, burnout and self-criticism (Nayak, 2024; Woodfin et al., 2021; Ramos-Vidal and Ruiz, 2024). Notably, a number of studies showed mediating and moderating effects of self-compassion and, therefore, indicated that self-compassion is a mechanism where emotional competence and relational environments mediate their effects on psychological outcomes (Bui et al., 2021; Gao et al., 2023; Tehreem et al., 2024).

Collectively, the evidence seems to point to a consistent developmental sequence in which perceptual parenting in a supportive manner leads to the development of a higher degree of emotional competence which in turn leads to the development of adaptive self-relating via self-compassion. Self-compassion also serves as a shield against psychological distress as a natural experience particularly among adolescents and the newly transitioning adulthood when there is high emotional and identity-related distress.

Implications :

Theoretical Implications :

The outcomes of the present systematic review will contribute to the overall picture of the impact of relational and emotional processes on self-development. The similarities in the findings that were observed in all the literature reviewed show that perceived parenting, emotional competence and self-compassion are not independent constructs, but are developmentally related to each other. The parenting environment that is supportive and emotionally responsive appears to result in emotional regulatory abilities, which consequently result in adaptive self-relating through self-compassion.

Such results confirm the developmental-relational view of the development of self-compassion as an emergent developmental

process where it is not only generated as a dispositional personality trait, but is also a process of adaptive self-regulation that is influenced by early relational experiences and the development of emotional skills. The overlapping of the evidence in the different populations offers more effective support to the conceptualization of self-compassion as a process of emotional competence to psychological resilience. The review therefore can help to develop theoretical models where self-compassion is one of the theorized concepts in the intersection of emotional development and relational contexts where it is situated.

Research Implications :

The review identifies certain significant research directions. First, although the correlations were found between perceived parenting and emotional competence and self-compassion were repeatedly found, there were fewer studies that examined both constructs simultaneously as a single analysis mechanism. The integrative models that can be used in future studies to understand the mechanisms of development would involve testing the sequential or mediational pathways of these variables.

Second, most of the cross-sectional designs are not very causal. Further longitudinal and prospective research is necessary to establish the chronology of time and observe the effects of parenting experience on emotional competence and self-compassion in the future. Further methodological rigor would be increased through multi-method approaches (combination of behavioral assessment and multi-informant designs) and reduce the reliance of self-report data.

In addition, the literature used has been of varying cultural backgrounds but its series in cross-cultural comparisons have been limited. Since norms of parenting and emotional socialization practices vary between societies, future studies ought to investigate the culturally specific developmental pathways of self-compassion.

Practice, Intervention and Policy Intervention :

According to the findings of this review, emotional competence, favorable relational environments, and self-compassion are practically applicable during the developmental stages. Emotional competence was found to be a protective variable repeatedly with adaptive coping and reduced psychological distress, suggesting that emotional skills training can be a useful preventive mental health intervention both in educational, clinical and organizational contexts.

The evidence also highlights the importance of emotionally supportive and autonomy-enhancing relational environments on adaptive self-related processes. Parent-focused psychoeducational initiatives and relationally informed practice will thus have potential

indirect impact on resilience through a focus on developing healthier emotional regulation and feelings of self-compassion. In applied settings, insight into people's perceived relational experiences may be used for focused interventions for emotional dysregulation and self-criticism.

Importantly, self-compassion seems to be an intervention target that can be modified across diagnosis. Programs aimed at fostering self-compassion have shown promise in helping to reduce stress and improve psychological well-being. Combining the integration of emotional competence training and self-compassion practices could give a synergistic effect, especially during adolescence and not too far on and, may I add, let alone in emerging adulthood. At a larger level, the inclusion of emotional development and self-compassion in educational and mental health policies could benefit from promoting long term psychological resilience at a population level.

Limitations of the Study :

Methodological Limitations:

The literature presented in this review has a few weaknesses of the methodology. Most of the studies were done in a cross-sectional study design and so, it is not possible to make a causal inference and the conclusions that can be made about the developmental sequencing between perceived parenting, emotional competence and self-compassion are limited. Some longitudinal and intervention based studies were also found, but these were relatively few. Also numerous studies have been done on the basis of convenience that was particularly prevalent in student populations and could reduce the generalizability beyond academic and urban environments. Diversity of sample sizes and demographic representation also prejudices heterogeneity that can have an impact on comparability across a series of results.

Measurement and Reporting Constraints:

According to this, most of the studies included used self-report instruments extensively to assess parenting perceptions, emotional competence and self-compassion. Whereas in most instances the standardized measures were used, in single-informant designs more prone to response bias, social desirability effects, and shared method variance are present. In other instances, poor reporting psychometric indices or poor reporting of sampling procedures restricted further evaluation of methodology. Moreover, the difference in operationalizations and measurement versions could also be the source of some variation in the reported associations.

Conceptual and Cultural Limitations :

The studies that were reviewed were in geographically different settings but there were limitations in cross-cultural comparisons. Other constructs including parenting norms and methods of emotional socialization and self-related constructs like self-compassion may have different manifestations in different cultural frameworks which may influence observed relationships. Also, most of the studies discussed the constructs of perceived parenting, emotional competence, and self-compassion independently or in pairs or partial combinations but only a small number of studies had combined the constructs in a cohesive developmental model. This abstract dissection does not allow much profound insight into their interactivity route.

Conclusion:

The current systematic review expressed the empirical and theoretical literature research in the investigation of the associations between perceived parenting, emotional competence and self-compassion in adolescence, emergent adulthood and adulthood. In an array of different cultural settings and methodological procedures was a pattern of findings, comprising of the results that relational settings with warmth and autonomy support are positively associated with emotional competence, and the emotional competencies are strongly associated with adaptive self-relating through self-compassion.

The combination of the results renders self-compassion an important integrative variable in emotional development. Instead of being a trait of the individual, self-compassion appears to be the outcome of the internalization of relational experiences, as well as emotional regulating abilities. Emotional competence was identified as a simpler psychological resource whereas perceived parenting proved to be an influential contextual predictor of emotional and self-related mechanisms. These constructs are collectively known to form a developmental pathway that contributes greatly to psychological resilience, well-being and low degree of vulnerability to stress and maladjustment. Although the methodologies of these studies vary to some degree, the uniformity of the results provides some degree of confidence regarding the strength of these associations. Meanwhile, more integrative research and longitudinal research and culturally sensitive research are noted in the review as necessary in order to comprehend the mechanisms of development and contextual factors. Through the synthesis of fragmented information into a unified form, the future implications of this review would enable a more conceptual basis to be built on in future studies and practice to foster

emotional competence and self-compassion within supportive relational contexts.

In general, the evidence confirms the significance of considering the concept of self-compassion not as a standalone phenomenon, but as a cognitive, emotional, and relational experience, respectively, which is delimited by other spheres of emotional development. The implications of such an integrative approach with respect to theory, research, practice, and policy have substantial substance and serve to promote the knowledge advancement related to the formation and the formation of adaptive self-processes.

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Living with autism: comparative insights on parental stress, quality of life, and adaptive coping

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Autism spectrum disorder in DSM-V (2013) may be defined as a “Neurodevelopment disorder, characterized by gross and sustained impairment of social interaction and communication, restricted and repetitive patterns of behavior, interests and activities.” ASD is a lifelong condition which is not curable but manageable. This lifelong condition is threatening for the parents of children with ASD. This paper reviews the comparative analysis Of Quality of Life, perceived stress, trait mindfulness, acceptance of the parents of ASD children as compared with the parents typically developed children. A selective review of Quality of life, Perceived stress, Trait Mindfulness, Acceptance of the parents of ASD children were gathers form the various engine for making systematic review. The Quality of the life of parents with ASD is poor as compared with the parents of typically developed children due to the Core features of Autism and excessive stress. Perceived stress of the parents of ASD children was high due to behavior deficits and lack of management skills of the parents. Trait mindfulness played a role of protector against the negative emotional experience and helps to deal effectively with the child. Acceptance helps the parents to adjust with the child and holding hope for the Childs betterment.

Keywords: Autism Spectrum Disorder (ASD), Parental Stress, Quality of Life (QOL), Trait Mindfulness, Caregiver Burden, Parental Well-being

INTRODUCTION

Autism spectrum disorder in DSM-V (2013) may be defined as a “Neurodevelopmental disorder, characterized by gross and sustained impairment of social interaction and communication, restricted and repetitive patterns of behavior, interests and activities”. This condition was first described by Leo Kanner in 1943 and later studied by many researchers It is one of the most severe developmental disabilities which appear in the first three years of life, although the typical age of onset before 3 years of age. This might include various motor mannerisms or stereotypies, unusual sensitivity to the to the inanimate environment is most common, idiosyncratic interests, resistance to change and preoccupations with the various things, problems with using and understanding language, difficulty relating to people, objects and events, unusual play with toys and objects. As followed by DSM-5 (2013) the Co-morbid

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conditions are common in ASD occurring 26-38% of individuals with ASD also have intellectual disability. Commonly encountered psychiatric co-morbidities in ASD include anxiety disorders (including generalized anxiety disorder, panic disorder and social anxiety disorder), ADHD, and oppositional defiant disorder. The child with ASD also have Maladaptive behaviors, such as aggression, self-injury, and destructive behaviors, have a prevalence of 82-93.7% in children with ASD (DSM-V, 2013). Children with autism are more at risk for developing such problem behaviours than typically developing children and other developmentally delayed children, possibly due to expressive communication difficulties, social emotional reciprocity. Activities of daily living may also be impaired. Feeding problems, such as difficulty in solid uptake and food restrictions, may occur due to sensory processing differences (for example not able to tolerate certain consistency of food such as sticky items) or due to communication difficulties. Toilet training may be challenging due to an overall developmental delay or due to child's sensory issues or focus of attention elsewhere. Children with autism shows observed that abnormal sleep patterns in two-thirds of children with autism (Dominick et al., 2008). Prevalence rate of Autism in India: Between 1 in 500 (2/1,000) to 1 in 166 children (6/1,000) have an Autism Spectrum Disorder (Center for Disease Control, 2012).

Quality of life is a multi-aspect concept which shows performance and emotional wellbeing of a person it is a subjective, multidimensional concept that defines a standard level for emotional, physical, material and social well-being. It serves as a reference against which an individual or society can measure the different domains of one's own life. According to the World Health Organization (2002) Quality of life is defined as "the individual's perception of their position in life in the context of the culture and value systems in which they live and in relation to their goals". The extent, to which one's own life coincides with this desired standard level, put differently, the degree to which these domains give satisfaction and as such contribute to one's subjective well-being, is called life satisfaction.

Stress is a negative emotional experience accompanied by predictable bio-chemical, physiological, cognitive and behavioral changes that are directed either towards altering the stressful event of accommodating its effects (A. Baum, 1950). Stress can be external related to environment, but may also be caused by internal perceptions that cause an individual to experience anxiety or other

negative emotions from a neutral situation, such as pressure, discomfort etc, which they then deem stressful.

Parental stress is regarded as an intricate set of non-specific, persistent and major challenges associated with taking care of their child i.e. one of parents' most important roles. There is still no consensus on the conceptualization of this phenomenon despite a significant amount of data on stress in parents of children with disabilities (Perry, 2004).

Every parent has a different set of expectations about their child's capabilities and when these expectations are not met, the ability to adjust to the child is affected. A child's development and their future outcomes are shaped by a psychologically powerful relationship i.e. the parent-child bond. Parents experience stress that is qualitatively different than other types of life stressors. It was established that mothers with children with ASD than with the typically developed children are at risk of experiencing greater distress (Baker, Blacher, Crnic and Edelbrock, 2002).

Mindfulness means "paying attention in a particular way on purpose, in present moment and non-judgmentally" (Jon Kabat-Zinn, 1991). Mindfulness is originally associated with Buddhist psychology, the term "mindfulness" comes from the Sanskrit word "Smṛti," which literally translates to "that which is remembered" (Williams, Leumann, & Cappeller, 2004). From this, we can understand mindfulness as remembering to pay attention to our present moment experience (Shapiro & Carlson, 2009; Black, 2011).

Psychological acceptance has been variously described "as allowing, tolerating, embracing, experiencing, or making contact with a source of stimulation, particularly private experiences, that previously evoked escape, avoidance, or aggression" (Cordova, 2001). Acceptance is exactly what its name suggests the complete acceptance of oneself. True self-acceptance is embracing who you are, without any qualification, conditions, or expectations (Seltzer, 2008).

From one cross sectional study it was found that acceptance and mindfulness act as a mediator variable for wellbeing of the parents of the children with ASD (Weiss et al, 2012; McDonald, Hastings and Fitzsimons, 2010).

Quality of life and Perceived Stress and ASD a study by V. Perumal, V. Veeraraghavan, and O.P. Lekhara, (2014) find out the factors affecting quality of life of the parents of children with autism and as compared with the physically handicapped children's parent's quality of life as compared with control group. For the final data selection 140 parents (mothers=73, father=67) were selected, where

parents of 54 ASD children, 38 children with physical disabilities (PD) and 48 healthy children. diagnostic tool for autism ISSA were used, and for assessment of quality of life WHQOL-BREF questionnaire were used, it is a cross-sectional study, for statistical analysis t-test were used and other parametric statistics. The study revealed that in QOL of parents of children with ASD compared with physically handicapped children's parents was more impaired. This study finds out that parental QOL is impaired due to the experience of greater anxiety and tension than parents of disabled and normal children. From the physical health domain measures the participants energy level, sleep and satisfaction about their work capacity; it was found that impairment in physical health of the parent of ASD is more than PD and normal children parents, due to the extra physical activates of the parents for the continuous management of children with ASD, more significant impairment was found with ASD children parents than the others 2 groups.

A study by Kuhlthau (2010) revealed that parents of children with ASD are more vulnerable to stress and significant impairment in social relationship domain than other 2 groups, because children with ASD parents often tried to avoid social gatherings like family get together, meeting because of avoidance of embarrassments and some parents ASD children felt stigmatized in public situation and some elderly people discouraged the parents, rather than giving support to them. This is the factors for low score in social relationship of QOL.

A study by V. Eapen, J. Guan, (2016) to find out the parental quality of life with the parents of children with ASD. This Study was a systematic review, which explored the various work on parental QOL of parents of children with ASD. Then this study is summarized, first finding was that ASD impacts significantly parent's quality of life. Mothers of the ASD children were more impaired or poorer physical health than the others mothers' children with disability. It's quite common QOL is poorer due to the emotional, physical, social, financial stresses of caring for a child with disability. There are several reasons because social deficits and repetitive behaviors of the children with ASD may cause more parental distress, and negatively impact parental social network support. Another important finding is that child with ASD due to genetic and environmental factors.

A study by Kheir et al, (2016) assessed the QOL of 56 parents of children with ASD and control group with 42 parents, where WHOQOL were used for measurement of quality of life, for statistical tool t-test were used, from this study find out that parents of children with ASD have poorer quality of life. Parents are more

likely suffered from physical pain, fatigue, tiredness, and poorer mental health than the compared group.

From study by Yamada et al, (2007) found out that QOL was affected of parents of autistic children due to the features of children with ASD such as: deficits in social, emotional reciprocity and shows repetitive and rigid pattern of behaviours cause more distress for the parents. This core feature of ASD negatively affects the social relationships and creates difficulty to maintain social support. With the core features of ASD such comorbidities occur, which consists of maladaptive behaviours, developmental delay and impairment in daily living skills also tends to the poorer Quality of life which interferes with the parental wellbeing.

One study by Pozo et al., Tunget et al, (2005) gave a finding that poorer QOL of mothers associated with ASD severity, while parental QOL was affected by behavioral problem of the ASD children. And also found out that parental distress as the results of poor coping etc.

One study by Davis and Gavidia Payne (2009) Lee, Lopata et al., (2009) found out that there was a significant negative correlation with family quality of life and parental stress, parents of children with ASD perceived a higher level of parental stress; they reported lower level of satisfaction with their Family quality of life.

A study by Johnson et al, (2011) find out the relationships between stress, family functioning and QOL in the parents of children with ASD where parenting stress scale, WHOQOL, and family function survey scale was used. For statistical analysis Pearson correlation was used. Which found out that care giving stress of mothers associated with maternal physical health but not mental health, while in father both stress is associated with physical and mental health? Family dysfunctions can contribute to poor mental health and parental stress, impacting upon the quality of life of the parents. A study by Lyons, Leon, Roecker Phelps and Dunleavy, (2009) on “parental stress and autism: differences in perceived stress and coping behavior”. From this study discussion and results explored that, over all stress was high with the mothers than the fathers. Moreover, mother suffered from stress due to family problems and more pessimistic about the future of the children with ASD, because mothers are more involved with child rearing. Fathers of children with ASD perceived more stress related to lack of services for children as compared with the mother. Another important finding from the study is that the severity impact of autism played a key role for stress in father of children with ASD was more as compared with the mother’s stress. From the previous research paper

of this study it was found out that, ASD children have difficulty in social communication and fathers do feel difficulty to communicate with the child with ASD, due to this Reason feel more stress by father. Another finding from this study is that, with coping behavior dimension seeking spiritual support, acquiring social support, reframing, mobilizing family to acquire and accept help and passive appraisal should significant negative relation with stress in fathers and mothers of children with ASD, more use of this coping dimensions worked as a great tool for reduced levels of stress.

A research by Zait, Smith, Bryson, Frenn, Feetham, Simpson, (2011) reveals that mothers of children with ASD typically take too much additional strain associated with raising a child with special needs and thus have been observed that mothers have higher level of stress than fathers. Parental, child and environmental factors such as increased child symptom severity, high levels of maladaptive child behaviours, lack of parental social support, and parental maladaptive coping skills have shown to affect the level of QOL and developing enormous amount of parental stress (Benson, 2010; Dunn, Bowers, and tattleff-Dunn,2001).

Mindfulness and acceptance:

A study by L. Jones, R. P. Hastings, v. Totisika, L. Keane, N. Rhule (2014) explored that how the ASD Childs behavioral problems leads to psychological distress and explored the mediating role of psychological acceptance and mindfulness. This study included 110 participants, where 71 mothers and 39 fathers, measures used here for child strength and difficulty questionnaire, social communication questionnaire, Vineland adaptive behavior scale used for parents hospital anxiety and depression scale, questionnaire on resources and stress –short form, five facet mindfulness questionnaire, acceptance and action questionnaire used, the statistical analysis were done by Pearson correlations and t-test, regression coefficient were used. From the discussion part it was found out that, psychological acceptance mediated the relationship between child behavior problems and parental wellbeing. for this study finding was that dispositional mindfulness mediating effect in father and mother of children with ASD and significant mediation effects in maternal anxiety, parental depression and as well as parental stress .although mindfulness and acceptance were significantly associated with positive gains for mothers and fathers who was scored higher in the acceptance and mindfulness of the parents, and this parents are more accepting of distressing thoughts and feelings may be more able to positively in relation to their child with ASD.

A study by K. D. Neff, D. J. Faso (2014, 2009) also finds out that “mindfulness showed greater self-compassion and greater empathetic concern and forgiveness for others. One explanation was that whose dispositional mindfulness score was higher; they are more mindful in their parenting. This study implication was, it is helpful in understanding the psychological distress, and why some parents adjust more effectively and potential support for acceptance and mindfulness interventions for parents, particularly mothers of children with ASD.

A study by N. Singh, G. E. Lancioni, R. E. Myers, J. Singh, (2014,) found out “the relationship between mindful parenting and distress in parents of children with autism spectrum disorder. Total participants for the study was 28, where 24 women and 4 men, aged between 32 to 76 years. This is mixed method research where used both qualitative and quantitative approach was used for this study measurement tools were used for child: child behavior rating scale, parenting stress, HADS (hospital anxiety and depression scale), mindful parenting scale and for qualitative open-ended questions were used. Quantitative methodology used both descriptive, Pearson correlation, parametric and non-parametric method was used. From the discussion part it was explored that mindfulness parenting related to levels of depressive symptoms, stress and anxiety symptoms of the parents of children with ASD. Those parents who scores high in mindfulness shows that they tend to the lower score of depression, stress and anxiety symptoms and better adjustment with the autistic children

A finding by Faso et al., Kashdan et al., (2013) found out that mindfulness and self-compassion are connected thus self-compassion was related to lower levels of parental distress. Thus, the self-compassion appears to be important and may be one of the crucial practices, which was contributed key role in mindful parenting and psychological wellbeing in parents. This study also revealed that mindfulness and acceptance-based approaches more impactful positively for parents of children with ASD with high stress and more intense child behavior problems. From the qualitative analysis it has been found out that mindfulness parenting facilitated by the use of other mindful parenting practices.

There is also evidence by Hayes, Strosahl and Wilson, (2012) is found out that, indicates that increasing mindfulness, or a person focused awareness in here and now in order to reduce the stress level as a way to increase awareness of emotions and reframe emotions in more adaptive fashion(bishop et al.,2004).higher level of trait mindfulness are associated with increased life satisfaction, decreased

depression and anxiety, improved emotion regulation and decreased experiential avoidance (Keng, Smoski and Robins, 2011). Mindfulness traits and techniques helps in building parental intervention for better dealing with the child of ASD (Bluth and whaler, 2011).

A study by Sheeran et al., (1997), parental responses to a child's diagnosis of chronic illness or disability indicated that when parents shows acceptance towards their child's diagnosis then they reported less stress and more marital satisfaction, better psychological adjustment and more perceived social support another study by Lord et al (2008) also confirms that acceptance towards their child's diagnosis leads to less stress and more marital satisfaction, better psychological adjustment and more perceived social support from others .

From a study by Nikko S. Da Paz, B. Siegel, M.A. Coccia, E.S. Epel, (2018) on acceptance or despair on maternal adjustment to having a child diagnosed with Autism, which explored that parenting is threatened by a child diagnosis with autism, which is a major challenge that requires ongoing coping skills, attitudes towards the child is negative its quite natural and it requires tremendous adaptation to adjust with the Childs difficulty that often creates elevated clinical distress and leads to poorer psychological acceptance. Behind the acceptance a mechanism is worked out which is named as adjustment and this is connected with the persons awareness, attitudes and beliefs. Thus, adjustment can help the parents for better acceptance of the child. However, the key findings from this study shows that the greater the severity of the children's deficit in behavior the more psychological acceptance of the parents have, quite possibly the greater the condition severity, may be more subtle symptoms of the child increases parents hope for search for answers and therapy for the child and for another diagnosis etc.

Challenges in future research_ with parental quality of life, a study by Lee et al, (2008) for statistical analysis used regression analysis which is a predictive statistic, that means results only predicts the poorer QOL of the parents, not exactly helps in making generalization. With the sample size was small and sociodemographic factors not controlled, parental physical health is subjectively measured on the basis of Quantitative tools or Questionnaires, and psychiatric comorbidities in children were not assessed by any tools, so it should be in future have to do these assessments. From a study by Montalbano and Rochelle (2012) used frequency analysis which only indicating the frequency scores not helps in making inferences, then it is better if there is done t-test for find out the significant difference between two groups, which Also

helps in inference. A study by Johnson et al., (2011) for statistical analysis used correlational analysis and regression analysis which was also predicts the probability of poorer QOL Score with parents of ASD; where the correlational analysis Age of diagnosis and gender of children is not analyzed. Thus, it was not cleared that gender of ASD children can correlated with the parental QOL. From the correlational and regression analysis only, a limited no of QOL factors were explored. Symptoms severity and behavioural factors were not controlled, sampling bias was also found. Results may not be generalizable to countries with differing political and socioeconomic situations. Lack of verification of ASD diagnosis and completion by both parents, mostly the fathers were not participated in studies Large proportion in studies are female rate (Khana et al., 2011; Johnson et al., 2011; Benjak, 2010; Lee et al., 2009).

For the parental distress a study by S. Shahida Batol and sumaria khurshid (2013) for statistical here only correlational analysis and multivariate analysis were used it can be found out that the data were only shows correlational and multivariate analysis of the specific areas of socio-demographic areas, there is a need to collect data from the other areas of country to generalize the results most of the studies no comparison group were used in the study, so it is recommended that parents of typically developed children has also be include for the future findings. Another important thing is that the sample size was not large enough due to limited no of institutions, its hazardous for researcher to collect the data from home to home, its crates burden for the researcher, and thus future findings need to be replicated with a larger sample size. And data should be collected from urban areas, rural and remote area future study (S. Shahida Batol and sumaria khurshid; 2013)). Another study also reveals that purposeful and convenience sampling may have led to biased sample of more resilient parents who are more likely to volunteer and participate (wiesssathron et al., 2013; xue et al, 2014., Chong and kua., 2016).

Form mindfulness and Acceptance research by N.Singh, A. Winton, (2013) for statistical analysis bivariate correlation and regression analysis were used, which is only predicts and shows association between mindfulness and acceptance in the parenting but not shows exact connection with parenting, and here is also not includes any control group for comaparison, thus a control group must used and for future research t-test or other inferential statistics will be used. parents were asked to provide their details about diagnostic, where most of the cases the mothers alone completed the responses of diagnostic tools and this ratings not included fathers

experiences of their children behaviours, and finally most of the studies are cross sectional, then it is very unclear that whether higher levels of mindfulness and acceptance lead to greater level of adjustment or whether better adjusted parents have a greater tendency to be more mindful and psychological acceptance (L. Jones, R. P. Hastings , V. T. L. Keane, N. Rhule ., 2014). Some of researcher also doubts on the reliability and validity of the scales in cross cultures. (S. J. Frraioli, Weiss et al., Zigmond, A.S., and Snaith, R 2008, 2009, 2014).

Future directions about research:

From the various studies it is possible to give a future direction about which objectives need more to be studied, the researchers main aim is to give more emphasis on how to validate the research findings empirically and generalize from it. From the review work it can be said that, most of the research samples are small and studies are cross-sectional in its nature, so researcher work is to replicate it again and again with large sample and using a longitudinal design for the future study. From the prior findings of review, it is reflecting that, most of the time both parents are not participate equally in studies and comorbidities were not diagnosed; so the researcher aim is to diagnosed first the comorbidities must include both the parents for future research. The research samples are only collected from educated parents form urban domicile only; whereas the parents of the rural areas should be included for further study. Indian context the mediating role of trait mindfulness and acceptance of the parents of children with ASD needs more empirical study, because the scale of trait mindfulness and acceptance requires cross-cultural validity and reliability for further use in future for making intervention training for parental wellbeing. For the future it might be fruitful to study the on the parental acceptance of child with autism in Indian context for helps in making inferences for better management of child. Further for future should give the importance on how the parents self-compassion can help in better adjustment with the children with ASD. For future research might include how the coping mechanisms are connected with the mindfulness traits and acceptance. And from most of the studies showed that there was not control group included for comparative analysis of QOL, Perceived Stress, Mindfulness and Acceptances for the future study it is essential to include a control group.

First of all, For the QOL, it is now overall said that, quality of life is affected or hampered by the child's symptoms of autism and their severity level. But several studies also give contradiction with the severity is that quality of life does not depend on the severity of

Autism rather depend on coping of the parents of children with ASD. But mostly it was finally can make a conclusion that quality of life is poor of the parents of children with ASD as compared with the typically developed children.

Second of all for perceived stress from the various studies it can be made to possible overall gist is that parents of children with ASD has suffered more from significant clinical distress with the child's behavioral problem, mothers are suffered more because of their excessive involvement with the child than the father. Thus, perceived stress was high of the parents of children with ASD. Most of the cases the does not have the appropriate capacity to manage and adjust with the ASD children and develops an increased arte of stress, which affects their parental interaction, quality of life and focused attention to the child

Third of all, it is now conclusively said that from various studies mindfulness and acceptance played a role protector and safeguard against the excessive anxiety, perceived stress and improved the quality of life, which is helpful in further interventions of parents. Mindful parenting also improved the psychological wellbeing and related to lower level of stress. Thus, conclusion may be drawn from these studies, which claims that mindfulness and acceptance associated with increased level of life satisfaction, decreased depression and anxiety and increases awareness of emotions and helps in mindful parenting increased compassion toward the child and life acceptance also related with adjustment process. Mindfulness played a role as a protector for the person for better management with distress it builds up self-awareness which boost up confidence of parents to taking their responsibility to the child and improves the coping skills (Giluk, 2009, V. D. Hurk, 2011). Thus, parental hope and find for answers and cure for child can increase the acceptance of the child with autism (Dababnah and Parish, 2016; Whitmore 2016).

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Perceived parenting and body image in emerging adults: A correlational study

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In the contemporary era, body image has arisen as a key concern during the stage of emerging adulthood, a developmental phase characterised by exploration of one's identity, evaluation of self, and increasing independence and responsibilities. During this stage, individuals have a likelihood of internalising familial experiences, especially the perception of their parents' behaviours, which may affect body image development. The current study aims to understand the relationship between perceived parenting and body image dissatisfaction among undergraduate students of Delhi NCR. A quantitative correlational research design was employed, and purposive sampling technique was utilised to collect data from 233 undergraduate students raised by both parents, in the same household. The results have showcased a significant moderate negative correlation between the variables, suggesting that higher levels of understanding, nurturing and empathetic parenting were associated with lower level of body image dissatisfaction. Therefore, the present findings can inform parenting-based interventions, family awareness programs, and preventive mental health policies aimed at promoting healthier body image and psychological well-being among emerging adults.

Keywords: Parenting, perceived parenting, parental influence, body image, body image dissatisfaction, emerging adults, self-perception.

INTRODUCTION

In the present time, body image has become an important constituent of self-perception, especially among individuals who are currently in the phase of emerging adulthood (18-25 years), which is explained by Arnette (2000) as a developmental stage characterised by exploration of one's identity, increased self – assessment, feeling of being “in-between” and heightened attention towards oneself. This phase is considered to be a transitional period as individuals navigate through their personal, academic, social life and form a stable sense of self, making this period susceptible to body image concerns, as these adults become gradually exposed to appearance assessments and evaluation by others, as well as subjected to sociocultural standards of the society they are a part of. Previous researches also suggest that various mental health outcomes such as, anxiety, depression, decreased levels of psychological well-being, lack of self-confidence, self-worth etc, is associated with increased vulnerability to body image dissatisfaction (Cash & Smolak, 2011;

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Grogan, 2021).

Body image dissatisfaction can be considered as a negative facet of body image and defined as the negative perception and evaluation of one's own body shape, size and outer physical appearance (Cash, 2004). Previous researches have highlighted that individuals showcasing heightened levels of body image dissatisfaction are more susceptible to experiencing unhealthy eating patterns, lower levels of life satisfaction and increased emotional turmoil making them comparatively more susceptible to these issues, taking into consideration that they have recently experienced increased independence, with which comes increased responsibilities, evolving interpersonal relationships and social comparison (Stice & Shaw, 2002; Griffiths et al., 2018). On the other hand, while the influence of the society and culture can be seen through media and peer interactions, family dynamics, especially parenting, has been observed to play a fundamental role in influencing an individual's perception of self and the development of their body image (Gardam et al., 2023).

While parenting is related to the interaction and behaviours objectively observed between the parent and the child, it is also important to consider how the child perceives and experiences this behaviour and interaction and how this in turn influences their development and perception of self and life (Sahni et al., 2020). Thus, perceived parenting can be defined as the individual's subjective evaluation of their parents' parenting style, which includes behaviours and interaction between the parent and the child, characterised by affection, acceptance, assistance and authority. Previous researches state that parenting has shown to considerably impact an individual's sense of self, psychological and emotional well-being across the stages of development (Steinberg, 2001). Even in the stage of emerging adulthood, the influence of parenting has been seen to have a significant impact on an individual, by impacting their beliefs and frameworks of self-evaluation, developed in the formative years (Nelson et al., 2010). Compassionate parenting marked by emotional acceptance, feelings of warmth and acceptance have been observed to be linked with healthier sense of self, self-esteem and a healthier body image, and on the other hand, controlled parenting has been associated with unhealthy eating patterns and a negative sense of perception towards one's own body (Ata, Ludden, & Lally, 2007; Kluck, 2010). These inferences put emphasis on the observation that perceived parenting is an important determinant of impacting perceptions related to one's own self, especially the individual's outer appearance beyond their adolescence years.

This relationship can also be comprehended through various theoretical models based on parenting and self-perception. Parental acceptance and rejection theory, developed by Ronald Rohner, highlights that perceived parental acceptance, affection and assistance, influences an individual's sense of self, self-esteem, self-concept and mental adaptation (Rohner & Britner, 2002). Nurturing

and compassionate parenting environments may promote healthier perceptions of self and, on the other hand, unsupportive and critical parenting is observed to be associated with low self-esteem, negative self-appraisal and unhealthy body image perceptions as well. Along with this, Social Learning Theory introduced by Albert Bandura underscores that individuals develop their mindset and opinions through observation and incorporation of behaviours within their environmental context (Bandura, 1977). Parents play an important role as primary role models, impacting how individuals view their own selves, which incorporates their outer appearance. These conceptual models, additionally emphasise on how the individual's perception of their parents' parenting may have an impact on the development of body image perceptions among them.

In the cultural setting of India, familial relationships play an important part in influencing psycho-emotional advancement. In Indian households and families, the emphasis is mostly on interpersonal harmony, parental supervision, guidance and interdependence, which may sustain influence of parenting even in later stages of life (Saraswathi & Pai, 1997). Indian traditions put emphasis on the advancement of sense of self-worth, self-esteem, emotional stability and self-acceptance. As evidenced in the teachings of Bhagavad Gita, which focuses on the inner potential and self-awareness, instead of focusing on the external qualities, thus, encouraging a stable emotional state and sense of self. The concept of *Samatva*, which refers to emotional stability and balance, self-awareness and understanding of oneself surpassing one's physical self, puts emphasis on the importance of being detached from overconcern with one's physical appearance (Dalal & Misra, 2010). Such concepts are in accordance with the modern day understanding of positive perception of self and adequate emotional functioning and well-being, endorsing that family environments which are deemed supportive, facilitate the development of positive body image and decreased levels of dissatisfaction among individuals in emerging adulthood.

In spite of growing literature on body image, limited research from the Indian context have explored the relationship between perceived parenting, including the mothers', fathers' and overall parenting and body image dissatisfaction, especially from an Indian psychology perspective. Thus, the current study aims to analyse the relationship between perceived parenting (mothers', fathers' and overall perceived parenting) and body image dissatisfaction among undergraduate students.

Review of Literature:

Body image has progressively garnered attention in the field of psychological research, especially among the stage of emerging adulthood (18-25 years), as this stage incorporates the formation of one's own identity, evaluation of self, as well as heightened occupation with one's outer appearance. Thomas Cash (2004) was the pioneer of body image and theorised body image as a

multifaceted construct influenced by familial and interpersonal interactions and experiences. He highlighted that body image dissatisfaction is impacted by sociocultural standards of the society the individual is a part of, as well as the environment the individual is being reared in which includes their parenting experiences. In the same way, Stice and Shaw (2002) emphasised that body image dissatisfaction is a major indicator of psychological suffering, unhealthy patterns of eating, and decreased well-being, putting emphasis on the significance of early interpersonal factors that impact one's perspective of body image and its development.

In the late 2000s, with advancement in the field of research, researchers had started to investigate the influence of familial factors on body image outcomes. Rodgers and Chabrol (2009) discovered that appearance-related comments made by parents and their expectations have a significant impact on body image dissatisfaction amongst adolescents and young adults. In the same way, a research conducted by Ata, Ludden, and Lally (2007) investigated the effect of parental, peer, and media influence and discovered that the influence of parents' persisted as a significant determinant of body image dissatisfaction, even after controlling for sociocultural influences.

Subsequent researches put emphasis on parenting style and behaviours and their influence on the offspring's body image. Kluck (2010) stated that parenting characterised by criticism, parental expectations, and controlling actions were related to heightened levels of body image dissatisfaction, on the other hand, nurturing parenting which is marked by emotional warmth and positive regard was observed to be linked with improved perception of one's body image. These results indicate that perceived parenting is an important determinant of body image perceptions. Furthermore, Cash and Smolak (2011) highlighted that familial settings have a foundational impact on the development of one's body image and that understanding and supportive parenting encourages positive perception of self and psychological well-being.

The impact and influence of parenting persists into emerging adulthood through core convictions, attitudes and values. Arnett (2000) presented emerging adulthood as a stage of development marked by exploration of one's identity, instability, focus on self, feelings of being in between and assessment or evaluation of self. Promoting such viewpoints, Nelson et al. (2011) stated that the influence of parenting persists throughout the stage of emerging adulthood through self-monitoring structures, emotional ties and social connections. This advocates that perceived parenting continues to hold relevance in impacting an individual's body image and perception of self throughout their childhood and into their phase of young adulthood as well.

In the context of India, familial associations have a significant influence in determining psychological development. Saraswathi and Pai (1997) emphasised that in Indian families, more emphasis is put on interpersonal relationships, emotional bonds, parental involvement

and guidance, which may prolong the influence of parenting, extending it to emerging adulthood. In the same way, Saraswathi and Oke (2013) highlighted that formation of identity in the Indian youth is heavily shaped by familial aspirations and parental principles. These results recommend that perceived parenting may have a robust impact on an individual's sense of self and body image in the Indian cultural settings.

Many Indian studies have emphasised on the increasing occurrence of body image dissatisfaction among individuals in their early adulthood. Sharma et al. (2019) reported increased levels of body image dissatisfaction among medical college students of Delhi, and discovered that these individuals with low body image satisfaction were observed to be facing poor self-image and psychological distress. Diengdoh & Ali (2022) discovered that body image dissatisfaction among North-east students of India were seen to be linked with low levels of self-esteem, anxiety, symptoms of depression, and decreased levels of psychological well-being.

Research investigating parenting in Indian population has also promoted the significance of perceived parenting. In the similar manner, Sondhi (2017) highlighted that parenting approaches practiced by Indian parents comprises of close emotional relations as well as interpersonal interdependence, which may have an impact on the development of an individual's self-concept. From an Indian perspective, Indian philosophical traditions put emphasis on the intrinsic sense of self-worth and less emphasis on one's outer appearance. In the Bhagavad Gita, certain concepts such as self-awareness and stability in one's emotions, with emphasis on one's intrinsic traits instead of external observable traits have been highlighted (Gannamraju & Chembrolu, 2025). These viewpoints support the present-day psychological understanding of constructive perception of self, emotional stability and well-being, emphasising that parenting environment that is more compassionate and supportive in nature may promote positive body image or body image satisfaction, thus, in turn reducing dissatisfaction.

Recent researches have observed a sustained influence on the significance of parenting and its impact on body image in individuals in their emerging adulthood. Griffiths et al. (2018) stated that body image dissatisfaction in young adults has been seen to be associated with psychological discomfort, distress and decreased levels of well-being. Moreover, modern-day researches showcase that parental warmth and acceptance play an important role as protective factors mitigating body image dissatisfaction and psychological distress.

In spite of growing research on body image dissatisfaction and perceived parenting, limited studies have explored the relationship between perceived parenting, including mothering, fathering and total parenting, and body dissatisfaction among emerging adults within the Indian cultural context. Additionally, researches synthesising Indian psychological perspectives along with perceived parenting and body image remains relatively limited. Thus, the

current study aims to analyse the relationship between perceived parenting and body image dissatisfaction among undergraduate students.

Objectives:

1. To understand the relationship between perceived maternal parenting and body image dissatisfaction among emerging adults.
2. To analyse the relationship between perceived paternal parenting and body image dissatisfaction among emerging adults.
3. To assess the relationship between overall perceived parenting and body image dissatisfaction among emerging adults.

Hypotheses:

H₁ – There will be a significant relationship between perceived maternal parenting and body image dissatisfaction among undergraduate students.

H₂ – There will be a significant relationship between perceived paternal parenting and body image dissatisfaction among undergraduate students.

H₃ – There will be a significant relationship between overall perceived parenting and body image dissatisfaction among undergraduate students.

METHOD

Research design : The present study utilises a quantitative and correlational research design, with the focus on investigating the relationship between perceived parenting (predictor variable) and body image dissatisfaction (outcome variable). The study adopts a correlational research design as it aims to analyse the association between the two variables to determine their potential influence in predicting psychological outcomes, without manipulating the variables (Creswell, 2014). Therefore, this design was considered suitable for examining how perceived parenting relates to body image dissatisfaction among emerging adults. The predictor variable i.e., perceived parenting includes maternal, paternal and overall perceived parenting and its impact of the outcome variable i.e., body image dissatisfaction among undergraduate students is observed.

Sample : The sample of the study consists of 233 undergraduate students falling in the age group of 18-22 years, were raised by both the parents in the same household, are currently enrolled in an undergraduate program and belong to the urban part of Delhi NCR (Delhi, Gurgaon, Noida, Faridabad and Ghaziabad). The sampling strategy used here is non-probability purposive sampling technique, with the focus that, the participants being recruited must meet the inclusion criteria of the study to be a part of it. The exclusion criteria for this study includes all those individuals who are younger or older than the specified age group, are not enrolled in an undergraduate program, haven't been raised by both parents in the same household

and do not possess the ability to read and understand the English language.

Instruments used : The following instruments were used in the present study to assess perceived parenting and body image dissatisfaction among undergraduate students: -

Perceived Parenting Scale : Perceived parenting was assessed using the Perceived Parenting Scale or P scale developed by Dr. R.L. Bharadwaj, Dr. Harish Sharma, and Dr. Amita Garg (1998). This scale intends to measure the nature and quality of parenting as perceived by the offspring for maternal parenting, paternal parenting and overall perceived parenting. This is assessed through various dimensions, including rejection vs acceptance, carelessness vs protection, neglect vs indulgence, utopian expectation vs realism, lenient standards vs moralism, freedom vs discipline, faulty role expectations vs realistic role expectations and marital conflict vs marital adjustment. Participants respond to all the 40 items using a 5-point Likert scale indicating the extent to which each statement reflects their perception of their parents' behaviours in various situations. Higher scores obtained in supportive dimensions indicate positive and healthy perceived parenting, whereas higher scores on negative dimensions suggesting less supportive parenting. This instrument has been widely used in research in the Indian context and has established a test-retest reliability of 0.72, split-half reliability of 0.88 and internal consistency reliability ranging between 0.54-0.79.

Body Shape Questionnaire - 16A (BSQ-16A) : Body image dissatisfaction is measured using the Body Shape Questionnaire – 16A (BSQ-16A) given by Evans and Dolan (1993), which is a shortened version of the original Body Shape Questionnaire (34 items) given by Cooper et al. (1987). The BSQ-16A consists of 16 items measuring concerns related to one's own body shape, weight, and outer physical appearance. Participants rate each item on a 6-point Likert scale ranging from Never (1) to Always (6), reflecting the frequency of occurrence of body image dissatisfaction in the individual. Higher scores indicate greater body image dissatisfaction. The BSQ-16A has established an internal consistency reliability, ranging between 0.86-0.96 and test-retest reliability of 0.91.

Procedure :

Data Collection : Data for the present study was collected from undergraduate students falling between the ages of 18-22 years using purposive sampling technique. Participants were approached through academic groups, going to other colleges and online social media platforms, and only those who met the inclusion criteria were invited to participate in the study. Before the data collection, participants were informed about the intent of the study, and informed consent was acquired. Voluntary participation was assured and responses are to be kept confidential and used only for research purposes. The participants were then made to administer the P Scale (Bharadwaj, Sharma, & Garg, 1998) and the Body Shape Questionnaire–16B (Evans & Dolan, 1993) for which a google form was created,

consisting of the consent form and all the items of both the scales. Participants were requested to respond honestly as there were no right or wrong answers and they were given sufficient time to complete the entire form.

Data Analysis : Post-data collection, the responses were checked for accuracy and completeness and was then scored according to the scoring procedure of their respective tools. The data was then coded and entered into SPSS for analysis. Pearson's product moment correlation analysis was conducted to examine the relationship between the variables of perceived parenting (maternal parenting, paternal parenting and overall perceived parenting) and body image dissatisfaction among undergraduate students.

RESULTS

Pearson's Product Moment Correlation analysis was done to analyse the relationship between perceived maternal parenting, perceived paternal parenting, overall perceived parenting, and body image dissatisfaction among undergraduate students ($N = 233$). The results are presented in Table 1.

Table 1 : *Correlation between Perceived Parenting (maternal, paternal and total perceived parenting) and Body Image Dissatisfaction among undergraduate students ($N = 233$)*

Perceived Parenting	Body Image Dissatisfaction
Perceived maternal parenting	-.405**
Perceived paternal parenting	-.333**
Total perceived parenting	-.409**

** Significance at 0.01 level

Table 1 depicts the correlation values for the relationship between perceived maternal parenting, perceived paternal parenting, and overall perceived parenting and body image dissatisfaction. The relationship is seen to be significantly negatively correlated at the 0.01 level of significance. This indicates that higher levels of positive perceived parenting is seen to be associated with lower levels of body image dissatisfaction. Among the three predictor variables, overall perceived parenting showed the strongest negative correlation with body image dissatisfaction, succeeded by perceived maternal parenting and then perceived paternal parenting. These findings suggest that supportive parenting plays an important role in shaping body image perceptions in undergraduate students falling in the stage of emerging adulthood.

Discussion:

The current study aims to examine the relationship between perceived maternal parenting, perceived paternal parenting, and overall perceived parenting with body dissatisfaction among undergraduate students in the developmental phase of emerging adulthood. This study was conducted using a quantitative correlational research design on a sample size of 233 undergraduate students falling in the age range of 18–22 years. The predictor variable i.e., perceived parenting, was measured using the P Scale developed by Bharadwaj, Sharma, and Garg (1998), which assesses individuals' perceptions of maternal, paternal and overall parenting behaviors across eight dimensions. Body image dissatisfaction was

measured using the Body Shape Questionnaire–16A (Evans & Dolan, 1993), which measures concerns related to body shape, size, outer appearance etc. Data was analysed using Pearson's correlational analysis to investigate the relationship between perceived parenting and body image dissatisfaction. The findings showcased significant moderate negative correlation between perceived maternal parenting, perceived paternal parenting, and overall perceived parenting with body image dissatisfaction, demonstrating that higher levels of perceived parental support were linked to lower levels of body image dissatisfaction among emerging adults.

The results of this study showcased a significant negative relationship between perceived maternal parenting and body image dissatisfaction. This indicates that individuals who perceive their mothers as being more encouraging, nurturing, and emotionally responsive stated lower levels of body image dissatisfaction. These results are in line with previous studies, indicating that parental warmth and acceptance contribute significantly in influencing the offspring's sense of self-perception and body image. McKinley (1999) discovered that maternal acceptance and emotional support were linked to lower levels of body image dissatisfaction among women. Similarly, Kluck (2010) stated that supportive relationships with mothers are seen to be associated with healthier body image by decreasing internalisation of beauty ideals set by the society. These findings stated that maternal warmth encourages a positive emotional environment that fosters acceptance for oneself, which in turn decreased negative perceptions about one's own body.

Furthermore, influence of mothers' parenting is often considered especially important in the development of one's body image because of the close emotional bonds typically associated with mothers and children. Rodgers, Paxton, and Chabrol (2009) found that parental comments and attitudes related to their offspring's appearance considerably impacts body image development among young adults. Mothers are often considered as primary emotional caregivers and their attitudes toward body image and appearance may indirectly influence the self-perception of their offspring. Moreover, research by Cooley, Toray, Wang, and Valdez (2008) found that maternal warmth, was associated with increased levels of self-esteem, which in turn decreased the levels of body image dissatisfaction.

The present study has also found a significant moderate negative correlation between perceived paternal parenting and body image dissatisfaction. This suggests that supportive paternal involvement contributes to healthier body image among undergraduate students. Even though, influence of fathers' parenting has received comparatively less attention in body image research than mothers', some researches have emphasised on the role of fathers in shaping self-image and psychological well-being. Research by Smolak, Levine, and Schermer (1999) found that fathers' comments regarding one's physical appearance, body weight and

physical competence significantly impacted body image dissatisfaction, suggesting that paternal attitudes toward appearance have an important role in shaping body image. Ricciardelli and McCabe (2001) found that paternal beliefs and behaviours have impacted body image and weight concerns, with supportive paternal involvement linked to healthier body image perceptions. A study conducted by Rodgers, Paxton, and McLean (2014) found that fathers' body size attitudes may play an important role in establishing body size attitudes in their sons. Furthermore, Helfert and Warschburger (2011) stated that supportive paternal behaviours have indicated increased levels of body image satisfaction and decreased levels of body image dissatisfaction.

The results of the present study also highlighted that overall perceived parenting also has a significant moderate negative correlation with body image dissatisfaction. This indicates that when individuals perceive both parents as caring, supportive and accepting, they are more likely to develop positive body image outcomes. These findings are in accordance with family environment studies which suggests that compassionate family environments have promoted positive self-assessment and judgement and psychological well-being. Cash and Smolak (2011) indicated that family support plays an important role against body image dissatisfaction by promoting more acceptance and reducing outer appearance-based evaluation. In the same way, Ata, Ludden, and Lally (2007) found that positive and healthy familial relationships were linked with lower body image dissatisfaction and decreased level of internalisation of beauty standards of the society. Therefore, overall perceived parenting may contribute to a more secure emotional environment that promotes acceptance of one's body from inside out and decreases the levels of dissatisfaction among emerging adults.

These findings can also be understood within the Indian cultural and psychological context. Indian families, which are characterised by mutual interdependence, close emotional bonds and ties, and active parental involvement, may extend influence of parenting into emerging adulthood. Saraswathi and Pai (1997) highlighted that Indian parenting practices focuses on support, emotional connections, and harmonious relationships, which acts as an addition towards psychological development. This interpersonal and relational focus of Indian families may reinforce the impact of perceived parenting on body image development.

Moreover, Indian psychological traditions put emphasis on the inner sense of self-confidence and worth, emotional stability, and reduced focus on outer appearance. Psychological interpretations from the Bhagavad Gita highlight the significance of acceptance of oneself and emotional balance. Concepts such as *Samatva* (emotional balance), which focus on inner abilities rather than external characteristics put emphasis on the development of a stable self-concept (Dalal & Misra, 2010). These notions correspond with the results of the present study, indicating that supportive parenting may

promote inner self-value and reduce dependency on outer physical appearance for self-judgement.

Furthermore, Indian psychological perspectives highlight the role of familial relationships in shaping self-identity and self-perception. Researches in Indian psychology put forth that self-concept in collectivistic cultures, like that of India, develops through social bonds and emotional connections rather than personal attributes (Sinha & Sinha, 1990). Therefore, parental acceptance and support has an important role in shaping body image outcomes among emerging adults in the Indian socio-cultural context.

Limitation : Despite the significant results, the present study has certain limitations that should be acknowledged. First, the study utilised a correlational research design, which limits the ability to establish cause and effect relationship between the two variables. Thus, while significant relationships were observed, claims cannot be made whether parenting directly causes body image dissatisfaction. Second, the study relied on self-report measures, which might have become subject to response bias, social desirability, and different subjective interpretation of the items. Along with this, the sample only consisted of undergraduate students aged 18–22 years, which limited its generalisability to other age groups or non-student populations. Additionally, the use of purposive sampling technique may limit representativeness to a broader population and lastly, the study focused only on perceived maternal, paternal and overall parenting and did not consider other factors such as influence of peers, exposure to media, cultural beauty standards, personality factors etc, which have been found to have an impact on body image dissatisfaction (Cash & Smolak, 2011).

Implications : The results of the present study have significant theoretical and practical suggestions. The findings puts emphasis on the importance of supportive parenting especially during the stage of emerging adulthood, indicating that parents play an important role in influencing body image and perception of self beyond adolescence. These results may be useful for parents, teachers, and mental health professionals in facilitating positive body image among undergraduate students. Parenting interventions and awareness programs might put emphasis on support, emotional warmth and acceptance in promoting development of positive body image, thus, perceived parenting might also add to promotion of mental health and body image healing among emerging adults, as supportive parental relationships may foster emotional stability, self-acceptance, and resistance against concerns related to one's outer appearance. Moreover, counselling psychologists and mental health professionals working with emerging adults may consider exploring familial relationships and parenting experiences while addressing body image concerns. Integrating Indian psychological principles such as self-acceptance, emotional stability, and focus on one's inner qualities may further support interventions with the aim of improving body image. Therefore, the findings propose that establishing

compassionate and supportive parenting practices may serve as a protective factor against body image dissatisfaction, especially among emerging adults.

Conclusion:

The current study aimed to analyse the relationship between perceived maternal parenting, perceived paternal parenting, and overall perceived parenting with body image dissatisfaction among undergraduate students. The findings revealed significant moderate negative relationships between perceived parenting and body image dissatisfaction, indicating that compassionate and supportive parenting is linked to lower levels of body image dissatisfaction. These findings put emphasis on the sustained impact of parenting into emerging adulthood with emphasis on the importance of positive parental relationships in shaping body image outcomes and self-perception. The results align with Indian psychological perspectives that highlight interpersonal harmony, emotional stability and self-acceptance. Overall, the study adds to the growing literature on parenting and body image by highlighting the protective role of supportive parenting and putting emphasis on the importance of culturally rooted psychological understanding in promoting healthy body image outcomes among undergraduate students.

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The psychological impact of performing arts on emotional regulation and coping styles

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Practicing performing arts is seen to have associations with psychological well-being, particularly during the period of young adulthood, which is characterized by academic pressure, variation in emotions, and identity formation. Emotion regulation and coping styles play a critical role in how young adults manage these challenges. Although music, dance, and theatre are often viewed as constructive outlets for emotional expression, empirical findings examining their role in shaping emotion regulation and coping styles remain fragmented. This review aimed to systematically study existing literature on the relationship between performing arts participation and emotion regulation and coping styles among young adults aged 18–26 years.

The review was conducted according to the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) guidelines. Electronic databases including PubMed, Scopus, PsycINFO, and Google Scholar were searched for peer-reviewed and relevant gray literature published over the past decade. Quantitative studies focusing on undergraduate and postgraduate populations, including both practitioners and non-practitioners of performing arts, were considered. Studies examining differences across gender, year of study, type of performing art, and duration of engagement were included for synthesis. Findings suggest that participation in performing arts is generally associated with more adaptive emotion regulation strategies and constructive coping styles. The review highlights the need for more thorough comparative and longitudinal research studies for understanding the developmental role of performing arts in fostering emotional competence and resilience among young adults, in a better way.

Keywords: *Performing arts, Emotion regulation, Coping styles, young adults, resilience.*

INTRODUCTION

Emotion regulation is known to be the capacity to balance the onset, intensity, and duration of emotional experiences which is the basis of psychological well-being, particularly during the developmental stage of young adulthood (Gross, 2015). During the years of higher education young adults go through visible transition which includes increased psychosocial demands, higher academic pressure, interpersonal stressors, identity negotiations and emerging autonomy,

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all of which becomes a strain on regulatory capacities of the individual (Arnett, 2000). Lack of adaptive emotion regulation have been consistently linked to the onset and maintenance of anxiety, depression, and maladaptive coping behaviours in this population (Aldao, Nolen-Hoeksema, & Schweizer, 2010).

Coping styles are simply the cognitive and behavioural strategies that every individual use to manage stressors (internal and external) which are interconnected with emotion regulation processes. Adaptive (e.g., problem-focused coping, positive reappraisal) or maladaptive (e.g., avoidance, rumination), coping strategies significantly influence how young adults respond to adversity and psychological distress (Lazarus & Folkman, 1984; Carver & Connor-Smith, 2010). Growing evidence suggests that engagement in expressive arts-based activities may serve as a significant variable in shaping both emotion regulation skills and coping capabilities.

Performing arts which includes theatre, dance, music performance, and allied disciplines, are structured expressive activity which simultaneously engage cognitive, affective, somatic, and interpersonal processes. Unlike passive artistic consumption, like listening to music, practising performing arts include active personification or enactment of emotion, continuous attention regulation, collaborative alignment, and the rehearsal and transformation of emotional states within a socially bounded context (Stuckey & Nobel, 2010). These mechanisms align with core components of evidence-based emotional regulation frameworks, including Gross's (2015) Process Model and Dialectical Behaviour Therapy's (DBT) skills of emotional modulation and distress tolerance.

Young adulthood, particularly the college going phase consists of a critical developmental window wherein emotion regulation and coping capacities are combined, even when demands rise high. Indian undergraduate and postgraduate students face a combination of academic overload (70% reporting overwhelming pressure per UGC surveys), financial strain (28% citing finances as primary stressor; Lancet, 2024), identity crises coming from social media comparison, relationship issues, and persistent stigma about mental health particularly around help-seeking. National data reveal over 13,000 student suicides in India in 2024 alone which rates two to three times those of the general youth population, this indicates the urgent need for scalable, culturally acceptable, and evidence-based psychological support (Yirdong et al., 2026; Bhattacharyya et al., 2024).

Traditional psychotherapeutic services are inaccessible to the vast majority of students in distress due to shortage of trained professionals, stigma about mental health, and infrastructural barriers. In this context, expressive and performing arts- music, dance, drama, visual art, and their therapeutic outcomes, emerge as easy alternatives. Practices based on cultural history such as

Bharatanatyam, Hindustani and Carnatic music, and folk theatre forms provide familiar, non-stigmatised channels for emotional expression within the Indian context. Other than cultural resonance, art-based interventions use definite psychological mechanisms, like providing safe, symbolic space for overwhelming affect, stimulating non-verbal and pre-verbal emotional processing, enhancing interoceptive awareness, and fostering social connection through collective participation (Van der Kolk, 2014; Malchiodi, 2012; Koch et al., 2019).

Despite a several empirical literatures on arts therapies, reviews still focus mostly on clinical populations, single modalities, or perceived assessment of individual's life and overall well-being. Detailed research examining the specific impact of expressive and performing arts on the dual constructs of emotion regulation and coping styles, different modalities, populations, and cultural contexts, remains absent from the literature. The present systematic review addresses this gap.

Significance of the Study:

The mental health burden among university-going young adults has reached critical levels globally, with epidemiological data consistently indicating elevated rates of anxiety, depression, and psychological distress in this population (WHO, 2022; Auerbach et al., 2018). In the Indian context, there has been an increased attention on inadequate traditional or clinical approaches for addressing mental health needs of students, which stresses on need for preventive and complementary framework.

Performing arts participation is now very popular in universities and colleges through different cultural societies, workshops and extracurricular engagements, yet its proper psychological impact remains underexplored. A review in this area holds potential to: (a) inform university about mental health policies regarding arts-based programmes, (b) contribute empirical grounding to the fields of arts and health, and (c) provide a comparative understanding of how practicing status moderates psychological outcomes, contributing insights relevant to both preventive psychology and psychoeducation.

Conceptual Framework:

The present review is anchored in Gross's (1998, 2015) Processes model of emotional regulation, which distinguishes antecedent-focused strategies (notably cognitive reappraisal) from response-focused strategies (significant expressive suppression), with reappraisal consistently associated with superior psychological outcomes. Lazarus and Folkman's (1984) Transactional model of stress and coping provide with the complementary framework which distinguishes problem-focused, emotion-focused, and avoidance-oriented coping. The Emotion Regulation Strategies for Artistic Creative Activities (ERS-ACA; Fancourt & Steptoe, 2019) further describes how arts engagement may make use of avoidance,

approach, and self-development regulatory strategies, each with distinct implications for psychological wellbeing.

These frameworks collectively propose that performing arts participation would: (a) promote cognitive reappraisal by using symbolic, metaphorical or abstract representation to process intense emotions; (b) reduce suppression by creating easy and comfortable channels for emotional expression; (c) foster adaptive coping through enhanced emotional awareness, social support, and meaning-making; and (d) Reduce maladaptive coping by interrupting avoidance and negative thought pattern. The present review tests these theoretical predictions against the accumulated empirical evidence.

Objectives:

1. To study the empirical evidence on the association between performing arts engagement and emotion regulation outcomes.
2. To understand how art participation influences adaptive versus maladaptive coping styles.
3. Identify the role of demographic variables including modality, age, gender, and cultural context.
4. To gain insight into Indian and western studies on association between emotional regulation and coping styles.

METHOD

This systematic review was done according to the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA, 2020) guidelines (Page et al., 2021). The research question guiding the review was framed using the PICO framework: Population (individuals of any age, with particular attention to young adults and college-going populations); Intervention (expressive or performing arts engagement, whether therapeutic or non-clinical); Comparator (no arts engagement, waitlist, or alternative intervention); and Outcome (emotion regulation or coping styles).

Search Strategy:

A systematic search was conducted across various electronic databases: PubMed/MEDLINE, APA PsycINFO, SCOPUS, Google Scholar, and EBSCO (PsycARTICLES and Academic Search Complete). The search was restricted to publications from January 2000 to March 2026. The search terms combined three conceptual clusters using Boolean operators:

Key terms: ("expressive arts" or "performing arts" or "art therapy" or "music therapy" or "dance movement therapy" or "drama therapy" or "theatre therapy" or "creative arts" or "expressive therapy" or "arts-based intervention" or "Indian classical dance" or "Indian classical music")

Key terms: (Emotion Regulation): ("emotion regulation" OR "emotional regulation" OR "cognitive reappraisal" OR "expressive suppression" OR "emotion dysregulation" OR "emotional awareness" OR "affect regulation" OR "self-regulation")

Key terms: (Coping): ("coping" OR "coping styles" OR "coping strategies" OR "adaptive coping" OR "maladaptive coping" OR "stress coping" OR "psychological resilience")

The three key terms were combined. In addition, reference lists of all included studies and relevant narrative reviews were manually screened for eligible studies.

Eligibility Criteria:

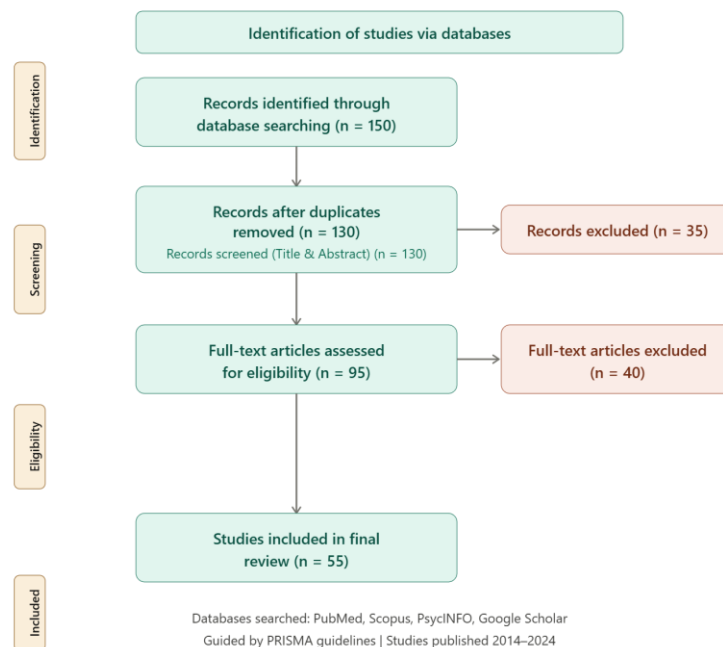
Studies were assessed for inclusion against a pre-specified set of eligibility criteria, organised according to the PICO framework (Population, Intervention/Exposure, Comparator, Outcome).

Inclusion criteria:

1. Peer-reviewed empirical studies, systematic review papers, meta-analyses, or narrative reviews.
2. Indian or western studies involving any form of expressive or performing arts as the primary variable or intervention for young adults.
3. Studies measuring emotion regulation or coping styles

Study Selection Process:

Studies were selected following PRISMA MODEL: identification, screening, eligibility and inclusion. Titles and abstracts of the studies were screened independently of inclusion and exclusion criteria. Studies meeting the criteria at the abstract stage were then thoroughly read through their full-text for deeper assessment.



RESULTS

The 55 reviewed studies were published between 1998 and 2026, with a marked increase in publications from 2010 onwards, which reflected growing scholarly interest in arts-based

psychological interventions. Geographically, the majority originated from the United States ($n = 22$), the United Kingdom ($n = 10$), Australia ($n = 5$), and India ($n = 6$), with the remainder representing various European and Asian contexts. Study designs included randomised controlled trials ($n = 12$), quasi-experimental studies ($n = 10$), longitudinal studies, cross-sectional surveys, qualitative studies, mixed-methods studies, and systematic reviews or meta-analyses. Sample sizes ranged from $N = 10$ (qualitative retrospective) to $N = 47,924$ (large-scale internet survey). Arts modalities represented included music and music therapy, dance movement therapy, drama/theatre therapy, expressive arts therapy, and visual art therapy.

Emotion Regulation Outcomes:

Music Therapy and Music Participation:

Music-based interventions demonstrated consistent effects on emotion regulation across studies. At the physiological level, Kaimal, Ray, and Muniz (2016) revealed that 45 minutes of art/music making notably reduces salivary cortisol levels, irrespective of participants' prior experience of engagement in arts, providing objective evidence of neurobiological stress modulation. Pelletier's (2004) meta-analysis demonstrated a medium-to-large effect size for music for decreasing physiological arousal ($d = 0.67$), while Theorell et al. (2013) confirmed that active music-making, produces significantly greater reductions in cortisol and self-reported stress, compared to passive listening.

At the cognitive level, Gold, Vorcek, and Wingram's (2004) found that music therapy significantly reduced mental health issues in children and adolescents, with emotion regulation improvements partially mediates this effect. Fancourt, Ockelford, and Belai (2014) found that active participation in music promoted cognitive reappraisal strategies and reduced expressive suppression, these findings are directly consistent with Gross and John's (2003) theoretical predictions. Thomson, Olsen, and McPherson (2014) demonstrated in a longitudinal study that sustained musical engagement in adolescents improved emotional awareness and goal-directed regulatory behaviour over 12 months, with effects independent of general cognitive ability.

The social dimension of music, particularly in groups, added regulatory benefits more than those achieved in individual practice. Lima et al. (2016) found that music performance in group produced significant improvements in mood regulation and emotional resilience when compared to individual practice alone, consistent with Bailey and Davidson's (2005) qualitative evidence that group singing fosters emotional wellbeing through social bonding and the experience of collective co-regulation.

Dance Movement Therapy:

Dance movement therapy (DMT) produced particularly strong and consistent evidence for emotion regulation enhancement. Koch et al.'s (2019) largest in the field, found large effect sizes for DMT on emotional wellbeing and body awareness, with the latter serving as a

key close mechanism for improved emotion regulation. These findings align with Van der Kolk's (2014) clinical framework positing that trauma and dysregulation are stored somatically and require embodied, movement-based interventions for resolution.

Pylvänäinen, Mutoko, and Lappalainen (2015) demonstrated in a well-controlled RCT with 6-month follow-up that DMT significantly reduced maladaptive coping patterns and strengthened emotion regulation skills in adults with depression, which had effects lasting for long. Crucially, awareness about body mediated the improvements in emotional regulation. Cruz and Sabers' (1998) earlier meta-analysis similarly found DMT superior to control conditions in improving psychological wellbeing and reducing emotional avoidance.

In the Indian context, Nair and Imran's (2024) comparative study found that classical dancers trained in Indian classical forms demonstrated significantly higher emotional expressivity and empathy compared to non-dancers, with emotional expressivity negatively correlated with expressive suppression, a pattern consistent with DMT's proposed mechanisms. Sarkar and Biswas (2015) found that classical dance-based movement therapy improved emotional expression and adaptive coping among Indian adults, while Hanna (2015) emphasized the integration of physical sensations with emotional experience unique to embodied movement practices.

Drama and Theatre Therapy:

Drama-based interventions distinguished themselves through their unique capacity to enhance empathetic experience, taking perspective emotionally, and emotional flexibility, capacities directly linked to adaptive emotion regulation. Goldstein and Winner (2012) found in a controlled experimental study that adolescents randomised to a drama training programme showed significant improvements in emotional understanding and theory of mind compared to control group. Noice and Noice (2006) demonstrated that theatrical training improved attentional control and emotional responsiveness in older adults, with downstream effects on adaptive coping.

McCarthy et al. (2016) found that drama therapy interventions significantly reduce emotional suppression and increases problem-focused coping among psychiatric patients. Pope and Jones (2022) provided rich qualitative evidence that creative and expressive arts participation, young adult population enabled participants to overcome emotional vulnerabilities, process trauma, and develop positive emotional narratives about their futures.

Coping Style Outcomes:

Across the studies, arts engagement consistently showed a significant shift from maladaptive to adaptive coping styles. Kaviani et al.'s (2011) survey of 413 students demonstrated that emotional intelligence, a construct which is very closely related to arts-based processing at emotional level, was positively related with problem-focused coping and positively emotion-focused coping, while

negatively associated with negative emotion-focused coping. Daykin et al.'s (2018) systematic review found that performing arts participation consistently encouraged movement from avoidance-oriented to adaptive emotion focused coping and problem focused coping across diverse populations.

Rickard, Bambrick, and Gill (2012) demonstrated that active music participation in school days result in significant reductions in stress and improvements in emotional coping relative to control. McCarthy et al. (2016) found drama therapy specifically reduced reliance on emotional suppression as a coping strategy (a maladaptive response-focused strategy per Gross's model) while increasing problem-focused coping. Levine and Levine (2011) indicated through the reviews that sustained arts participation builds emotional resilience, operationalised as the capacity to maintain adaptive coping under stress, by strengthening self-regulation and deepening emotional insight.

Winner, Goldstein, and Vincent-Lancrin's (2013) OECD systematic review provided educational-policy-level evidence that arts education programmes contributed to improved emotion regulation and psychological adaptability in school populations, with benefits persisting beyond the immediate educational context. Pylvänäinen et al.'s (2015) follow-up data confirmed that reductions in maladaptive coping achieved through DMT were sustained at 6-month post-treatment assessment, indicating durable coping benefits beyond the intervention period.

Discussion:

Summary of Evidence:

This review studied 55 empirical studies and review papers spanning 26 years of research, providing the most comprehensive available evidence base on the association between performing arts engagement and emotional regulation and coping outcomes. The cumulative evidence overwhelmingly supports the hypothesis that arts participation, across modalities, populations, and cultural contexts, enhances emotion regulation capacities and promotes adaptive over maladaptive coping strategies.

Four primary conclusions emerge from the study. First, arts engagement consistently promotes cognitive reappraisal over expressive suppression, aligning with Gross and John's (2003) evidence that reappraisal is associated with superior psychological outcomes. Second, the mechanisms through which arts achieve these effects are modality-specific: DMT operates primarily through somatic-interoceptive pathways; music therapy through neurobiological cortisol and autonomic modulation; drama therapy through social-cognitive and empathic routes; and expressive arts therapy through multi-modal integration. Third, group and collective arts formats provide social coping benefits, enhanced co-regulation, social support, shared meaning-making, that exceed those achievable through individual practice. Fourth, cultural embeddedness amplifies the regulatory efficacy of arts engagement, particularly in populations

such as Indian young adults for whom classical arts traditions carry deep personal and spiritual significance.

Theoretical Implications:

The findings provide strong empirical support for Gross's (1998, 2015) Process Model as applied to arts contexts: the consistent finding that arts participation promotes cognitive reappraisal, an antecedent-focused strategy targeting the appraisal of emotional situations, confirms that arts-based interventions operate at the critical pre-response stage of emotion generation. The ERS-ACA framework (Fancourt & Steptoe, 2019), which identifies avoidance, approach, and self-development as distinct arts-specific regulatory strategies, extends Gross's binary model and suggests that arts-based ER is more complex and multidimensional than previously theorised.

From a coping theory perspective, the shift from avoidance-oriented to problem-focused and adaptive emotion-focused coping documented across studies is consistent with Lazarus and Folkman's (1984) prediction that effective appraisal and resource mobilisation underlie adaptive coping. Arts engagement may function as what Lazarus termed 'coping self-efficacy', the confidence in one's capacity to manage emotional demands, thereby reducing reliance on avoidance, rumination, and suppression as default responses to stress.

Implications for Practice:

The evidence base assembled in this review carries several practical implications. In educational settings, particularly colleges and universities, structured arts engagement programmes, whether music ensembles, drama clubs, dance classes, or expressive arts workshops, may function as scalable, low-stigma mental health promotion strategies. The dose-response evidence suggests that sustained engagement (minimum 8 weeks, at least weekly sessions) is required for clinically meaningful emotion regulation gains, informing programme design parameters (Sane & Kulkarni, 2024; Koch et al., 2019).

In clinical settings, arts-based interventions warrant serious consideration as adjunctive or standalone treatments for populations presenting with emotion dysregulation, including anxiety, depression, PTSD, and suicidality, particularly where verbal psychotherapies are inaccessible or culturally incongruent. The Yirdong et al. (2026) finding that goal-directed regulatory behaviour and emotional awareness are specifically predictive of suicide attempt history (beyond suicidal ideation) suggests that arts interventions targeting these specific ER dimensions may be especially warranted in high-risk populations.

In the Indian context specifically, integrating classical performing arts- Bharatanatyam, Kathak, Hindustani or Carnatic music, folk theatre, into student wellness programmes represents a culturally authentic, non-stigmatised, and potentially highly effective strategy for addressing the mental health crisis documented in Indian higher education. Future institutional policies should consider

mandatory or accessible performing arts engagement as a component of holistic student development frameworks.

Limitations of the Review:

Several limitations warrant acknowledgement. First, the heterogeneity of study designs, populations, arts modalities, outcome measures, and reporting standards precluded quantitative meta-analytic synthesis, limiting the precision with which effect sizes can be estimated. Second, the majority of high-quality RCTs originated from Western clinical contexts, limiting generalisability to non-clinical, culturally diverse, and community populations, particularly Indian college-going young adults who represent a critical underserved group. Fourth, the causal mechanisms posited in this review, while theoretically coherent, are largely inferred from correlational and quasi-experimental designs rather than confirmed through mediation analyses with pre-registered designs.

Conclusion:

This systematic review provides comprehensive evidence that expressive and performing arts engagement constitutes a scientifically supported, theoretically coherent, and practically accessible pathway for enhancing emotion regulation and fostering adaptive coping across diverse populations and cultural contexts. The 55 studies herein converge on a conclusion that arts participation promotes cognitive reappraisal over expressive suppression, shifts coping orientations from avoidance toward adaptive problem-focused and emotion-focused strategies, and yields measurable neurobiological and psychological benefits. These effects are achieved through distinct modality-specific mechanisms, somatic-interoceptive for dance, neurobiological for music, social-cognitive for drama, and integrative for multi-modal expressive arts that are broadly consistent with established emotion regulation theory.

In the context of the escalating mental health burden among college-going young adults in India, characterised by unprecedented levels of academic stress, identity disruption, financial pressure, and suicidal behaviour, these findings carry particular urgency. Culturally embedded classical performing arts traditions offer a uniquely resonant, non-stigmatised, and scalable medium through which emotion regulation capacities can be cultivated at a population level. Realising this potential requires the conduct of rigorous, culturally sensitive, adequately powered trials that test arts-based interventions in Indian educational and community settings, using validated outcome measures and pre-specified mechanistic hypotheses.

The arts are not only aesthetic development but they are, as this review demonstrates, significant instruments of psychological transformation. Their systematic integration into mental health promotion and clinical practice represents both a scientific imperative and a cultural opportunity.

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Does educational status influence perceptions of collective efficacy, social identification, and well-being in disaster-affected populations? evidence from District Srinagar, J&K

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Background: In disaster-affected populations, psychological and social constructs such as collective efficacy, social identification, shared goals, common fate, expected support, and psychological well-being are often assumed to be influenced by educational status. However, it remains unclear whether literacy levels (literate vs. illiterate) significantly differentiate these outcomes in community settings recovering from disasters. This study examines whether educational status (literate vs. illiterate) influences the mean levels of common fate, social identification, expected support, shared goals, collective efficacy, and psychological well-being among people in District Srinagar, Jammu & Kashmir, in a disaster-affected context. A cross-sectional design was used with a sample of N = 500 residents of District Srinagar (J&K, UT). Participants were grouped by educational status (literate vs. illiterate). Mean scores on the six constructs (common fate, social identification, expected support, shared goals, collective efficacy, psychological well-being) were compared using independent-samples t-tests. The results indicate no statistically significant differences between literate and illiterate respondents in all six constructs

Keywords: Disaster; Collective Efficacy; Social Identification; Psychological Well-Being; Educational Status; Community Resilience

INTRODUCTION

Disasters have no prejudice and treats all equal is a common saying and it has been observed that when a Disaster hits it leaves no one unaffected and disrupt more than just physical infrastructure—they challenge social fabric, identity, psychological stability, and resources that help people cope (Muldoon, Acharya, Jay, Adhikari, Pettigrew, & Lowe, 2017).

Disasters have been unbiased and equal when it comes to effecting a population but still we have seen certain communities respond well, certain are more resilient and certain just get effected beyond their perceptions. So in order to study the differences some Constructs such as collective efficacy (a belief in one's community's ability to act together), social identification (sense of belonging), common fate, shared goals, expected support, and psychological

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well-being are often studied in disaster psychology and community resilience research (Drury, Carter, Cocking, et al., 2019).

Education has always proved to improve human brains ability to deal with any situation and increased the intellectual ability and fostered the decision making and for that matter its pertinent to mention that we are not talking about formal education where were graduate and get classified as literates or illiterates so Educational status has been proposed as a factor that might differentiate these outcomes—literate people may have greater access to information, capacity for planning, resource mobilization, or psychological coping strategies. However, evidence is inconsistent: in many disaster contexts, education's role is mediated by other factors like exposure severity, cultural norms, community cohesion, and social support (Muldoon et al., 2017; Drury, Carter, Cocking, et al., 2020). And when talking about community resilience or community based disaster risk management its mostly not the formal education that come to save lives. No doctorates or graduates come handy but the skills and the long practiced indigenous practices fueled with wisdom and collective efforts that has proved to save lives.

In 2014 floods it was the Rajbagh area of the Srinagar, J&K - most posh, educated and civilized population who got inundated because they lacked the constructs not the formal education and they lacked the perception to the threat of the flood in their area. So Disasters touch every nook and corner it's the awareness through local masses and vernacular languages that's helps. To study the on ground evidences of the influenced of educational status this study was conducted in District Srinagar of J&K, India

This study aims to explore whether educational status (literate vs. illiterate) is associated with differences in perceptions of common fate; social identification; expected support; shared goals; collective efficacy; and psychological well-being in a disaster-affected population from District Srinagar, J&K, India.

METHOD

Participants:

Sample Size 500 adult residents of District Srinagar, Jammu & Kashmir, who have experienced disaster conditions.

Educational Status Participants classified as literate or illiterate based on whether they can read and write or their formal educational attainment.

Measures:

Common Fate: scale measuring how much individuals believe that disaster outcomes are shared among community members.

· **Social Identification:** measure of the sense of belonging or identification with one's local community.

Expected Support: degree to which individuals believe they will receive help from others in their community in times of adversity.

Shared Goals: perception that people in the community share similar goals for recovery or coping.

Collective Efficacy: belief in joint ability of community members to act collectively for common purposes.

Psychological Well-Being: general mental health, emotional stability, satisfaction with life.

Procedure:

Data collected via surveys administered in [time period]

Consent taken from participants

Grouping by educational status; data cleaning and assumption checks for t-tests (normality, homogeneity of variance) conducted

Statistical Analysis:

Descriptive statistics (means and standard deviations) calculated for each group and each construct

Independent-samples t-tests used to compare literate vs. illiterate on each variable

Significance criterion set at $p < .05$

Results

Comparison of Mean Scores of Common Fate, Social Identification, Expected Support, Shared Goals, Collective Efficacy and Psychological Wellbeing among people of District Srinagar of J&K, UT (N=500) with respect to their educational status

Variables	Educational Status	N	Mean	SD	t-value
Common Fate	Literate	374	16.10	6.39	
	Illiterate	126	17.16	6.54	1.59NS
Social Identification	Literate	374	22.36	4.40	
	Illiterate	126	22.44	5.48	.167 NS
Expected Support	Literate	374	16.27	3.74	
	Illiterate	126	16.38	4.18	.281 NS
Shared Goals	Literate	374	15.78	4.18	
	Illiterate	126	16.30	3.54	1.24 NS
Collective Efficacy	Literate	374	16.65	3.55	
	Illiterate	126	16.56	3.68	.240 NS
Psychological Wellbeing	Literate	374	45.59	8.77	
	Illiterate	126	44.05	10.10	1.63 NS

The above Table reveals that Literate and Illiterate people of District Srinagar of J&K do not differ significantly in terms of Common Fate ($t=-1.59NS$ $p>.05$), Social Identification ($t=-.167$ NS $p>.05$), Expected Support ($t=-.281$ NS $p>.05$), Shared Goals ($t=-1.24$ NS $p>.05$) Collective Efficacy ($t=.946NS$ $p>.05$) and Psychological Wellbeing ($t=1.63$ NS $p>.05$). These results clearly indicate that there is no difference between the mean scores of literate and illiterate of District on these variables.

Srinagar of J&K, UT on social identification”; The above results reveal that Literate and Illiterate people of District Srinagar of J&K do not differ significantly in terms of Common Fate, Social Identification, Expected Support, Shared Goals, Collective Efficacy and Psychological Wellbeing. Our results clearly reveal that

education has insignificant role in the above mentioned variables which is partially true.

Though education has its important role in ones life but at times education fails to safeguard a person when circumstances are not in his/her control. These findings clearly pave way for future researchers in order to investigate the role of education in such factors. Though in our study role of education is seen to be insignificant but the we must not forget the basic principle of research which clearly states that nothing is purely final and there is always scope for refutation and acceptance of the research findings.

All comparisons yielded p values greater than .05; thus no statistically significant differences were found between literate and illiterate groups on any of the six constructs.

Discussion :

The present study examined whether educational status (literate vs. illiterate) differentiates perceptions of common fate, social identification, expected support, shared goals, collective efficacy, and psychological well-being among disaster-affected populations in District Srinagar, Jammu & Kashmir. Contrary to commonly held assumptions, the findings revealed no statistically significant differences between literate and illiterate participants across any of the six constructs.

These findings align with prior disaster and social psychology research suggesting that, under conditions of collective threat, shared experience and social identity often become more salient than individual-level characteristics such as formal education (Drury et al., 2019; Muldoon et al., 2017). Disasters tend to produce a sense of common fate, wherein individuals perceive their outcomes as interconnected with those of others, leading to enhanced solidarity, cooperation, and mutual support irrespective of educational background.

From a theoretical perspective, the results are consistent with collective efficacy theory, which emphasizes a group's shared belief in its conjoint capabilities rather than the attributes of individual members (Bandura, 2000). In disaster contexts, collective efficacy is frequently shaped by social cohesion, trust, and prior collective action rather than literacy or formal educational attainment. This may explain why both literate and illiterate respondents in the present study reported comparable levels of collective efficacy and related social-psychological constructs.

Furthermore, social identity approaches to disaster resilience highlight that emergent shared identities play a crucial role in promoting well-being, social support, and coordinated action during and after emergencies (Drury et al., 2020; Haslam et al., 2018). In close-knit communities such as those found in Srinagar, strong local norms, kinship networks, and culturally embedded coping mechanisms may mitigate potential differences arising from educational disparities.

The findings also resonate with community resilience frameworks, which argue that resilience is a function of social capital, collective resources, and adaptive capacities rather than individual socioeconomic indicators alone (Norris et al., 2008). In the Kashmiri context, indigenous knowledge systems, lived disaster experience, and informal community leadership often play a more decisive role in disaster response than formal education, as observed during events such as the 2014 floods.

Implications:

These results have important implications for disaster management policy and practice. Disaster preparedness, response, and recovery programs should avoid assuming that literate populations inherently possess stronger psychological or social resources. Instead, interventions should focus on strengthening community identification, fostering shared goals, enhancing trust, and supporting collective action across all educational groups.

Conclusion:

The present study examined whether educational status influences perceptions of common fate, social identification, expected support, shared goals, collective efficacy, and psychological well-being among disaster-affected populations in District Srinagar, Jammu & Kashmir. Based on data from 500 respondents, the findings clearly indicate that literate and illiterate individuals do not differ significantly across any of these social and psychological constructs.

These results challenge the conventional assumption that formal education necessarily enhances psychosocial resilience in disaster contexts. Instead, the findings suggest that shared disaster experiences, strong community bonds, and collective identity may play a more decisive role in shaping perceptions of efficacy, support, and well-being than educational attainment alone. In contexts marked by close social networks and repeated exposure to hazards, collective processes appear to override individual-level distinctions such as literacy.

The study underscores the importance of viewing disaster resilience as a socially embedded phenomenon rather than an outcome driven solely by formal education. While education remains valuable for long-term development and awareness, it may not be sufficient by itself to safeguard individuals or communities during extreme events. Effective disaster risk reduction and recovery strategies should therefore prioritize strengthening social cohesion, fostering shared goals, enhancing collective efficacy, and supporting inclusive community participation across all educational groups.

Overall, the findings contribute to disaster management and community resilience literature by providing empirical evidence from a disaster-prone Himalayan context, highlighting the need for policies and interventions that move beyond education-centric approaches and instead leverage the collective strengths inherent within communities.

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Generative AI and self-efficacy: A relational study among young adults

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Generative AI is a tool which generates novel outcomes based on user data. Generative AI is utilised to reduce human cognitive efforts by utilising algorithmic and technological models. Generative AI dependency is utilising Generative AI for outcomes which require cognitive efforts. Self-Efficacy is an individual's evaluation of their ability to accomplish tasks effectively. The following study, thus aims to examine the relationship between Generative AI and Self-Efficacy among young adult users of Generative AI. A quantitative correlational design was used to examine the relationship between Generative AI dependency and Self-Efficacy on the sample of young adults (n=191) which was analysed using Pearson's correlation. The correlation revealed a significant negative association between Generative AI dependency and Self-Efficacy indicating increase in Generative AI dependency will reduce Self-Efficacy. The findings of this study are likely to pave paths into the psychosocial implications of emerging technologies, precisely the influence of self-efficacy in technological interaction.

Keywords: Generative AI, Self-Efficacy, perceived competence, Cognitive Efforts, Correlation

INTRODUCTION

Generative Artificial Intelligence or GenAI is a type of Artificial Intelligence tool which generates novel outputs from pre-existing user data. It creates new content in the form of text, images, audio, and even multi-modal content. GenAI has been able to communicate with humans in over 80 languages and accomplish many tasks with human-like creativity and adaptability (He et al. 2025)

Over the years GenAI has been developed and evolved as a technological advancement which has been programmed to achieve tasks which may be categorised into the categories of (i) rule based systems that follow specific rules, set parameters and instructions, (ii) model based statistical algorithms which produce data based on statistical or graphical models, (iii) deep generative methodologies which utilize deep neural networks to learn content generation from data and (iv) foundational models which are trained on extensive data sets capable of performing diverse generative tasks (He et al., 2025)

The recurring fact is that GenAI technologies have been trained on the existing user data in order to generate, adapt and

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evaluate the existing datasets into novel and creative output which is in synchrony with the prompt or the type of GenAI model. Cognitive Augmentation of the data is the hallmark feature of GenAI which supports and enhances mental processes such as thinking, memory, problem solving by bridging the gap between human intelligence and machine capabilities (Minaee et al., 2024)

The widespread use of generative AI offers the possibility to transform economic development, social structures, and global competitiveness. Generative AI has nearly reached every corner of the globe, high user intensity is seen in middle income countries, but usage intensity remains high in high income countries (Liu & Wang, 2026)

Among young adults, GenAI tools have increasingly been used for academic purposes, learning, summarising literature, and essay writing. A review study by Bin-Nashwan et al. (2023) found that ChatGPT usage is positively shaped by time-saving features, e-word of mouth, academic self-efficacy, academic self-esteem, and perceived stress.

Generative AI dependency stands for increasing dependence on GenAI models for performing tasks that commonly require human effort, for example while communicating, creative thinking and decision making (Goh et al. 2025) This emerges through repeated interaction with GenAI systems which is seen through increasing reliance on GenAI, regular engagement and preferred AI support rather than autonomous effort.

From the view of Self-Determination Theory (SDT), dependency is explained by a spoilt sense of autonomy, competence and relatedness (Manninen et al. 2022) Dependency or increased reliance on GenAI systems increases the sense of competence with no or less scope for long-term skill development, reduces relatedness and also reduces help seeking behaviour from mentors and professional as the reliance is majorly on GenAI systems.

Self-Efficacy is a concept that defines a person's ability to accomplish a task efficiently and effectively. It involves believing and having faith in one's ability and skill set to achieve a task (Wadington, 2023). Bandura (1986) defined this concept as a person's judgement of their capabilities to achieve a course of tasks required to attain desired performance. According to Graham (2022) Self-Efficacy explains the extent to which people perform the tasks which helps them to keep up with demanding or worrying conditions.

Self-efficacy works on perception of self. It is defined as the perceived abilities or inabilities to accomplish a task. It's neither the actual potential of the individual nor the evaluation of their performance. Albert Bandura made contributions to this concept by emphasizing that the amount of energy and time we spend on certain behaviours we engage in, reveals the self-efficacy of an individual.

Based on social cognitive theory (1986) self-efficacy is a result of interaction between personal and environmental factors. The social

cognitive theory focuses on human agency in exerting control over their thought and behaviours. The human agency in return determines if a behaviour is initiated or not, the amount of effort put into it, the persistence in behaviour, etc.

A person's self-efficacy beliefs surface from different sources as defined by Bandura (1997) The four sources are namely: (i) mastery experience, (ii) vicarious learning (iii) verbal persuasion and (iv) Physiological and affective states.

These sources influence how individuals influence and interact with technology or GenAI systems. It determines whether GenAI functions as an aid or becomes a tool fostering dependency. Strong mastery experiences and supportive persuasion promote regulated, critical GenAI use, whereas limited mastery, observational overreliance/ lack of experience, negative emotional states, and external pressures may shift users toward passive dependence on technological systems.

The connection between self-efficacy and technology dependence can be understood as a balance between empowerment and over reliance. The stronger self-efficacy promotes adaptive technological use, whereas over-reliance may foster dependence on GenAI systems. Studies on technological adoption indicate that perceived competence predicts critical and adaptive use of technology, whereas less autonomous individuals may show excessive reliance on GenAI which weakens analytical engagement and cognitive effort (Compeau & Higgins, 1995).

Review of Literature:

Generative AI is emerging to become a prominent influence on education. It has been affecting common and traditional processes and outcomes of education. Koscieniak & Bielecki (2024) notes certain in-depth changes. Their study reveals that GenAI has gradually become useful due to its accessibility, trustworthiness, available provisions for cognitive offloading, and creativity in new generated outputs.

In a similar fashion, using generative AI in higher education is not only contingent upon personal traits (behavioral traits, personality, decision making patterns etc.) but also upon environmental, social or contextual factors. For example, a student preferring GenAI may use it because it prevents losses, saves time, and reduces efforts and risks of inaccuracy (Han, 2025). Therefore, the use of GenAI is contingent upon the perceived usability and advantages over human made effort.

In a study by Klingbel et al. (2024) certain downsides of over reliance on GenAI have been conveyed. Over reliance or over dependence on GenAI can cause algorithmic bias and related errors. The user may not be able to perceive truth, rather only assume what is being presented by the AI model based on its data set.

In another research, the causes for AI usage have been explained by transactional theory of stress. This theory states that stress is a result of interaction between person and environment,

where environment has the resources to cope with stress. According to Ouyang and Ayinde (2024) a negative attitude towards GenAI may contribute to a feeling of a lack of knowledge or resources in the environment, further conveying AI as a threat.

A framework of policy was made by Bukhar et al. (2024). The policy has been made through the viewpoint of Risk (threats of AI usage), Rewards (advantages of AI usage) and Resilience (Readiness to cope/overcome a challenge). The RRR framework forms a comprehensive web of Risks, Rewards and Resilience which helps in technological decision making and policy making, by making sure that multifaceted dimensions are considered before the final decision. In the realm of AI related policy making, this model provides information about the requirement for a strong regulatory system.

In a study by Ge et al. (2025) the role of GenAI has been viewed as a double-edged sword. It is called a double-edged sword because it is associated with increased decision-making difficulties, employment anxiety on one side, and increased career exploration behaviours and career management on the other.

The above-mentioned studies focus on Self-Efficacy and GenAI usage and dependency. The nature of the relationship is not in one directional, some studies suggest a strengthened relationship between GenAI usage and self-efficacy, some studies indicate a reciprocal relationship. A true trend for GenAI dependency and Self-Efficacy is still under-researched, specifically for young adults. The psychosocial impact of GenAI dependence is a growing branch of research world-wide as the technology is rapidly progressing. Moreover, a comparatively lesser number of research in this domain have been done in the Indian context.

The current study investigates Generative AI dependency and Self-Efficacy among young adults. This study is concerned with the effects emerging GenAI technologies have been putting on the Self and aspects of Self of an individual. As the study progresses, it examines the potential influence of GenAI and Self-Efficacy on young adults. Since the rapid integration of technology has somewhat affected how individuals approach their personal and professional development, this study supports uncovering the relationship between Self-Efficacy and GenAI dependency.

Research Question:

1. What are the levels of Generative AI dependence and Self-Efficacy among young adults?
2. What is the association between Generative AI dependence and Self-efficacy among young adults?

Hypotheses:

There will be a significant association between GenAI dependence and Self-Efficacy among young adult users of GenAI.

METHOD

Design of the Study:

The present study aims to determine the relationship between Generative AI and Self-Efficacy among young adult users of

Generative AI. Therefore, to achieve this primary goal, this study will follow a quantitative correlational design. For this purpose a correlational analysis will be performed. This will determine the relationship between the two variables, the strength and the direction of the relationship.

Sample:

The sample that is being catered by this study is derived from a population of young adults (18-29 years) who are currently students studying in higher education, or working professionals who have recently started their careers. This study will be employing a purposive sampling method to recruit participants based on the inclusion criteria.

The study is inclusive of young adult users of GenAI (males and females). The inclusion criteria for the participants is the age group of 18-25 years and active user of GenAI.

The participants will be recruited only based on their consent and their availability. The minimum sample size as determined by G* power analysis was 157 participants for a significance level of .05.

Tools:

GenerativeAI dependency scale:

For measuring the construct of GenAI dependency on individuals, an 11 item scale created by Goh, Hatanto & Majeed (2025) will be utilised. The GenerativeAI dependency scale measures dependency through three dimensions. (i) Negative consequence, (ii) Withdrawal and (iii) Cognitive preoccupation. It is a 5 point likert scale measure ranging from 5 (strongly agree) to 1 (strongly disagree). The scale demonstrates a test retest reliability of 0.87 and a convergent validity with measures of GenAI dependency and GenAI addiction scales.

General self-efficacy scale:

General self-efficacy scale is a 10 item scale which is designed to assess positive and optimistic self beliefs which assess life situations. It is a 4 point likert scale with options ranging from 1 (Not true at all) to 4 (exactly true). This scale was made by Matthias Jerusalem and Ralf Schwarzer in 1992. It has been validated for Indian context in 2017 by Waraich & Chechi. Reliability of the scale ranges from 0.76 to 0.90, whereas its negative correlates were anxiety and burnout.

Procedure:

The participants were approached with the request of participating in the study. After their consent, they were asked to share their demographic details and then answer the respective scale items honestly. The doubts and queries of the participants were cleared via email during the course of data collection.

After the collection, the data was coded and scored according to the prescribed scoring methods in the respective manuals of the scales. The obtained standard scores were then used for statistical analysis.

The statistical analysis was carried out using SPSS 17 and calculated the descriptive measures from the data and the correlational analysis.

Ethical considerations:

The study was conducted following the APA 17 guidelines. It followed the ethical considerations for the study such as non-maleficence, beneficence, respect for the participant and integrity. Prior to data collection, approval of the research committee was taken and informed consent of all the participants were taken. Informed consent of all the participants was taken. The purpose of the study and voluntary participation provisions were ensured to the participants. Confidentiality was maintained throughout the study. Integrity and responsibility were also maintained and hence all the sources used are duly cited in this work and is in sync with APA17 guidelines. No harm has been made to any person physically, emotionally, socially, and economically directly or indirectly during the course of their research.

RESULT

The obtained results are summarized in Table 1 and Table 2 indicating the descriptive statistical measures and obtained correlation. In Table 1 the obtained mean value on Generative AI dependency and self-efficacy is 30.9 and 2.39 respectively. In Table 2 the obtained correlation between Generative AI dependency and Self-Efficacy is -.367 which is significant at 0.01 level

Table 1: Mean and Standard deviation of GenAI dependency and Self-Efficacy

	Mean	Standard Deviation	Minimum	Maximum	N
Total Generative AI dependency	30.9	5.04	1	5	191
Total Self-efficacy	2.39	0.70	10	40	191

Table 2: Correlation between GenAI dependency and Self-Efficacy

		Total GenAI dependency	Total Self-efficacy
Total GenAI dependency	Pearson Correlation	--	
	N	191	
Total self-efficacy	Pearson Correlation	-.367**	--
	Sig(2-tailed)	.000	
	N	191	191

** . Correlation is significant at the 0.01 level (2-tailed).

Discussion:

The current study aimed to examine the relationship between GenAI dependency and Self-efficacy among young adults who are active users of Generative AI and are students or professionals who have recently started working. Grounded in social cognitive theory and self-determination theory, this study viewed the concept of self-efficacy as a product of GenAI dependency as with increasing integration of technology in our everyday lives, there was a possibility that this increasing integration will result in certain changes in aspects of self, therefore establishing a significant relation between them.

Accordingly, the study hypothesized about having a significant relationship between Generative AI Dependence and Self-Efficacy among young adult users of Generative AI.

The obtained result supported the hypothesis. Pearson's correlation analysis revealed a significant negative relationship between Self-Efficacy and GenAI dependency, $r = -.367$, $p < .001$ based on a sample of 191 participants. This indicates that higher levels of GenAI dependence were associated with lower levels of perceived self-efficacy. Although the size of correlation is of moderate magnitude, the significance marks a meaningful association between the two constructs.

The observed negative association can be interpreted through social cognitive theory which states that self-efficacy develops primarily through mastery experience or successful independent performance of tasks (Bandura 1997). GenAI while improving efficiency may reduce opportunities for active problem solving when used as a substitute rather than support reduced engagement in independent cognitive effort may weaken efficacy beliefs over time.

Similarly, vicarious experiences, or learning through observing others, also shape technology use patterns. Exposure to peers and professionals using GenAI tools may normalize reliance behaviours. Social learning indicates that observation of GenAI use increases adoption but also encourages imitation without critical engagement when strong efficacy beliefs are missing. (Schunk & DiBenedetto, 2020). In AI contexts, widespread visibility of generative AI use in education and workplaces may therefore accelerate dependence among individuals who doubt their own abilities.

Social persuasion like feedback from teachers, peers or institutions further influence reliance on GenAI. When GenAI is being encouraged to enhance productivity, it may increase its usage paired with skill development and efficacy, but if it is promoted as a tool superior to human intelligence, it may undermine efficacy and increase dependency.

The physiological and emotional states such as performance anxiety, perceived failure increases dependence as individuals prefer automated assistance to avoid perceived failure. Technology acceptance research predicts lower confidence and higher anxiety with high reliance on technological systems (Venkatesh et al, 2003)

The findings also align with cognitive offloading where individuals rely heavily on assistance and external technologies to perform mental processes, potentially diminishing long-term and internal skill development and confidence (Risko & Gilbert, 2016). Individuals with lower self-efficacy may turn to GenAI as to compensate mechanisms to manage perceived difficulty, therefore suggesting a reciprocal relationship.

The results are consistent with part of emerging research in the domain of GenAI and academic use. Bin-Nashwan et al. (2023) explained that heavy reliance on GenAI systems may shift students from active knowledge construction toward passive assistance seeking. It raises concerns about independent competence and autonomy. Similarly, Liu & Wang (2026) agreed that GenAI uses are varied according to the user's confidence, skills, perceived capabilities level.

The present study makes efforts to extend social cognitive theory in the emerging domain of human-technology interaction. The technology acceptance model by Venkatesh et al. (2003) may not account for dependence, but according to social cognitive theory, self-efficacy is playing a role in determining the technological interaction and a regulatory mechanism which determines whether GenAI operates as Cognitive Augmentation or a cognitive substitution in a person. This study thereby contributes to the motivational aspect of GenAI usage and perceived agency of GenAI use.

Limitations:

Certain methodological limitations are acknowledged, such as correlational design prevents causal inference between GenAI dependence and Self-Efficacy. The self-report measures may be influenced by social desirability. The cross-sectional study may not capture the developmental aspect or long-term psychological effects of GenAI usage. The presented study also caters to participants who understand and comprehend the English language, therefore it is not representative of the Indian population which communicates in regional languages.

Conclusion:

In conclusion, the study demonstrated a significant moderate negative relationship between generative AI dependency and self-efficacy. The findings suggest that while generative AI offers powerful cognitive assistance, increased reliance may be associated with reduced confidence in personal capabilities. Understanding this relationship is essential for fostering balanced and psychologically adaptive human-AI collaboration in increasingly technology-mediated environments.

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Well-being for all: bridging the gaps with a Positive Community Psychology framework

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Contemporary societies are marked by a deepening paradox: material prosperity and technological advancement coexist with rising anxiety, social fragmentation, alienation, and psychological distress. Psychology, despite possessing the conceptual tools to address these challenges, has remained largely confined to clinical and institutional settings, thereby failing the vast majority who need it most. This paper argues for a positive community psychology framework as a transformative response to this crisis. Drawing on the convergence of community psychology's commitments to empowerment, social justice, and participation with positive psychology's emphasis on strengths, flourishing, and prevention, the paper charts a vision of democratised psychological services grounded in the principle that well-being is an inalienable human right. Central to this vision is the concept of mattering—being valued and contributing value—as a moral and practical foundation for collective well-being. The paper situates this framework within Indian philosophical traditions that foreground the primacy of community over individual, and calls for the reimagination of psychological education, outreach, and advocacy. It concludes with an appeal, both scholarly and personal, for psychologists to move beyond their insulated settings and engage as active, empathic agents of social transformation—in the spirit of Sarve Bhavantu Sukhinah.

Keywords: positive community psychology, well-being, mattering, community counselling, social justice, Indian psychology, positive schooling

INTRODUCTION

The Paradox of Prosperity and Distress:

We are living in an era of contradictions. Despite material prosperity—measured in terms of GDP, GNP, and per capita income—and the ease brought by technological advancement, human life today is increasingly marked by anxiety, stress, alienation, and violence. Health, happiness, and well-being are often under threat. While life has become more convenient on many levels, it has also grown more complex and emotionally fragile. We miss meaning, purpose, and mattering in life. We miss engagement and involvement in our work and relationships. People have become hypersensitive; their egos bruise easily—resulting in street brawls, impulsive aggression, withdrawal, or even suicide. According to the WHO (2017), depression affects over 322 million people globally, a figure that signals not only individual suffering but a larger societal malaise.

In such a context, psychology has much to offer, yet psychologists often appear detached. They may possess the knowledge and tools to support well-being, but they are not always present where people need them most. Too often, they remain in insulated settings, waiting for people in distress to seek them out—while those same people, overwhelmed by life's burdens, may never cross the threshold of seeking help.

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We remain indifferent, as though people in pain do not matter. And where is the human resource to address the needs of millions? Preventive and developmental efforts at systemic levels are the first key to addressing this global demand.

Health, happiness, and well-being are not luxuries—they are inalienable human rights. Yet access to them remains profoundly unequal. True well-being requires more than clinical intervention; it calls for justice, opportunity, and the deep human experience of *matter*ing—being valued by society and empowered to contribute in return. In India, mental health has increasingly become the preserve of the privileged, reinforcing a quiet but persistent divide.

Conceptual Framework: Being Well, Feeling Well, Doing Well

Well-being is about being well, feeling well, and doing well (Sen, 2009; Fredrickson, 2013; Rai, in Press). This tripartite view of well-being assimilates both the objective and subjective components, and asserts that doing good ultimately leads to feeling good. Being good calls for justice and equity. As Sen (2009) reminds us, people can often adapt to deprivation to make life bearable, without making that deprivation go away. The resigned acceptance of a subjugated role—without complaint or disquiet—deserves critical attention, not passive tolerance. As psychologists, we may not have the capacity to change the world around people by ourselves; but as community psychologists, we can advocate for their well-being, and become their voice. When deprived and marginalised sections of the population lack the strength to articulate their pain, by becoming their voice we apply a balm on their wounds. For this role, we must first empathise with the pain caused by what Sen (2009) calls 'clearly remediable injustices'. Gandhi and Martin Luther King rose—and led millions to rise—when they identified with the redressable injustice meted out to hapless, disadvantaged people.

A Personal and Scholarly Journey:

Science and scientists are products of what Bronfenbrenner (1979) calls their ecosystem. Their ideas, thoughts, and theories echo the socio-cultural ethos, or may represent a revolt against the existing state of affairs. So it has been for the present author. When I entered undergraduate study over five decades ago, the field was deeply submerged in a Watsonian outlook. Yet guidance and counselling caught my imagination, in the hope that I might become capable of delivering paths to well-being. I soon confronted two sobering realities: the limitations of the counselling process itself, and the mismatch between demand and available resources.

As community psychology emerged with the idea of prevention, I became a life member of the Community Psychology

Association of India, and began taking psychology beyond the classroom—talking about stress management, speaking with students and friends. Then, two decades later, Positive Psychology seized my thinking, especially in the years following my formal retirement from a teaching career of 41 years.

Midway through that career, I was confronted by the strikingly poor linguistic, numerical, and reasoning capacities of students from very backward rural areas. To teach them statistical methods, I had first to teach elementary arithmetic. But I recognised that reaching the root cause of academic backwardness and missing mental health required institutional commitment beyond the classroom. This led me to establish The Creative Vision Society For Education, Welfare and Research, Ghazipur, and its institution New Horizon Academy—a school in whose veins the idea of psychology ran from its founding. We persisted with what we labelled the ALPA model: *Active Listening with Positive Attitude*—emphasising the creation of opportunities for children to share their emotional crises with teachers, and fostering a positive orientation toward life and the world.

Beyond Status Quoism: Towards Positive Community Psychology:

The predominantly 'status quoist' approach of psychology (Prilleltensky, 1989) is a discouraging posture when the task is to reconceive the ecosystem. When we call for cultivating positivity despite adverse conditions created by politico-socio-economic forces, it rings hollow to place all responsibility on individual shoulders, thereby absolving exogenous forces of their basic accountabilities. Positive psychology, understood as 'the scientific study of what makes life most worth living' (Peterson, 2008), and as a science dedicated to building the factors that allow individuals, communities, and societies to flourish (Seligman & Csikszentmihalyi, 2000), opens a horizon of hope. Further, as positive psychology develops as a science of positive prevention and positive therapy (Seligman, 2002), it becomes a natural ally of community psychology—making a compelling case for *positive community psychology*.

The idea of positive community psychology was first systematically articulated by Neto and Marujo (2014), whose pioneering formulation opened the conceptual space within which the present advocacy is situated. The present author has been arguing for this confluence for some time, while recognising that the moment for such a synthesis had to await the fuller maturation of positive psychology itself (Rai, 2025C). Such an alignment 'opens up huge windows of possibility to enhance individual and collective lives'

(Neto & Marujo, 2014). It is worth noting, however, that a systematic scoping review of community-level positive psychology interventions has confirmed that most such programmes continue to target individual-level outcomes even when delivered in community settings, with contextual factors such as social conditions, values, and fairness rarely addressed (Montiel et al., 2021)—underscoring precisely why a genuine positive community psychology must go further.

This approach leads to the pathway of 'Creating the World We Want to Live In' (Grenville-Cleave et al., 2021). Together, individuals, communities, organisations, and governments can create what Grenville-Cleave and her colleagues envision as the 'ecosystem of a life lived well'—across childhood, adolescence, adulthood, and aging; across family, school, work, society, and environment. Together we can lay the foundations for everyday living and create a future for generations to come.

Mattering, Democratisation, and the Community Counselling Model:

Community psychology has long emphasised empowerment, participation, and social justice. Positive psychology complements this by building the strengths of individuals and groups, and by emphasising development, prevention, and therapy (Seligman, 2002). The conceptual landscape of community well-being—its domains, levels, and perspectives—has been elaborated more fully elsewhere (Rai, in Press). The community counselling model emphasises strategies for facilitating the development of people and communities through: (a) outreach programmes; (b) client advocacy; (c) developmental and preventive interventions; and (d) social and political advocacy (Rai, 2025A).

Positive-community counselling is a confluence of perspectives and strategies that align well with Indian psychological tradition, which emphasises the primacy of community well-being over individual well-being. Well-being is an inalienable right of all individuals; it demands the democratisation of psychological services, and calls for our participation as informed and empowered citizens. Future master's programmes should envision community participation as central to student training. Such participation can help people feel valued, add value to psychologists' own existence, and generate a sense of meaning, importance, and satisfaction in knowing that one's actions make a difference in somebody's life (APA, 2012; Brown & Brown, 2015).

Mattering is crucial for justice and community well-being (Grenville-Cleave et al., 2021). The availability of relational goods—

non-instrumental interpersonal connections—and the design of shared public spaces are among the material conditions through which community well-being and collective happiness are actually realised (Marujo, Neto & Casais, 2020). When people do not matter, individually and collectively, fatal consequences ensue. Feeling valued and adding value together create a mattering wheel—a virtuous cycle (Prilleltensky & Prilleltensky, 2021). The well-being of all, and my/our contribution towards that well-being, must matter to each of us.

Let us hope that a new psychology will rise—one that goes beyond understanding and theorising, and devises strategies to motivate engagement in delivering psychological services at people's doorsteps through outreach programmes, bridging the divide that currently restricts such services to an elite few. Within this approach, educating children, parents, and teachers in the psychology of well-being, and embedding positive education and positive schooling within the culture of schools and colleges (Rai, 2025; Seligman & Adler, 2019), makes sense for the positive development of strengths and the prevention of various maladies. Let us enter into action mode for *Sarve Bhavantu Sukhinah*, *Sarve Santu Nirāmayah*—may all be happy; may all be free from illness.

Cultural Roots and the 'We' Culture:

Looking at ourselves, our academic peers, our families, and the larger society in a segregated manner lies at the root of numerous maladies. The Western and materialist view—which, unfortunately, has captured the Indian mindset despite running contrary to our cultural ethos—generates a bystander's attitude and makes us behave as if no one else matters. A 'me/only me' culture has replaced the 'we culture'. While the 'we culture' may be taxing on our time, energy, and resources, we are paying a very heavy price for its rejection: in times of crisis, no one comes to help or support us.

In reality, we are all woven together in life, even when we fail to notice our interdependence. We can reimagine psychology texts in such a way that they are rooted in our cultural values and virtues, promoting a sense of mattering. The outlook of life may be hazy, but Positive Community Psychology offers the hope to bridge the gaps—to reach out to those who need us most. In an era of mental health crises, psychology and psychologists matter more than many other social scientists. We may well be the last hope for the well-being of the most disadvantaged.

Conclusion:

This paper has argued for a positive community psychology framework as a principled and urgent response to the widening gap

between psychological knowledge and its reach. The convergence of positive psychology's emphasis on flourishing with community psychology's commitments to equity, empowerment, and social justice creates a powerful platform for transformative action. Central to this framework is the concept of *mattering*—the experience of being valued and of contributing to the lives of others—which must animate both the design of psychological services and the training of future psychologists.

Several practical implications follow. First, master's and doctoral programmes in psychology should incorporate structured community engagement and outreach as non-negotiable components of training. Second, positive schooling—embedding psychological well-being education within school culture—represents one of the most cost-effective preventive investments available (Rai, 2025B; Seligman & Adler, 2019). Third, psychologists must move from advocacy in principle to advocacy in practice: becoming the voice of those who cannot voice their own pain. Fourth, the democratisation of psychological services requires the dismantling of structural barriers that reserve professional support for the privileged.

The Indian tradition has always held that the well-being of the individual is inseparable from the well-being of the community—*Sarve Bhavantu Sukhinah*. Positive community psychology, grounded in this wisdom and enriched by contemporary science, offers not merely an academic framework but a call to moral engagement. The time to act is now.

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Resilience, emotional competence and coping Strategies: systematic review

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This systematic review investigates the relationships among resilience, emotional competence, and coping strategies in young adults, in order to understand how these psychological variables jointly influence mental health, adjustment, and well-being. A structured review methodology was adopted in which peer-reviewed empirical studies were systematically analyzed based on relevance to the target variables and population, with focus on quantitative and correlational research designs. The findings indicate that emotional competence is positively associated with adaptive coping strategies, which in turn predict higher resilience, better stress management, strengthen academic functioning, and enhanced psychological well-being. On the other hand maladaptive coping is consistently associated with distress, anxiety, and reduced adjustment. Overall, these results reveal that resilience, emotional competence, and coping strategies function as an interrelated psychological system that supports successful adaptation during young adulthood. The review highlights the practical significance of these findings for educational and mental-health interventions, highlighting that programs designed to enhance emotional regulation and adaptive coping may constructively strengthen resilience and elevate overall well-being, while also underscoring the need for longitudinal and intervention-based research to clarify causal links and developmental influences.

Keywords: Resilience, Emotional Competence, Coping Strategies, NCC Students, Emotional Regulation, NCC Students, Comparative study, Well-being

INTRODUCTION

Resilience refers as an ability to adapt positively in the face of stress, adversity, or challenging life situations of an individual. In the context of college students, resilience becomes particularly crucial because this stage of life involves academics pressure, uncertainty regarding career, social changes, and emotional challenges. Different theoretical models explain resilience. The trait perspective views resilience as a stable personality characteristic, whereas the process oriented model considers it as a dynamic process that develops through interaction with the environment. The ecological model expands this idea by highlighting the role of social support systems such as family, peers, and institutions.

Emotional competence is another important psychological construct. It refers to the ability to comprehend, express, and regulate emotions effectively. Models of emotional competence include Emotional Intelligence Model by Goleman's, which emphasizes on self-awareness, self regulation, motivation, empathy, and social skills, and Mayer and Salovey's Ability Model, which focuses on perceiving, understanding, managing, and using emotions. Emotional competence helps students managing their stress and maintains psychological well-being.

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Coping strategies refer to the cognitive and behavioral techniques used to deal with stressful situations. These are mainly categorized into problem-focused coping (dealing directly with the problem), emotion-focused coping (managing emotional responses), and avoidance coping (escaping from the problem). For college students, effective coping strategies play an important role in maintaining mental well-being and academic success.

The reviewed studies clearly reveal that these three constructs are closely interconnected among college students. Emotional competence provides students a clear understanding of their emotional experiences and also helps them to regulate it effectively, which directly influences the type of coping strategies they use. Students with high emotional competence are preferably to use adaptive coping mechanisms, such as problem-solving and seeking help, rather than maladaptive mechanisms like avoidance.

Resilience acts as a shield that strengthens the bond between emotional competence and coping. For example, studies indicate that students with, stronger resilience tend to have higher emotional intelligence, which in turn helps them deal with stress more effectively. Similarly, coping strategies also influence resilience. Adaptive coping strategies such as planning and positive reframing strengthen resilience, whereas maladaptive strategies weaken it.

Research on college populations (e.g., Al Omari et al., 2023; Freire et al., 2020; Zhang et al., 2020; Lee & Kim, 2022) shows that resilience often acts as a mediator between emotional competence and psychological outcomes such as stress, academic motivation, and well-being.

Overall, the relationship among these three variables is reciprocal and dynamic.

METHOD

Design of Study:

This systematic review was conducted to explore existing research on resilience, emotional competence, and coping strategies among university students, with the aim of understanding the relationships of these constructs and impact on students' mental well-being and academic adjustment.

The review followed a structured approach in identifying, selecting, and analyzing relevant studies. The reporting of this review was guided by the PRISMA (Preferred Reporting Items for Systematic Reviews and Meta-Analyses) framework to ensure clarity and transparency in the selection and presentation of studies. Only relevant empirical studies focusing on the key constructs were included to provide a well-organized synthesis of existing literature.

Search Strategies:

The studies in this review were identified through academic databases such as Google Scholar, PubMed, and ResearchGate, Scopus, PsycINFO. Keywords used included resilience, emotional competence, emotional intelligence, coping strategies, and university students. Relevant peerreviewed articles were considered.

Eligibility Criteria (PICO Framework):

- Population (P): Young adults and adolescents
- Intervention/Exposure (I): Emotional competence, resilience, coping strategies
- Comparison (C): Students with varying levels of these variables
- Outcome (O): Mental health, stress management, academic performance, well-being

Inclusion Criteria:

- Studies focusing on young adults and adolescents
- Research examining resilience, emotional competence, or coping strategies
- Empirical and peer-reviewed studies
- Studies published in English

Study Selection Process:

The study selection process influenced by the four stages PRISMA flow: identification; screening, eligibility, and inclusion. Titles and abstracts of the records were individually reviewed against the criteria of inclusion and exclusion. Studies that seem to meet the criteria at the abstract stage were retrieved for detailed assessment in full text.

Quality Assessment:

The quality of the studies was thoroughly investigated to make sure the credibility and reliability of the findings. The present analysis included only empirical and peer-reviewed studies. A structured quality assessment approach was used based on standard methodological criteria. Each of 34 studies was evaluated on the parameters including study design, sample characteristics, sampling technique, measurement tools, data collection procedure, and statistical analysis.

Special attention was given to the use of standardized and validated instruments for measuring all three constructs: emotional competence, resilience, and coping strategies. Studies using well – established psychological scales with reliability and higher validity

Based on the overall analysis , the quality of the studies were categorized as moderate to high, indicating that the findings of the analysis are based on reasonable and reliable evidence.

RESULTS

Emotional competence, often conceptualized as emotional intelligence, has been often identified as a critical component influencing how individuals manage stress and adopt coping strategies. A number of studies have highlighted its significant role in promoting adaptive coping behaviors among students and professionals.

For instance, Abdelrahman et al. (2025) found that emotional intelligence positively predicts academic resilience while reducing perceived stress. Similarly, Zhang et al. (2020) reported that students with higher resilience are more likely to adopt positive coping strategies. GonzálezYubero et al. (2025) further demonstrated that resilient coping acts as a mediator between emotional intelligence and academic motivation. Supporting this, Enns et al. (2018) observed that emotional intelligence is associated with lower stress levels and better coping, with coping strategies partially mediating this relationship. Studies by Jawabreh (2024) and Soni et al. (2023) in high-pressure environments such as healthcare also confirmed that individuals with higher emotional intelligence tend to use more adaptive coping strategies and experience reduced stress. Additionally, Noorbakhsh et al. (2010) found that emotionally intelligent individuals are more inclined toward problem-focused coping, while De and Chatterjee (2024) emphasized the role of emotional competence in enhancing mental health and psychological well-being.

Overall, these studies consistently demonstrate that emotional competence plays a vital role in promoting adaptive coping strategies and reducing psychological distress.

The relationship between resilience and emotional intelligence has been widely explored in the literature, with both constructs emerging as essential contributors to psychological well-being and life satisfaction. These studies collectively emphasize the synergistic role of these variables in enhancing individuals' ability to cope with stress and maintain positive mental health.

Al Omari et al. (2023) identified several predictors of resilience, including stress levels, sleep quality, and academic performance. Balci and Timur (2023) found that higher resilience is associated with lower perceptions of career barriers. Klutsey and Mahama (2025) demonstrated that resilience mediates the relationship between meaning in life and subjective happiness. Similarly, Kumar and Varma (2021) reported a positive association between emotional intelligence and resilience, with notable gender differences.

Nagpal and Dutt (2022) further confirmed that both emotional intelligence and resilience significantly predict psychological well-being. Lv et al. (2024) extended these findings by showing that these constructs mediate the relationship between personal values and life satisfaction. Additional support comes from Valverde-Janer et al. (2023), who found a strong positive link between emotional intelligence and resilience, and Ong et al. (2006), who highlighted the role of resilience and positive emotions in successful stress adaptation. Mérida-López et al. (2022) also emphasized that emotional intelligence contributes significantly to subjective happiness, while Li et al. (2024) demonstrated the mediating role of resilience in emotional and social outcomes.

Taken together, these studies suggest that resilience and emotional intelligence are closely interconnected and jointly contribute to enhanced psychological well-being, life satisfaction, and effective stress adaptation.

Coping strategies play a crucial role in determining individuals' resilience and their ability to handle stress effectively. The literature indicates that the type of coping strategy adopted can either strengthen or weaken resilience.

Freire et al. (2020) identified that student who uses a combination of adaptive coping strategies exhibit higher self-efficacy and better adjustment. Ma et al. (2023) found that employing multiple coping strategies, such as social support and physical activity, is associated with improved well-being. Similarly, Nebhinani et al. (2020) reported that adaptive coping strategies are linked to better stress management among nursing students. Sivadasan and Bhuyan (2025) highlighted that problem-focused and emotion-focused coping strategies positively influence emotional resilience, whereas maladaptive coping has a negative impact. Sodhi et al. (2020) also found that students with higher resilience tend to use more effective coping strategies and experience lower stress levels. Zhang et al. (2020) further supported the positive relationship between resilience and adaptive coping.

Overall, these studies indicate that adaptive coping strategies significantly enhance resilience, while maladaptive coping strategies undermine it.

Emotional regulation has emerged as a fundamental factor influencing mental health outcomes, particularly in relation to stress, anxiety, and depression. The ability to effectively manage emotions determines how individuals respond to challenging situations.

Brindle et al. (2015) found that difficulties in emotional regulation increase susceptibility to anxiety and depression,

particularly among individuals with high sensory sensitivity. Vucenovic et al. (2023) further demonstrated that poor emotional regulation and avoidance coping are strong predictors of depressive symptoms, while adaptive coping strategies are associated with lower levels of depression. Additionally, De and Chatterjee (2024) highlighted that higher emotional competence is linked to better mental health and psychological well-being.

Collectively, these findings suggest that effective emotional regulation is essential for maintaining mental health and preventing psychological distress. Coping strategies are not uniform and tend to vary depending on individual characteristics, environmental factors, and the nature of stressors. Several studies have examined how coping behaviors differ across contexts and populations. Jain and Chaudhary (2023) found that many students rely on avoidant coping strategies when experiencing high stress. Yahiya (2022) reported gender differences, with females more likely to use emotion-focused coping and males preferring problem-focused approaches. Shekhawat et al. (2023) observed higher stress levels among coaching students, who also showed a tendency toward avoidance coping. López-Ramos et al. (2021) highlighted that students with prior mental health issues are more likely to use maladaptive coping strategies during crises such as the COVID-19 pandemic. Similarly, Almomani et al. (2021) reported that students used a mix of coping strategies, including both adaptive and emotion-focused methods, during quarantine.

Hatunoglu (2020) emphasized the role of social support and positive coping, while Johnsen et al. (1998) found that avoidance coping is associated with poorer mental health outcomes.

These studies collectively indicate that coping strategies vary across contexts, but maladaptive coping, particularly avoidance, is consistently linked to negative psychological outcomes.

Beyond coping and resilience, emotional intelligence also plays a significant role in broader psychological and behavioral functioning. It contributes to personal development, social interactions, and performance outcomes.

Pradhan et al. (2016) found that emotional intelligence enhances the relationship between psychological capital and positive workplace behaviors. Şahin et al. (2016) demonstrated that emotional traits significantly influence creativity, particularly in non-academic domains. Wan et al. (2023) highlighted that supportive relationships, such as teacher–student interactions, contribute to the development of emotional intelligence.

Overall, these studies suggest that emotional intelligence extends beyond stress management and contributes to overall psychological functioning, creativity, and social development.

Discussion:

The present systematic review aimed to explore the interrelationship between emotional competence, resilience, and coping strategies, with a particular focus on their combined role in shaping psychological well-being. In contemporary contexts, where individuals—especially students and young adults—face increasing academic, social, and emotional pressures, understanding these constructs becomes highly relevant. This review was therefore undertaken to synthesize existing research and identify consistent patterns that explain how individuals manage stress and maintain mental health.

A systematic approach was followed to identify and review relevant empirical studies. The selected studies were analyzed thematically to capture broader patterns rather than focusing on isolated findings. The results revealed several interconnected themes, including the role of emotional competence in coping, the association between resilience and well-being, the predictive role of coping strategies, the importance of emotional regulation, and contextual variations in stress responses.

The findings clearly demonstrate that emotional competence serves as a foundational mechanism influencing how individuals perceive and respond to stress. Across studies, individuals with higher emotional intelligence consistently showed a greater tendency to adopt adaptive coping strategies such as problem-focused coping, positive reframing, and seeking social support. These strategies were associated with reduced perceived stress and better psychological outcomes. Additionally, emotional competence was directly linked to improved mental health and lower levels of psychological distress, indicating its protective function. Importantly, this relationship was not limited to academic settings but was also evident in high-pressure environments such as healthcare, suggesting that emotional competence has broad applicability across different life contexts.

The review further highlights a strong and consistent relationship between emotional competence and resilience. Emotional intelligence was found to significantly contribute to the development of resilience, which in turn enhances an individual's ability to adapt to adversity and recover from stress. Several studies indicated that resilience acts as a mediating factor between emotional competence and outcomes such as life satisfaction, subjective happiness, and academic motivation. This suggests that emotional

competence not only directly impacts well-being but also strengthens resilience, which further supports long-term psychological adjustment.

Moreover, positive emotional experiences were found to reinforce this relationship by facilitating effective stress adaptation and emotional recovery.

Coping strategies emerged as a crucial link connecting emotional competence and resilience. The findings show that individuals who engage in adaptive coping strategies tend to exhibit higher levels of resilience and better overall adjustment. Strategies such as active problem-solving, emotional regulation and seeking support contribute to enhanced self-efficacy and emotional stability. In contrast, maladaptive coping strategies, including avoidance and denial, were consistently associated with lower resilience, higher stress levels, and poorer mental health outcomes. These findings emphasize that resilience is not merely an inherent trait but is significantly shaped by the way individuals cope with stress. Thus, coping strategies act as both a pathway and a mechanism through which emotional competence influences resilience.

Another important aspect highlighted in the review is the role of emotional regulation in determining mental health outcomes. Individuals who experience difficulties in regulating their emotions are more vulnerable to anxiety, depression, and psychological distress. On the other hand, effective emotional regulation enables individuals to manage negative emotions, maintain psychological balance, and respond constructively to challenges. This reinforces the idea that emotional competence involves not only the understanding of emotions but also their effective management, which is essential for maintaining mental well-being.

The review also identifies variations in coping strategies based on contextual and individual differences. Factors such as gender, environmental stressors, and prior mental health conditions influence the type of coping strategies individuals adopt. For instance, some individuals tend to rely on avoidance coping in high-stress situations, while others prefer problem-focused or emotion-focused strategies. Situational contexts, such as academic pressure or crisis conditions like the COVID-19 pandemic, further shape coping behaviors. Notably, maladaptive coping strategies were consistently linked to negative outcomes, regardless of context, highlighting the importance of promoting adaptive coping mechanisms.

In addition to its role in stress and coping, emotional competence was found to contribute to broader aspects of psychological functioning. It enhances interpersonal relationships,

supports creativity, and improves overall behavioral outcomes. These findings suggest that emotional intelligence is a multifaceted construct that influences not only mental health but also personal and social development.

Overall, the results of this review provide a comprehensive and integrated understanding of how emotional competence, resilience, and coping strategies interact. Emotional competence facilitates the use of adaptive coping strategies, which in turn strengthen resilience and promote psychological well-being. At the same time, resilience acts as a buffer against stress and enhances individuals' ability to maintain emotional stability. The interplay of these factors highlights a dynamic process in which emotional, cognitive, and behavioral components work together to influence mental health outcomes.

In conclusion, this systematic review underscores that psychological well-being is shaped by a complex interaction of emotional competence, resilience, and coping strategies. Strengthening emotional skills and encouraging adaptive coping mechanisms can significantly enhance resilience and reduce vulnerability to stress. These findings have important implications for educational settings, mental health interventions, and policy development, as they emphasize the need to focus on emotional skill development and resilience-building programs. By fostering these competencies, individuals can be better equipped to handle stress and maintain overall psychological well-being in an increasingly demanding world.

Conclusion:

The present systematic review brings together existing evidence to offer a coherent understanding of how emotional competence, resilience, and coping strategies collectively shape psychological well-being. The findings suggest that emotional competence is not merely an isolated personal attribute but a foundational capacity that enables individuals to recognize, interpret, and regulate their emotional experiences effectively. This ability, in turn, influences the selection and use of coping strategies in response to stress.

The review further indicates that individuals who demonstrate higher emotional competence are more inclined to adopt adaptive coping strategies, such as problem-solving, cognitive reframing, and seeking social support. These strategies play a crucial role in reducing psychological distress and fostering a sense of control in challenging situations. Over time, the consistent use of such adaptive responses contributes to the development of resilience, allowing

individuals to recover from adversity and maintain emotional stability.

At the same time, the findings underscore that maladaptive coping strategies, particularly avoidance and denial, tend to weaken resilience and increase vulnerability to stress-related difficulties. Therefore, resilience emerges not as a fixed trait but as a dynamic process shaped by emotional and behavioral responses to life experiences.

In essence, the review highlights that emotional competence, coping strategies, and resilience operate in a closely interconnected manner. Strengthening one aspect positively influences the others, ultimately contributing to improved psychological well-being. This integrated perspective is essential for understanding mental health in a more holistic and meaningful way.

Implication:

The findings of this review carry significant implications for theory, practice, and policy. From a theoretical standpoint, the review advances a more integrated understanding of psychological functioning by demonstrating how emotional competence, coping, and resilience interact as part of a unified process. This perspective encourages future research to move beyond examining these constructs in isolation and instead consider their combined influence on mental health outcomes.

In practical terms, the results emphasize the importance of developing interventions that focus on emotional skill-building and adaptive coping. Educational settings, in particular, provide an important platform for fostering these competencies among students. Programs that promote emotional awareness, stress management, and resilience-building can help individuals navigate academic and personal challenges more effectively. Similarly, in professional environments—especially those characterized by high levels of stress—training initiatives that enhance emotional competence can contribute to both individual well-being and organizational effectiveness.

From a policy perspective, the review highlights the need for a preventive and strength-based approach to mental health. Rather than focusing solely on the treatment of psychological problems, there is a growing need to promote emotional and psychological resources that enable individuals to cope with stress proactively. Policies that support mental health education, emotional literacy, and resilience training can play a crucial role in addressing the broader challenges of mental well-being.

Limitation:

While the review provides meaningful insights, certain limitations should be considered when interpreting the findings. One key limitation is the relatively limited scope of included studies, which may affect the generalizability of the conclusions. Many of the studies focused on specific populations, such as students or healthcare professionals, and therefore may not fully capture experiences across diverse groups.

Additionally, variations in research methodologies, sample characteristics, and measurement tools across studies may introduce inconsistencies. Different instruments used to assess emotional competence, resilience, and coping strategies may lead to variations in how these constructs are defined and interpreted.

Another limitation lies in the predominance of cross-sectional research designs within the reviewed studies. Such designs provide valuable insights into relationships between variables but do not allow for conclusions regarding causality or long-term developmental processes.

Longitudinal approaches would offer a deeper understanding of how these constructs evolve over time.

Finally, the influence of cultural and contextual factors has not been extensively addressed within the review. Emotional expression, coping styles, and resilience may vary significantly across cultural settings, and this dimension warrants further exploration in future research.

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Understanding the self through photo manipulation and body image: A systematic review

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The increased usage of image-centric social media sites has further made a rise in the appearance-related issues among young adults (18-25), resulting in the prevalence of photo manipulation and editing practices. This systematic review will highlight the impact of photo editing practices such as filters, retouching, and selfies on body image outcomes. The review was conducted using the multiple screening methods of a systematic review. For this review, databases such as PsycINFO, PubMed, Scopus, and Google Scholar were searched for research articles within the last ten years. The articles were selected based on certain criteria for inclusion and exclusion. A total of 105 research articles were found from the databases, from which the 30 most relevant studies were screened for the final review process.

The findings indicate that there is a consistent and strong relationship between photo manipulation and body image outcomes such as body dissatisfaction, increased body surveillance, and decreased body appreciation. The underlying psychological constructs of upward social comparison and self-objectification are critical in understanding these links. Other constructs that moderate these relationships are gender, self-esteem, and photo engagement. There is also evidence that suggests that actively engaging in photo editing of one's own images may result in a gap between the actual self and the ideal self, creating a cycle of dissatisfaction. This review aims to bring together important theoretical frameworks to develop a conceptual model on the relationships between online self-presentation and psychological outcomes. The results underscore the importance of designing interventions to address digital literacy, self-view, stress and resilience to appearance-related pressure in the social media setting. Aligning with the vision of India at 2047, the study emphasizes the need to understand emerging psychological challenges in digital environments to support youth well-being and holistic development.

Keywords: Photo Manipulation, Body Image, Social Media, Body dissatisfaction, young adults

INTRODUCTION

With the emergence and rapid growth of social media, there has been a revolution in identity construction. Images have become the primary means of communication, particularly among younger individuals. When constructing an online identity through images, individuals feel pressured to portray their 'best self.' The emphasis is predominantly placed on physical attributes, creating new avenues for the propagation of body image issues. Body image refers to the way in which individuals perceive their bodies, whether it be actual

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or ideal. It encompasses cognition, attitudes, and emotional experience. There is widespread consensus that there are severe psychological implications that stem from negative body image, particularly when this leads to body dissatisfaction.

Research into the effects of social media on body image has so far focused largely on static images of idealised bodily appearance and how they affect the way females perceive their own bodies following mere exposure to such images (Tiggemann & Slater, 2014; Fardouly et al. 2015). Recently, however, studies have begun to scrutinise more interactive engagement and the tendency for females to manipulate their images to produce a more 'idealised' version of themselves before uploading online. While initial studies into body image and social media centred around passive consumption of appearance-related content and the resultant high levels of body dissatisfaction caused by comparison on social media sites (Holland & Tiggemann, 2016; Saiphoo & Vahedi, 2019), this newer wave of research is seeking to explore how active engagement, such as photo manipulation, can result in the main cause of body dissatisfaction for females. Photo manipulation refers to deliberate changes to appearance through tools such as filters and other image editing applications to modify general appearance of the body.

Existing research has shown that these practices could be playing an important part in influencing body image. Research by authors such as Lonergan et al. (2019) and Butkowski et al. (2019) has shown that people with a tendency of editing photos have high body dissatisfaction. In the same way, according to research conducted by Kleemans et al. (2018), edited photos make people less satisfied about their bodies than unedited photos. Conceptually, it can be said that the effects mentioned above could be accounted for using the theory of Social Comparison (Festinger, 1954), where people judge and compare themselves based on other people, and the Self-Objectification theory (Fredrickson & Roberts, 1997), where people adopt the perspective of observers about their physicality. In the social media environment, both of these processes are intensified by unrealistic standards of idealized beauty and editing of pictures.

The observed effects can be explained by two psychological theories, the Social Comparison Theory (Festinger, 1954) and the Self-Objectification Theory (Fredrickson & Roberts, 1997). According to these theories, people evaluate themselves in comparison to others and internalize an observer's perspective of their own bodies. Both processes are intensified through social media, especially when people interact with highly edited and

idealized images. Current research indicates that these factors are not isolated and operate within a larger psychological framework. Just as relational environments can shape the emotional developmental opportunities afforded to individuals in other domains, similarly, digital environments serve as social contexts that shape the opportunities afforded to individuals for healthy self-perception and identity formation. As such, it is also important to examine photo manipulation within the context of a larger socio-psychological system.

Edited images are one of the most prevalent forms of media encountered daily by young adults. Despite an explosion of recent studies on media effects, the majority of findings are disassociated from one another. Few meta-analyses or systematic reviews have addressed photo manipulation specifically concerning young adults' body image concerns. Thus, the present systematic review will identify and synthesize general findings on the relationship between photo manipulation and the body image concerns of young adults, as well as address potential psychological mechanisms and moderators.

Objectives :

1. To systematically relate existing empirical evidences examining the relationship between Photo Manipulation and Body Image among young adults.
2. To recognize the patterns, associations, perceived effects, and underlying mechanisms through which photo manipulation influences young adults' body image concerns.
3. To underline the gaps and unexplored areas within the existing literature to inform future research directions and intervention frameworks.

METHOD

Design of Study:

In this review, a multiple systematic screening approach was applied to make sure the study has a structured process of selection and screening

Search Strategy:

The following databases were searched systematically using the following keywords:

- PsycINFO
- PubMed
- Scopus
- Google Scholar

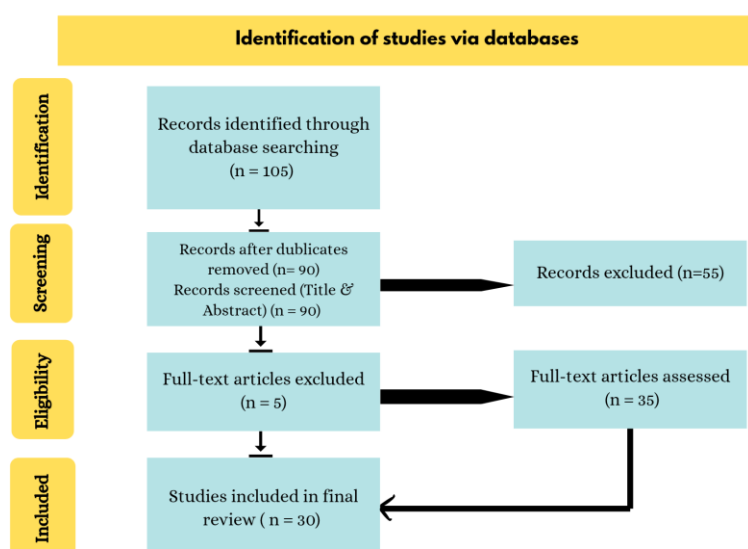
Keyword(s): “photo manipulation” OR “photo editing” OR “selfie editing.”

AND “body image” OR “body dissatisfaction.”AND “social media” was used to search for relevant studies for the variables.

The process of searching was conceptual and iterative, hence covering studies with constructs related to the use of social media, body image and photo editing, including the use of filters, selfies, and digital self-representation.

Studies selection:

A total number of 105 research studies were found. However, after excluding duplicate papers, 90 articles were evaluated. At this stage, 55 articles were eliminated because of their irrelevance. Further, 35 articles underwent full-text evaluation, where only 30 articles met the predefined criteria.



Inclusion Criteria:

- Studies done on young adults (18–25 years)
- Focus on photo manipulation behaviors
- Measurement of body image outcomes
- Empirical studies (including qualitative, quantitative, and mixed-method studies)
- Peer-reviewed, English language
- Published within the last 10 years

Data Extraction and Synthesis:

The data were extracted according to: Study characteristics, Details of participants, Important findings, Variables measured.

Thematic synthesis was conducted, with results grouped under theoretical concepts rather than providing separate descriptions for

each study. This is consistent with the best practice guidelines in conducting systematic reviews.

RESULTS

This systematic review includes 30 studies published between 2015 and 2025, conducted in different parts of the world. The findings from the evidence are grouped and discussed within five core themes: 1. The direct effects of photo manipulation on body dissatisfaction; 2. Selfie culture and selfie editing behaviours; 3. The psychological mediators of photo manipulation effects and 5. South Asian specific evidence.

Theme 1: Photo Manipulation and Body Dissatisfaction :

Research repeatedly finds that exposure to digitally manipulated, idealised media increases body dissatisfaction among young adults. Here, Kleemans et al. (2018) found that adolescent girls exposed to retouched images on Instagram reported significantly lower body satisfaction than girls who viewed unretouched images, including those who acknowledged knowing the images had been manipulated. This challenge to realistic body image is likely to have psychologically harmful effects, and points to a gap between knowing the potential effects of media manipulation and actual psychological outcomes. Earlier, Tiggemann and Slater (2014) found that young adult women who used social media for appearance-related reasons experienced increased appearance comparison and body dissatisfaction. Fardouly et al. (2015) identified similar effects for general visual social media use, attributing the body dissatisfaction-inducing effects of social media in part to the edited and curated images that dominate many platforms.

Marengo et al. (2018) found that passive, image-based consumption predicted greater body image concerns than active text-based interaction, thus suggesting that it is the visual aspect of social media that exerts the greatest harm. Further, while other social media platforms (i.e., Facebook) may exacerbate body dissatisfaction, the highly visual and aesthetic nature of Instagram is uniquely linked to this concern. Furthermore, body dissatisfaction from social media is an issue that increases over time with continued use, as found in the longitudinal study by de Vries et al. (2019). This issue continues to grow with new findings by Rizzo et al. (2025). Conversely, body image concerns can also be impacted in a negative manner by increased consumption in specific contexts (i.e., during a lockdown due to a global pandemic; Wojtara, 2022).

Theme 2: Self-Culture, Filters, and Photo-editing Behaviour:

The existing literature outlines emerging evidence that the active photo-editing involved in selfie-creation constitutes an

independent risk factor for body dissatisfaction. In terms of frequency of selfie-editing and body dissatisfaction and self-esteem, Lonergan et al. (2019) found that frequency of edits performed to selfies predicted greater body dissatisfaction and lower self-esteem. Tiggemann and Anderberg (2020) reported that creation of one's own selfie (as opposed to taking a selfie or viewing selfies of others) increased appearance dissatisfaction most. Veldhuis et al. (2020) found that selfie sharing and selfie editing were associated with higher self-objectification and lower self-esteem. Of particular note in this study was the finding that it was the use of filters that best predicted all these outcomes.

Habitual use of photo-editing apps increases appearance anxiety because users become accustomed to seeing irreconcilable edited versions of themselves. This digital self-modification negatively impacts self-perceived attractiveness through self-objectification. Selective self-presentation and online self-curation of the body also increase body surveillance and appearance-related social comparison. Edited digital self-presentation motivates individuals to pursue cosmetic surgery, highlighting further psychological and physical consequences of photo manipulation.

Theme 3: Psychological Mechanism:

The two most widely used theoretical approaches to explain the negative effects of manipulated imagery on body dissatisfaction are social comparison theory (Festinger, 1954), and objectification theory (Fredrickson & Roberts, 1997). Both Fardouly and Vartanian (2016) and Fardouly et al. (2017) found that appearance-focused social comparison mediated the relationship between social media use and body dissatisfaction. This effect was also supported in a meta-analysis of 16 studies by Holland and Tiggemann (2016), with social comparison identified as the strongest and most consistent mediator of body dissatisfaction outcomes. Furthermore, while general social media use has been found to predict body dissatisfaction (Myers & Crowther, 2009), appearance comparison on social media (Stapleton et al., 2017) explains additional variance in body dissatisfaction above and beyond general social media use.

The second major mechanism through which social media exerts its influence is the internalisation of idealised beauty standards. The findings of Cohen et al. (2018), Vendemia and DeAndrea (2018), Jiotso et al. (2021) and Saiphoo and Vahedi (2019) indicate that internalisation is a key mechanism through which social media can influence body dissatisfaction (Cohen et al., 2018; Vendemia and DeAndrea, 2018) as well as eating disorder risk (Jiotso et al., 2021). Internalisation of the thin-ideal (thin-ideal

internalisation) has been found to predict body dissatisfaction and eating disturbances even when participants recognise that photographs have been ‘doctored’ (Vendemia and DeAndrea, 2018). A meta- and meta-regression analysis of 21 studies investigating the relationship between social media use and body image found a significant overall effect ($r = .19$), with internalisation as a key moderator of this association (Saiphoo and Vahedi, 2019).

Theme 4: Indian contextual Evidence:

Some of these studies looked into these issues specifically within Indian and South Asian populations, and found that the negative effects of photo manipulation are not limited to the Western world. Sekhar, J. et al. (2024) found that 71.8% of a sample of female Indian medical students experienced body dissatisfaction influenced by social media. Vikram, S. (2024) found a strong negative correlation ($r = -.516$) between social media use and body image satisfaction among adolescents in India, being among the larger effect sizes for this correlation across all the studies. Agrawal, S. and Gupta, P. (2025) found social media addiction to be a significant predictor of body dissatisfaction, while Badola, R. et al. (2025) found rapid digital expansion was positively associated with increasing levels of social appearance anxiety.

Menon (2025), utilizing Cultivation Theory, found that young Indian adults internalised filtered beauty standards on Instagram and felt a lot of social pressure to look a certain way. Khosla (2024) showed that among Indian Gen Z, comparing themselves to celebrities and influencers through edited photographs was associated with negative self-perception and peer-shame. Khatri (2024) and Anand (2025) found that Indian young adults who spent more time on image-based platforms had lower body satisfaction and higher internalisation of cultural ideal body weight and skin tone.

Across the five themes, evidence from three themes indicated that exposure to and participation in photo-editing of digitally manipulated images of bodies was a significant and multifaceted risk factor for body image dissatisfaction among young adults. Risk factors included increased exposure to digitally manipulated bodies, the type of edits most commonly applied to images, effects of frequency and duration of image production/editing, and effects of social media image production/editing, all mediated by social comparison of appearance and idealised appearance internalisation. These themes were in turn moderated by gender, individual differences, and cultural differences, and not limited to a specific country or demographic group.

Discussion

This systematic review aimed to investigate the impact of photo manipulation and exposure to idealised digital images on body image dissatisfaction in young adults. Five key areas of research were appraised, including the direct effects of manipulated images, selfie and filter use, psychological mechanisms and moderating variables associated with these effects, and the cultural context of South Asian young people. Thirty studies, which included experimental, longitudinal, cross-sectional, and meta-analytic designs, were included in the review and critiqued within the framework of a theoretically-informed, evidence-based account of body image disturbance among young adults in this digital age.

The findings from Theme 1 revealed that viewing digitally manipulated images of idealised bodies decreased body satisfaction with young adults. Most surprisingly, this decrease was not negated by awareness of image manipulation. Despite stating their knowledge of photo-manipulation, participants reported a decrease in body satisfaction after viewing magazine and apparel ads. This finding may indicate that the effects of idealized images on body satisfaction are automatic and have internalized effects. The negative effects of exposure to these images were not limited to an immediate reaction; participants reported a continued decrease in body satisfaction as they regularly viewed and used images to market apparel online.

Young people's experiences of appearance evaluation are not restricted to being a passive recipient of manipulated photographs. Rather, they are also intensified in their active production of manipulated photographs of themselves through the editing of their selfies. Editing their photographs could lead to an intensified focus on the self as a bodily experience through an even more intense search for a realistic ideal body. This in turn, may contribute to an increased gap between how people experience themselves and how they want to be perceived by others. Theme 2 thus addresses the risk that photo manipulation can affect young people both in how they consume photographs as well as in how they produce and distribute photographs of and by themselves.

The psychological processes that underpin these findings are elaborated in Theme 3. Social comparison theory and objectification theory together provide a theoretical framework to explain why manipulated imagery might be internalised as a personal standard that is unattainable. A finding that participants reported frequent engagement in social comparison to manipulated images of idealised women, and that internalisation of the observer's gaze on the body became a personal standard which was perceived as unattainable,

supports the theory that body image disruption has serious clinical implications related to risk of developing a disordered eating pathology.

While much remains to be done to address the numerous negative effects of idealized media on body image, two of the themes of the special issue, namely, moderators and buffers of effects, and new directions for future research, provide some relief from the dirge-like tone that prevails in the field. Specifically, within these two themes, Gender, Personality, and Interindividual Differences in Idealized Media Consumption: Individual Differences in the Effects of Idealized Media on Body Image, and Gender differences in body image concerns: the role of body appreciation and media literacy, respectively, highlight that gender, personality, and individual differences in comparison orientations all moderate who is vulnerable to the negative effects of idealized media. Notably, young women appear to be most vulnerable, although it is also important to note that effects for men related to the ideal of muscularity are also a growing concern. Furthermore, body appreciation and media literacy were found to be two important buffers of these negative effects. The evidence related to Indian and South Asian populations, which are experiencing exponential growth in access to the Internet and use of social media, is particularly noteworthy. Specifically, while there are clearly many areas in which research is needed, the available evidence indicates that vulnerability to the negative effects of idealized media not only exists in India but also is a growing concern as large numbers of young Indians consume idealized media images and engage in weight control behaviors. The available evidence, which primarily consists of studies conducted with Indian college students, suggests that the effects of idealized media on body image concerns in India are as pronounced as they are in many Western countries, and may, in fact, be stronger.

Research Implications:

Implications for Psychological Intervention:

Body appreciation and media literacy were identified as protective factors. Interventions for body image concerns in young adults should therefore integrate components for body appreciation and for critical media handling, especially in high users of social media. While simply raising awareness of photo manipulation is not sufficient to protect against its effects (Kleemans, Veldhuis & Adriaanse, 2018), going beyond to address the underlying mechanisms of comparison and internalisation is needed. Cognitive-

behavioural and acceptance-based approaches that target appearance-contingent self-worth and social comparison orientations may be particularly effective (Vogel, Webb & Young, 2014).

Implications for Platform Policy and Public Health:

Systemic accountability must be taken by platform providers, given robust evidence that points to photo-editing features, beauty filters and curated images as key determinants of body image harm. Developers must consider designing transparency tools, such as labelling digitally altered content, and reducing appearance-focused social comparison. In the wake of emerging evidence pointing to particularly adverse effects within South Asian populations (Vikram, 2024; Menon, 2025), there must be a public health campaign in the rapidly digitalising societies of South Asia, with culturally relevant messaging about body weight and skin tone.

Implications for Educational Settings:

Schools, colleges and universities are crucial settings in which early interventions for body image concerns can be implemented. Educators and those working with student wellbeing can incorporate messages into school health provision that equip young people with the skills to critically evaluate digitally presented bodies and images, recognising manipulation and challenges to idealised beauty standards that are promoted. In the rapidly changing social media landscape in India, where there is strong evidence to suggest that effects of social media on body image can be large, interventions which are psychologically informed and delivered through institutions such as schools and colleges, as part of broader education and psychoeducation strategies, are particularly critical.

Implications for Clinical Practice:

For clinicians working with young adult women who present with body image disturbance, disordered eating, or appearance anxiety, it is now essential that a psychological formulation considers their social media habits and their use of photo-editing. In previous research, selfie editing has been found to predict body dissatisfaction (Lonergan et al., 2019) and body image concerns (Tiggemann & Anderberg, 2020), independently of passive social media consumption. Thus, clinicians need to consider whether they focus their therapeutic work on aspects of clients' lives that involve active editing of digital selfies, as well as passively consuming bodies online. Approaches such as Acceptance and Commitment Therapy (ACT) and Cognitive Behavioural Therapy (CBT) that target self-objectification and appearance-related concerns can be particularly

helpful with this group. Furthermore, including an understanding of the manufacturing of the 'perfect' body in idealised images within sessions can help to reduce appearance-contingent self-worth and enhance treatment outcome (Cohen et al., 2018; Andrew et al., 2015).

Limitations

The review has several limitations. First, all the included studies rely on self-report measures for social media use and body image concerns which may be prone to reporting biases, including recall bias and social desirability bias. Second, although the direction of the effects seems theoretically plausible, the majority of included studies are cross-sectional and thus lack causal inference. Third, the majority of included studies focused on young women, hence the findings may not generalise to other genders, including males and gender diverse individuals. Fourth, substantial heterogeneity exists in how key constructs (ie, 'photo manipulation,' 'body dissatisfaction,' 'social media use') were operationalised across studies, which makes it difficult to make direct comparisons and synthesise findings. Finally, publication bias may have accentuated the consistent pattern of harm as studies with null or mixed findings tend not to be published.

Future Directions:

While many studies have applied a cross-sectional approach to examine the effects of photo manipulation on the body image of young women and girls, there remains a need for future research employing alternative methodologies to investigate the causal relationship between exposure to highly photo-manipulated images and body image outcomes. Longitudinal studies and experimental studies that expose individuals to highly manipulated images over time would be particularly valuable. Additionally, ecological momentary assessment methods could be used to examine real-time fluctuations in body image over time related to patterns of social media use. Furthermore, it is essential to extend current research to investigate the impact of manipulated images on traditionally underrepresented gender groups, such as males and gender-diverse individuals. Research into how manipulated images affect body image in non-Western cultures is also lacking and would allow theorists to establish the generalization of current theoretical models across demographics.

Conclusion:

This systematic review evaluates the current evidence regarding the impact of photo manipulation and idealised images in digitally presented bodies on body image concerns among young adults. Results showed a robust and pervasive problem worldwide,

where culturally idealised images created through digital manipulation were processed through social comparison processes, through Objectification Theory's self-objectification component, and via internalisation of idealised beauty standards, including awareness of digital image manipulation. Even knowing that photo images had been manipulated was insufficient to decrease concern about idealised bodies. Effects were mediated by passive viewing and active editing of photos rather than only active creation. Results showed that even though certain demographic groups may report lower levels of body concerns and certain individual difference characteristics may reduce concerns for some types of digitally manipulated images, effects were nevertheless consistent across groups and required attention as a matter of individual mental health and public health urgency.

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Social media addiction and quality of sleep between adolescents and young adults: A systematic review

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The increase in digitalization has led to rapid social media engagement, mainly in adolescents and young adults who are characterized by major developmental changes including changes in sleep- wake regulation. This systematic review is synthesized using empirical evidence by existing literature on social media use and quality of sleep among adolescents and young adults aiming to examine the various patterns of social media use (frequency, night time exposure, duration etc.) in relation to various dimensions of sleep; it also aims to map out any gaps in methodology to refine future research. The review is made in accordance of PRISMA guidelines involving systematic searches of ScienceDirect, PubMed, SpringerLink, JMIR Publications and Google Scholar keeping in mind the predefined inclusion and exclusion criteria. The main criteria comprised of age groups comprising mainly of adolescents and young adults excluding any range besides this; in terms of studies, quantitative, qualitative studies and systematic and meta reviews were used, sticking to only peer reviewed journals, making sure that full text is accessible. After following this criterion, 54 studies met this eligibility criterion and were included in this review. Across these studies it was found consistently that higher, maladaptive patterns of social media use were linked to poor quality of sleep, latency of sleep and increased daytime sleepiness. These further suggest that disruptions in sleep acts as a link between excessive social media use with adverse psychological outcomes like stress, anxiety and depression. Most existing evidence depicts limited longitudinal data showcasing some major methodological lapses. The discovered information calls for the need to formulate interventions that are developmentally sensitive, employing a longitudinal research design for insightful information.

Key words: Social media addiction, Problematic social media use, poor sleep quality, digitalization

INTRODUCTION

In today's digital world, the constant expansion of digital technologies has reshaped how people lead their everyday lives. In this rapid change, social media is emerging as prominent form of communication and constant connectivity, especially among adolescents and young adults. 5.41 billion people are now on social media platforms across the world, which represents 65.7 per cent of

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the global population (Datareportal, 2025). Platforms like Instagram, X, WhatsApp, etc., each offer unique ways for people to interact among themselves or with posts, they can create as well as consume content, and most importantly, maintain social relations surpassing geographical boundaries. While these platforms have a lot of benefits, they raise certain concerns due to excessive usage and lead to psychological and behavioural consequences.

Some major feature about social media platforms is that it enables one to be constantly connected with everyone along with personalized algorithms and constant notifications which makes it difficult to sometimes disengage from it. For adolescents who are navigating and formalizing their identity, peer acceptance and for young adults who are figuring out their social and independent roles, such platforms have become central social functioning as well as emotional engagement.

On one hand, social media helps one connect and express oneself, it is extremely interactive and its nature is built in a reward driven manner which often leads to compulsive as well as dysregulated use. This unhealthy pattern of social media use might turn into social media addiction which includes compulsive engagement, lack of control in use, these effects are further amplified in adolescents in young adults as they are developmentally sensitive to social feedback.

In addition to a global concern related to digital use, it is important to understand that the broader digital environment is also a crucial aspect of how individuals interact with technology. In terms of the Global Digital Wellbeing Index (DWI), India has a high rank, indicating that digital technology is a high contributor to the overall quality of life while also highlighting the need for responsible and balanced use. This index includes online safety, digital skills connectivity, effects on physical health and social relationships. India has a score of 67/100, indicating that people showcase high satisfaction with digital experiences and strong engagement, especially among youth. Simultaneously, the index also points out various challenges like online risks and greater awareness in digital spaces.

Twenge, Krizan and Hisler (2017) found that individuals, especially adolescents, who use electronic media for a longer duration were more prone to experiencing shorter sleep duration and sleep disturbances when compared with those with less exposure to screens.

Sleep is a fundamental biological process that is required for physical restoration. Functioning on a cognitive level, emotional regulation and the overall well-being. Proper and adequate sleep is crucial for the proper functioning of the immune system, learning, and stability of mood. But sleep duration is not the only important thing; the quality of sleep. Quality of sleep is how well an individual sleeps in terms of depth, continuity of sleep, latency of sleep,

nighttime awakenings and how rested one feels upon waking. Poor sleep might lead to disturbance of mood, impaired concentration and reduced output.

Emerging studies showcase that excessive engagement with social media platforms can significantly affect the quality as well as the duration of sleep. It has even been found that higher levels of social media use are associated with poor quality of sleep among young adults.(Levenson et al., 2016). Other similar studies also indicate that higher engagement with social media platforms is linked to poor sleep quality, further even leading to symptoms of depression and anxiety. These findings further direct that digital engagement during night hours may cause harm to one's natural sleep cycle.

Social Media Addiction and Quality of Sleep:

Social Media Addiction and the quality of sleep are interconnected, especially among adolescents, emerging and young adults who are the most active users of digital platforms. In the case of excessive engagement with social media, it leads to excessive screen time, especially late at night, often leading to a delay in bedtime and reducing the overall duration of sleep.

As social media has an extremely interactive nature characterised by continuously new notifications, content and online interactions, which stimulates and individual on psychological and cognitive levels which makes it hard for individuals to disengage themselves and lead to delayed onset of sleep . Additionally, many young individuals find it hard to disengage due to fear of missing out which leads them to constantly check their devices for updates and messages even during their usual sleep hours. Due to excessive screen time , the exposure of blue light emitted by devices like smartphones are increased. These blue light rays lead to suppression of melatonin secretion and further disrupt the circadian rhythm further delaying sleep onset and quality.

Consequently, excessive or addictive social media use may negatively affect both duration of sleep ad quality of sleep through psychological, behavioural and physiological pathways, this makes it an important area of research about wellbeing of youth.

Objectives of the Review:

1. To systematically understand existing empirical literature examining the relationship between social media addiction and quality of sleep in adolescents and young adults.
2. To examine the relationship between patterns of social media use (including duration, frequency, night time usage etc) and different aspects of sleep (including quality, duration, onset, latency, daytime dysfunction etc)
3. To identify gaps and limitations in existing literature and suggest direction for future research focussed on developmentally sensitive approaches.

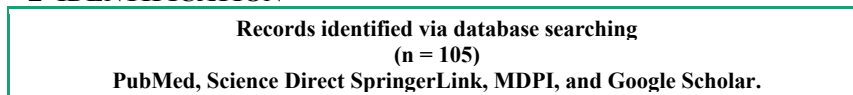
Information Sources:

The sources that were primarily used for gathering research studies were PubMed, Science Direct SpringerLink, MDPI, JMIR Publications and Google Scholar.

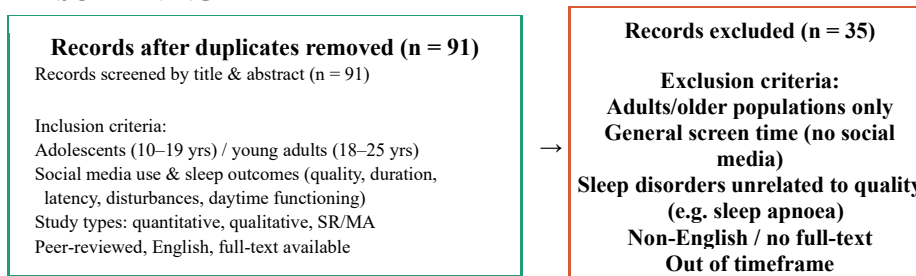
Search Strategy:

A systematic search strategy was employed to identify relevant studies that focus on understanding the relationship between social media addiction and quality of sleep among adolescents and young adults. Initially 91 studies were identified which were later narrowed down to 54 studies after structured screening process guided by inclusion and exclusion criterion. This search was carried out across various databases and to optimize the search process key words were developed and put to use. These were mainly social media use (like social media, social media addiction, social networking sites, problematic social media use etc) , sleep outcomes(like sleep quality, sleep duration, sleep onset, sleep latency, daytime dysfunction etc) and lastly population based which helped in narrowing down and selecting appropriate studies (like adolescents, teenagers, young adults etc). These terms were further used in various combinations to achieve the desired goal. The Search strartergy was followed keeping in mind the eligibility criteria. Searches were mainly focussed on peer reviewed , English studies, with full text availability. Additionally, manual searches of reference list of prominent studies were also carried out to ensure comprehensive coverage of literature.

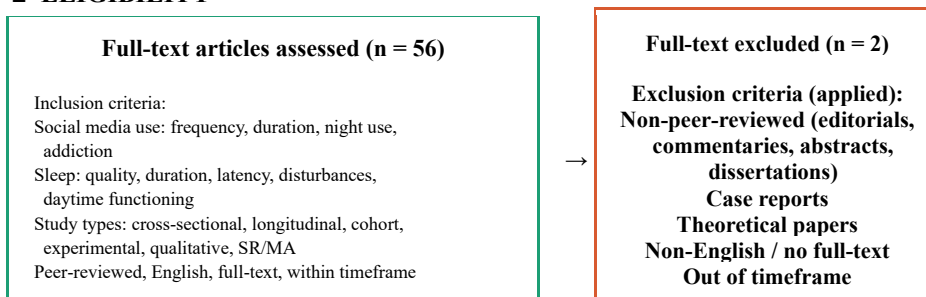
■ IDENTIFICATION



■ SCREENING



■ ELIGIBILITY



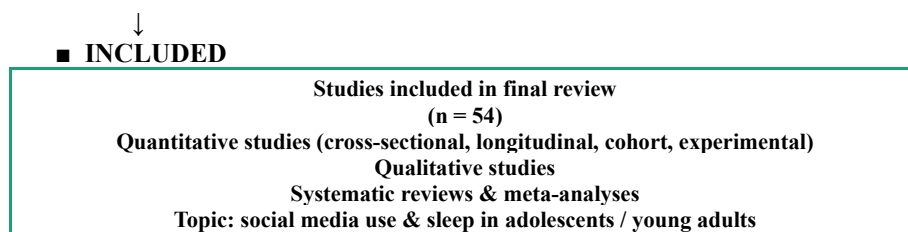


Figure 1 : *Illustrating the Study Selection Process for Research on Social Media Use and Sleep Outcomes in Adolescents and Young Adults through PRISMA model.*

Eligibility Criteria:

The eligibility criteria for the current systematic review was decided as well as defined prior to selection process of study , so that inclusion of all relevant and appropriate studies exploring the relationship between social media addiction and quality of sleep among adolescents and young adults.

Inclusion Criteria:

Studies were included in the review if they met the following criteria-

- **Population-** In terms of population the current study included adolescents within age range of 10-19 years and emerging adults of approximately 18-25 years. Studies which had a broader age group but were relevant to the developmental stages were also included.

- **Variables of Interest-** Examined mainly 2 variables social media addiction and sleep quality. Along with social media addiction , study also focussed on frequency, duration of use, night time use, problematic patterns of use. In terms of sleep quality , study also focussed on duration, onset, duration, disturbances, and daytime functioning.

- **Type of Studies-** The review includes Quantitative studies(Cross-sectional, longitudinal studies etc), Qualitative studies, Systemic and meta-analysis.

- **Publication Characteristics-** Only articles that are published in English and those which are available in full text form are included.

Study Selection Process:

The study selection process was carried out in multiple stages to make sure that all the relevant studies were included. After making the search on the respective database , the retrieved records were initially screened on the basis of titles and abstract , assessing their relevance to social media addiction and sleep quality among adolescents and young adults. These studies that didn't qualify for the eligibility criteria were simply excluded at this stage. Following this stage, those studies that qualified were subjected to full text review, keeping in mind the inclusion criteria related to variables, population, design etc. Those studies which were lacking of these were excluded. Additionally, following full text assessment, studies of different kind like quantitative, qualitative, review based etc were included if they

included all other specified details. These studies are the basis for data extraction and synthesis.

Data Extraction:

To ensure consistency across studies, data was extracted in a systematic way using a structured approach. This extracted information included details of author, year of publication, further helping in a chronological comparison of findings as well. The characteristics of the sample were also recorded including range of age, population type, sample size and geographical context when available. The type of design was also noted including cross-sectional, longitudinal, qualitative, experimental, systematic review and meta-analytic approaches. Details of measurement tools were extracted including the assessment of social media use like frequency, problematic use, etc and validated sleep measures such as sleep quality, duration, latency, disturbances, and daytime functioning. Lastly, findings related to the relationship between social media addiction were recorded which further facilitates comparison across studies.

Quality Assessment:

The methodological quality of the included studies was evaluated to assess the strength and reliability of evidence. Studies were examined based on sample adequacy, clarity of design and validity of measurement tools, with preference given to those using well defined adolescent samples and validated instruments for social media use and sleep outcomes. Additionally, design of study was also considered, like with cross-sectional studies noted for causal inference, while longitudinal, meta-analytic and systematic reviews were regarded as strong evidence. In case of qualitative studies were assessed based on clarity of sampling, collection of data, analytical transparency.

Study Characteristics:

The studies that are included represent a diverse and interdisciplinary body of research on social media use and quality of sleep among adolescents and emerging young adults. These studies were conducted across multiple and sample sizes ranged from small qualitative groups to large scale dataset and meta analyses providing both depth and breadth of evidence. Cross-sectional designs have mainly dominated the literature, though longitudinal studies and meta-analysis offered stronger insights into relationships and trends.

Thematic Synthesis of Findings:

The following findings were synthesised thematically to understand and identify recurring patterns in the relationship between social media use and sleep quality among adolescents and emerging young adults.

Themes:

Social Media Use and Poor Sleep Quality:

In terms of reviewed literature, consistent observations between higher levels of social media use and poorer subjective sleep quality among both adolescents and young adults in terms of poor

sleep quality, it was reflected in frequent awakenings, longer sleep latency, non-restorative sleep, frequent awakenings, longer sleep latency and overall dissatisfaction with sleep. According to evidence recorded from cross-sectional studies, data sets on a large scale, meta-analyses, all together converge to support this relationship, further indicating problematic social media and smartphone use is associated on a moderate level with impaired quality of sleep. More prominently, these findings can be observed to be consistent across diverse cultural contexts and measurement approaches, which suggest that this particular association is not just context specific but reflects a broader behaviour pattern.

The Systemic review further highlights that impairments of sleep are in particular linked to socially engaging and interactive platforms, reinforcing the very idea that social media is not really a passive activity but one that actively influences psychological and physiological states that are relevant to sleep.

Night-Time and Bedtime Social Media Use:

Night-time and bedtime social media use has emerged as one of the most prominent predictors of disruption of sleep across both developmental groups that are adolescents and young adults. Night-time engagement or close to bed time engagement was seen to be consistently associated with delay in onset of sleep, reduction in sleep and increase in daytime fatigue.

In terms of the qualitative findings, they provide significant insights into why adolescents and young adults continue engaging in social media even after its impact on sleep. Some identified contributors of prolonged use of social media during late- night hours are fear of missing out (FOMO), perceived social obligations, peer expectation and emotional investment. It is also observed that timing of using matters a lot as night time use showcase stronger and a more consistent associations with sleep disturbances suggesting that pre-sleep engagement disrupts the transition into sleep through heightened arousal on cognitive and emotional level.

Problematic and Addictive Use Patterns:

A major theme across the selected studies uses the main distinction between what is general social media use and how it is different from problematic or addictive social media use. Adolescents and young adults often show loss of control, compulsive use and persistent usage even after experiencing negative consequences reporting sleep disturbances including symptoms of insomnia, fragmented sleep and daytime dysfunction.

Meta-analytic evidence consistency showcases that problematic use of social media is strongly associated with poor outcomes of sleep than just time spent online indicating importance of aspects like intensity and compulsivity of use as determinant of sleep disruption.

Sleep as a mediating mechanism:

Disturbance in sleep has emerged as a central mechanism that links social media use and broader mental health outcomes. Several

studies including analysis of mediation demonstrated that deprivation of sleep, symptoms of insomnia and poor sleep quality partially explain the relationship between social media addiction and psychological outcomes such as anxiety, depression and stress.

Longitudinal as well as meta-analytic evidence showcase that an inadequate amount of sleep as well as poor quality sleep often predicts emotional dysregulation, internalising of symptoms and further reduces wellbeing over time. This shows how sleep functions are not just an outcome of too much use of social media but an intermediary process through which digital behaviours influence one's psychological health.

Developmental and Gender Differences:

Developmental sensitivity is a key factor shaping the relationship between the relationship between social media use and sleep. On one hand adolescents are vulnerable as this stage is characterized by identity formation, heightened sensitivity to peer evaluation and increase of autonomy in terms of bed time, whereas young adults face some additional demands like social, academic, and even lifestyle transitions which further influences sleep patterns. Gender differences were also something prominently observed. In terms of females, they reported higher levels of social media engagement, particularly communication based and emotionally driven, which often extends into late night use. In terms of males, they are frequently engaged in gaming or content-based activities. Despite variation in the pattern of usage, both exhibited associations with sleep disturbances indicating that digital engagement is broadly consistent.

Discussion:

The reviewed literature demonstrates a consistent and robust association between social media addiction and poor sleep quality among adolescents and emerging young adults. Disturbances in sleep is observed to include non-restorative sleep, frequent night time awakenings, fatigue during daytime, delay in onset of sleep. It was noted across various kind of studies of different types like cross-sectional, longitudinal and meta-analytic studies suggests that this relationship is consistent across multiple cultural contexts. Additionally, it is seen that disturbance in sleep is strongly linked to socially interactive platforms than what is defined as general screen time, indicating how psychologically and emotionally engaging social media can be. Longitudinal findings showcase a bidirectional relationship between problematic social media use and poor sleep; they both reinforce each other.

Another key factor reported in observations is importance of timing of use in this overall relationship. Night-time use and pre-sleep social media engagement is associated on a strong level with delayed onset of sleep, reduction in duration of sleep and also increase in daytime sleepiness. According to qualitative findings, it is indicated that both adolescents and young adults continue late night use, which can be due to fear of missing out, peer expectations,

emotional investment in online interactions. Further, these contribute to heightened cognitive and emotional arousal, which interferes with the process of natural transition to sleep.

Additionally, the literature also focuses on how general social media use and problematic use are different. Problematic or addictive patterns of social media use are associated with disturbance in sleep on a strong level, including symptoms of insomnia and impaired daytime functioning.

Besides this, disturbance in sleep further is a mediating variable linking social media use and mental health outcome. Poor quality of sleep partially explains the relationship between excessive digital engagement and increase in anxiety, depression and stress, making sleep to be a central pathway rather than a secondary outcome.

Further, it was also observed that developmental factors lead to increase in vulnerability, particularly among adolescents as it is characterized by identity confusion, formation, heightened sensitivity to peer feedback and greater autonomy over sleep routines. Besides this, young adults face additional academic and lifestyle pressure that may further interact with digital habits. Lastly, in terms of gender some changes are evident, like females showing higher emotional engagement and communication based night time use while males are more likely to engage in gaming and consumption of content. Despite differences in usage patterns, it is seen that both groups experience similar sleep related consequences.

Limitations :

- **Reliance on self- report measures-** The majority of the studies use questionnaires that can be subjective in nature used to measure social media use and quality of sleep, this can lead to making the findings exposed to recall bias and social desirability effects.

- **Predominance of cross-sectional designs-** As most of the studies are cross-sectional, which leads to restricting the exploration of causal relationships and to understand the directional effect between usage of social media and sleep.

- **Cultural and geographical bias-** Majority of studies have been conducted in western cultures which poses a challenge to generalisability of the findings to diverse cultural and socio-economic settings.

- **Lack of platform specific analysis-** Every platform offers various features that have different effects on individuals, although in most studies social media is treated as a single construct which limits the understanding of effect.

Implications:

Due to predominance of cross- sectional research, the need for more longitudinal and experimental design increases to establish and understand causal relationships and effects on bidirectional levels. In terms of future research, it should focus beyond measuring screen time and focus more on quality, timing, intensity of use especially at

night time engagement. Besides this, certain platform specific features such a notification, likes, and content driven by algorithm which may lead to compulsive use should be studied. In terms of qualitative research , emphasis should be on understanding the underlying factors like psychosocial drivers like fear of missing out, expectations from peers which may lead to sustain late night engagement despite negative consequences.

Conclusion:

The current systematic review showcases a consistent as well as meaningful relationship between social media addiction and poor sleep quality among adolescents, emerging, young adults. Further, engagement at night time and problematic patterns of social media usage have been seen to be specifically influential due to interactive nature of social media which leads to arousal on cognitive and emotional level before sleep. Disturbances in sleep play a crucial role in this relationship which acts as a major mechanism further linking outcome of mental health like anxiety , stress and depression and digital behaviour . Even though methodological limitations exist , in future research more informed and developmentally sensitive approach should address the issue for better insights. In this digital era, improving sleep health requires moving beyond just reduction of screen time and focus on behavioural, emotional and technological factors that underlying social media use.

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Lived Experiences and health-seeking behaviour among individuals with hypertension: A thematic analysis of integrative healthcare practices

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Hypertension is a major chronic non-communicable disease requiring lifelong management through medication, lifestyle modification, and regular monitoring. While biomedical treatment remains the primary approach, many individuals also rely on traditional healing practices and ethnomedicinal knowledge. This qualitative study explored the lived experiences and health-seeking behaviour of adults living with hypertension. A qualitative descriptive design was employed, and 30 purposively selected participants were interviewed using semi-structured interviews conducted in Hindi. The interviews were transcribed, translated into English, and analysed using Braun and Clarke's thematic analysis. Five overarching themes emerged: living with hypertension as an invisible chronic illness, evolving healthcare journeys, cultural beliefs and indigenous healing practices, healthcare experiences and barriers, and the integration of biomedical and traditional healthcare practices. Participants viewed hypertension as a lifelong condition requiring continuous management, with healthcare decisions shaped by illness perceptions, family influence, cultural beliefs, affordability, accessibility, and trust in different healthcare systems. Many adopted pluralistic healthcare practices by combining biomedical treatment with Ayurveda, herbal remedies, and dietary modifications. The findings demonstrate that health-seeking behaviour is influenced by psychological, cultural, social, and structural factors. The study highlights the importance of culturally responsive, patient-centred hypertension care that recognises indigenous health knowledge, strengthens health literacy, and promotes effective communication to improve long-term treatment adherence and disease management.

Keywords: Hypertension; Health-Seeking Behaviour; Cultural Beliefs; Ethnomedicine; Qualitative research; Thematic analysis; Healthcare Practice

INTRODUCTION

Hypertension is one of the most common chronic non-communicable diseases (NCDs) worldwide and remains a leading modifiable risk factor for cardiovascular disease, stroke, kidney disease, and premature mortality (World Health Organization [WHO], 2023). Despite considerable advances in diagnosis and treatment, hypertension continues to affect more than one billion adults globally, with the greatest burden occurring in low- and middle-income

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countries where awareness, treatment, and blood pressure control remain inadequate (WHO, 2023; Mills et al., 2016). Owing to its frequently asymptomatic course, hypertension is often described as the "silent killer," requiring lifelong treatment, regular monitoring, and sustained behavioural modification to prevent long-term complications (Ibrahim & Damasceno, 2012).

India has witnessed a substantial increase in the prevalence of hypertension over the past two decades as a consequence of demographic transition, rapid urbanisation, population ageing, dietary changes, reduced physical activity, and increasing psychosocial stress (Anchala et al., 2014; Gupta & Xavier, 2018). Although national programmes have strengthened screening and treatment services, hypertension continues to present a significant public health challenge because many individuals remain undiagnosed, discontinue treatment, or experience poor long-term adherence (Kaur et al., 2023; Maheshwari et al., 2024). Since hypertension requires continuous self-management rather than episodic medical care, understanding how individuals recognise their illness, choose healthcare providers, and maintain treatment is essential for improving disease control.

Health-seeking behaviour refers to the process through which individuals recognise symptoms, interpret their health needs, decide whether professional care is required, and select among available healthcare options (Andersen, 1995; MacKian, 2003). These decisions are rarely determined by medical factors alone. Previous studies have demonstrated that healthcare utilisation is shaped by an interaction of socioeconomic circumstances, accessibility of services, affordability, previous healthcare experiences, family influence, cultural beliefs, and trust in healthcare providers (Ensor & Cooper, 2004; Peters et al., 2008). For chronic illnesses such as hypertension, healthcare decisions often evolve over time as individuals continually assess treatment effectiveness, medication burden, financial constraints, and advice received from healthcare professionals and social networks.

The Indian healthcare system is characterised by medical pluralism, where biomedical care exists alongside traditional systems of medicine including Ayurveda, Yoga, Naturopathy, Unani, Siddha, and Homeopathy (AYUSH). In addition to these institutional healthcare systems, many communities continue to preserve indigenous ethnomedicinal knowledge that is transmitted through families and local cultural traditions (Ministry of AYUSH, 2021; Kleinman, 1980; Nichter, 1981). Consequently, individuals living with chronic illnesses frequently navigate between multiple

therapeutic systems rather than relying exclusively on biomedical care. Earlier studies have shown that traditional remedies are often perceived as natural, culturally familiar, and compatible with long-term disease management, while biomedical treatment is valued for controlling clinical symptoms and preventing disease progression (Broom et al., 2009; Patwardhan, 2014).

Although substantial research has examined the epidemiology, risk factors, and clinical management of hypertension, considerably less attention has been devoted to understanding patients' lived experiences and the behavioural processes underlying healthcare decision-making. Most existing studies have focused on treatment adherence, awareness, or healthcare utilisation using quantitative approaches, providing limited insight into how individuals interpret hypertension within their everyday social and cultural contexts. Furthermore, qualitative evidence exploring the influence of cultural beliefs, family traditions, indigenous healing practices, and previous healthcare experiences on hypertension management remains relatively scarce, particularly within the Indian setting.

Understanding these experiences is especially important from a community psychology perspective, which recognises that health behaviours develop through continuous interactions between individuals and their social, cultural, and environmental contexts. Decisions regarding healthcare are influenced not only by knowledge of disease but also by relationships with family members, community norms, healthcare accessibility, and culturally shared beliefs regarding illness and healing. Exploring these broader influences provides opportunities to design interventions that are more responsive to the realities of people's everyday lives and therefore more likely to promote sustained behavioural change.

Against this background, the present study explores the lived experiences and health-seeking behaviour of adults living with hypertension in Lucknow, India. Using a qualitative descriptive approach and thematic analysis, the study examines how illness perceptions, cultural beliefs, healthcare experiences, and traditional healing practices influence healthcare decision-making. By generating an in-depth understanding of these experiences, the study contributes evidence that may support the development of culturally responsive, patient-centred, and community-oriented strategies for improving long-term hypertension management.

METHOD

Study Design and Setting:

This study employed a qualitative descriptive research design to explore the lived experiences of individuals living with

hypertension and to understand the factors influencing their healthcare decisions. The study was reported in accordance with the Consolidated Criteria for Reporting Qualitative Research (COREQ) (Tong et al., 2007). A qualitative approach was considered appropriate because it enables an in-depth exploration of participants' perspectives, beliefs, and experiences within their everyday social and cultural environments.

The research was carried out in Lucknow, Uttar Pradesh, India, an urban district where healthcare is provided through a diverse network of government hospitals, private clinics, AYUSH facilities, and community-based traditional practitioners. The coexistence of these healthcare systems offered an appropriate context for examining the different pathways through which individuals manage hypertension.

Participant Recruitment:

Participants were recruited using purposive sampling to obtain rich descriptions from individuals with direct experience of living with hypertension. Adults aged 30–70 years who had received a medical diagnosis of hypertension for at least one year were eligible for inclusion. Participants were required to have experience of seeking treatment for hypertension through biomedical healthcare services, traditional medicine, or both, and to be able to communicate comfortably in Hindi.

Potential participants were approached through community healthcare facilities and outpatient services. Individuals who fulfilled the eligibility criteria received an explanation of the study objectives and procedures before providing written informed consent. Recruitment continued until thirty participants representing diverse ages, genders, and treatment experiences had been enrolled.

Data Collection:

Data were collected between March and September 2024 through individual semi-structured interviews conducted in Hindi. Interviews generally lasted between 30 and 50 minutes and were held in locations chosen by participants to ensure comfort, privacy, and confidentiality.

An interview guide with broad, open-ended questions was used to facilitate discussion while allowing participants to describe their experiences freely. Topics included participants' understanding of hypertension, experiences surrounding diagnosis, daily life with the condition, treatment journeys, interactions with healthcare professionals, use of traditional remedies, family influences, perceptions of different healthcare systems, and the factors that shaped their healthcare choices over time.

With participants' permission, interviews were audio-recorded. Field notes were maintained throughout the study to document contextual observations, non-verbal communication, and reflections that supported interpretation of the interview data.

Data Saturation:

Data collection and analysis occurred concurrently. As interviews progressed, recurring ideas and patterns became increasingly evident across participants' accounts. Recruitment was discontinued once additional interviews no longer generated substantially new insights or concepts relevant to the research objectives. Saturation was achieved after thirty interviews, indicating that sufficient depth and variation had been obtained to address the study aims.

Data Management and Analysis:

Audio recordings were transcribed verbatim in Hindi and subsequently translated into English for analysis. To preserve the authenticity of participants' accounts, translated transcripts were carefully reviewed against the original recordings, and culturally specific expressions were retained wherever appropriate.

The data were analysed using Braun and Clarke's six-phase thematic analysis. Initially, all transcripts were read repeatedly to develop familiarity with the data. Meaningful segments of text were then systematically coded according to their content and relevance to the research questions. Codes with conceptual similarities were grouped together to form preliminary categories, which were continuously reviewed and refined throughout the analytical process. Through iterative comparison and discussion, broader themes were developed that represented shared patterns while preserving variation in participants' experiences. The final themes were generated inductively from the data and reflected participants' own perspectives on living with hypertension and navigating different healthcare options.

Trustworthiness:

Several strategies were employed to enhance the rigour of the study. Credibility was strengthened through prolonged engagement with the data, repeated review of interview transcripts, and regular discussions among the research team during coding and theme development. Dependability was supported by maintaining detailed records of methodological decisions and analytical procedures throughout the study. Confirmability was enhanced through reflexive note-taking and by ensuring that interpretations were grounded in participants' narratives rather than researchers' assumptions. To improve the authenticity of the findings, selected participants were

invited to review the interpretation of the results and confirm that the themes reflected their experiences.

Ethical Considerations:

The study was conducted in accordance with the ethical principles for research involving human participants and the Ethical Principles of Psychologists and Code of Conduct of the American Psychological Association (APA). Prior to participation, all participants were informed about the purpose and procedures of the study, and written informed consent was obtained. Participation was entirely voluntary, and participants were free to decline or withdraw from the study at any stage without any adverse consequences. Every effort was made to ensure that no participant experienced physical, psychological, social, or economic harm during the research. Participants' privacy, dignity, and confidentiality were strictly maintained by anonymising all interview data and securely storing the study records. The information collected was used solely for academic and research purposes, and all legal and ethical responsibilities were duly observed throughout the research process.

RESULTS

The interviews provided rich insights into how participants experienced hypertension and the ways in which they navigated different healthcare options while living with the condition. Participants described hypertension as a long-term illness that required continuous attention despite often producing few noticeable symptoms. Their decisions regarding treatment were influenced by previous healthcare experiences, family advice, cultural beliefs, financial circumstances, and confidence in different systems of medicine. Rather than relying on a single source of care, many participants described moving between biomedical treatment and traditional remedies in an effort to achieve better control of their blood pressure and maintain their overall well-being.

Five interconnected themes were identified from the analysis:

1. Living with hypertension: adjusting to an invisible chronic illness
2. Healthcare journeys and changing treatment decisions
3. Cultural beliefs and indigenous healing practices in hypertension management
4. Experiences with healthcare services and barriers to long-term care
5. Balancing biomedical treatment with traditional healthcare practices

Together, these themes illustrate that health-seeking behaviour among individuals with hypertension is dynamic and shaped by an

interaction of personal experiences, cultural values, family influence, and healthcare accessibility.

The demographic and clinical characteristics of the participants are summarised in **Table 1**. The study included a diverse group of adults living with hypertension, varying in age, gender, educational background, occupation, duration of illness, and healthcare utilisation, thereby providing a broad range of experiences relevant to the study objectives.

Table 1: Demographic and Clinical Characteristics of the Participants (N = 30)

Characteristic	Frequency
Male	50
Female	50
Age	
30–40	08
41–50	09
51–60	07
≥61	06
Occupation	
Homemaker	10
Employed	10
Self-employed	05
Retired	05
Education	
Higher Secondary	10
Graduate	10
Post-Graduate	10
Duration of hypertension	
1–2 years	
2–4 years	10
4 years and more	10
Type of treatment	
Biomedical only	09
Traditional only	09
Biomedical + Traditional	22

Theme 1. Living with Hypertension: Adjusting to an Invisible Chronic Illness

For many participants, hypertension was initially difficult to recognise because it produced few obvious symptoms. Several reported discovering the condition only during routine health check-ups or after experiencing complications such as persistent headaches, dizziness, or episodes of weakness. The diagnosis often led participants to reconsider their daily routines and become more conscious of their health.

"I never imagined I had high blood pressure because I felt normal. It was only after repeated headaches that I went for a check-up and found out." (P4, Male, 56 years)

Participants described the challenge of accepting a condition that required lifelong management despite the absence of continuous symptoms. Many explained that taking medicines every day served as a constant reminder that they were living with a chronic illness.

"The medicines have become part of my daily life. Even when I feel healthy, I know I cannot stop taking them." (P17, Female, 61 years)

Several participants also discussed feelings of anxiety regarding possible complications such as stroke, heart disease, or kidney problems. These concerns motivated some individuals to adhere closely to treatment recommendations, whereas others occasionally struggled to maintain long-term lifestyle changes.

Theme 2. Healthcare Journeys and Changing Treatment :

Decisions:

Participants rarely described their healthcare journey as straightforward. Instead, treatment decisions evolved over time as individuals evaluated their experiences with different healthcare providers and therapies.

Many participants initially consulted nearby physicians after receiving a diagnosis. However, dissatisfaction with symptom control, medication burden, or advice from relatives often encouraged them to explore additional healthcare options.

"I first went to a private doctor, but later my relatives suggested Ayurveda. Since then, I have been using both." (P9, Female, 52 years)

Healthcare decisions were often revisited whenever participants experienced changes in symptoms, medication side effects, or financial difficulties. Rather than abandoning one system completely, many described modifying their treatment according to their changing needs.

Theme 3. Cultural Beliefs and Indigenous Healing Practices in Hypertension Management:

Traditional knowledge formed an important part of hypertension management for many participants. Home remedies and herbal preparations were frequently introduced through parents, grandparents, neighbours, or friends and were regarded as valuable sources of support alongside prescribed treatment.

Commonly mentioned practices included consuming garlic, tulsi, neem, giloy, and herbal preparations believed to support cardiovascular health.

"My mother always believed garlic helps control blood pressure, so I continue taking it every morning." (P21, Female, 58 years)

Participants generally viewed these remedies as natural, familiar, and culturally acceptable. Many believed they strengthened the body gradually and produced fewer unwanted effects than long-term medicines.

Although confidence in biomedical treatment remained high for controlling hypertension, traditional remedies were often perceived as helping to maintain overall health and prevent future illness.

Theme 4. Experiences with Healthcare Services and Barriers to Long-Term Care:

Participants described several practical challenges that influenced their healthcare experiences. The financial cost of repeated consultations, lifelong medication, transportation, and diagnostic investigations sometimes created difficulties in maintaining regular follow-up.

"The medicines continue every month. Sometimes the expense becomes difficult, especially when there are other family responsibilities." (P11, Male, 63 years)

Several participants appreciated physicians who explained the illness clearly and encouraged questions. Others felt consultations were too brief, leaving little opportunity to discuss diet, lifestyle, or concerns regarding treatment.

Accessibility also influenced healthcare utilisation. Participants often preferred healthcare providers who were easily available within their neighbourhoods or who had earned the trust of local communities through long-standing relationships.

Theme 5. Balancing Biomedical Treatment with Traditional Healthcare Practices:

A prominent finding across interviews was the tendency to combine different therapeutic approaches rather than viewing them as mutually exclusive. Participants commonly described biomedical medicines as essential for controlling blood pressure, while simultaneously using traditional remedies to improve general health and well-being.

"I never stop the tablets, but I also drink herbal preparations because they make me feel healthier." (P27, Male, 59 years)

Some participants adjusted their healthcare practices according to changes in blood pressure, advice from family members, or personal experiences with different treatments. This flexible approach reflected participants' attempts to achieve long-term control

while remaining consistent with their cultural beliefs and everyday circumstances.

Overall, the findings indicate that health-seeking behaviour among individuals living with hypertension extends beyond medical treatment alone. Participants continuously negotiated between professional advice, traditional knowledge, family expectations, and practical realities in managing a lifelong chronic condition.

Discussion:

This study explored the lived experiences and health-seeking behaviour of individuals living with hypertension within a pluralistic healthcare environment. The findings demonstrate that healthcare decision-making is far more complex than simply selecting a treatment option. Participants described a continuous process of evaluating their illness, interpreting symptoms, seeking advice from multiple sources, and adapting their treatment practices according to personal experiences, cultural beliefs, family influence, and practical realities. These findings reinforce the view that health-seeking behaviour is an evolving process shaped by the interaction of psychological, social, cultural, and structural factors rather than by clinical need alone. Similar observations have been reported among patients with chronic illnesses in India, where healthcare decisions are influenced by multiple social and cultural determinants (Andersen, 1995; Ensor & Cooper, 2004).

One of the most prominent findings was that participants perceived hypertension as a lifelong condition requiring constant attention despite its frequently asymptomatic nature. Many participants reported that the absence of obvious symptoms sometimes reduced their perceived urgency to continue treatment, whereas concerns about potential complications encouraged others to remain adherent to prescribed medication. This reflects previous research suggesting that the "silent" nature of hypertension often influences individuals' perception of disease severity and long-term treatment adherence. The findings highlight the importance of improving patients' understanding of hypertension through continuous education and effective communication rather than relying solely on medication prescriptions. Similar findings have been reported by Chow et al. (2013) and Ibrahim and Damasceno (2012), who observed that the asymptomatic nature of hypertension often contributes to delayed care-seeking and poor treatment adherence.

The study also demonstrates that health-seeking behaviour was characterised by therapeutic pluralism. Rather than viewing biomedical treatment and traditional healing practices as competing

systems, participants frequently integrated both approaches into their daily management of hypertension. Prescribed antihypertensive medicines were generally regarded as necessary for controlling blood pressure, while Ayurvedic therapies, herbal preparations, dietary practices, and home remedies were perceived as supporting overall health, reducing dependence on medicines, or preventing future complications. Similar patterns have been reported in studies from India and other low- and middle-income countries, where individuals with chronic illnesses commonly combine different healthcare systems according to perceived effectiveness, cultural familiarity, and personal preference. These findings suggest that pluralistic healthcare utilisation should be recognised as an important component of chronic illness management rather than viewed solely as non-compliance with biomedical treatment. These findings are consistent with Kleinman's (1980) concept of medical pluralism and with studies by Broom et al. (2009) and Lambert (2012), which describe how patients navigate between biomedical and traditional healthcare systems according to cultural values and perceived treatment effectiveness.

Cultural beliefs and family influence emerged as important determinants of healthcare decision-making. Participants frequently described learning about traditional remedies through parents, grandparents, neighbours, and community members, reflecting the continued transmission of indigenous health knowledge across generations. Such practices were often valued because they were considered natural, familiar, and culturally acceptable. These observations reinforce evidence that healthcare decisions are embedded within social relationships and cultural traditions rather than being based exclusively on biomedical knowledge. Public health interventions that ignore these cultural influences may therefore have limited success in promoting long-term treatment adherence. Nichter (1981) and Helman (2007) also emphasised the role of cultural traditions and family knowledge in shaping illness behaviour.

Experiences within the healthcare system also played a significant role in shaping participants' treatment choices. Positive interactions with healthcare professionals strengthened confidence in biomedical care, whereas limited consultation time, inadequate communication, financial burden, and difficulties accessing services sometimes encouraged participants to explore additional therapeutic options. Participants consistently emphasised the importance of receiving clear explanations about their condition and treatment. These findings underscore the need to strengthen patient-centred communication and continuity of care, enabling healthcare

professionals to address patients' concerns, beliefs, and expectations more effectively. Andersen's behavioural model also highlights the importance of provider–patient interactions and healthcare accessibility in influencing service utilisation (Andersen, 1995).

The findings have important implications for community psychology by illustrating that health behaviours are influenced by broader ecological contexts in which individuals live. Psychological processes such as illness perception, perceived control, trust, and motivation operate alongside family relationships, cultural values, healthcare accessibility, and community knowledge to shape healthcare decisions. Understanding hypertension management from this broader perspective supports the development of interventions that move beyond disease control alone and recognise the social and cultural realities of patients' everyday lives.

From a public health perspective, the findings emphasise the importance of culturally responsive hypertension programmes. Health education initiatives should acknowledge the widespread use of traditional remedies while providing evidence-based guidance regarding their appropriate use alongside prescribed medication. Community-based interventions involving family members, local health workers, and culturally appropriate communication strategies may improve treatment adherence, strengthen trust in healthcare providers, and promote informed decision-making. Integrating respectful dialogue about traditional health practices into routine clinical consultations may also encourage more open communication between patients and healthcare professionals.

This study possesses several strengths. By employing qualitative interviews, it provides detailed insights into participant's lived experiences that are often overlooked in quantitative research. The inclusion of participants with diverse treatment experiences allowed the study to capture a wide range of perspectives regarding hypertension management within a pluralistic healthcare system. Nevertheless, certain limitations should be acknowledged. The study was conducted within a single geographical setting and involved a relatively small purposive sample, which may limit the transferability of the findings to other populations. Furthermore, participants' accounts were based on self-reported experiences and may have been influenced by recall or social desirability bias. Future research involving multiple regions and diverse cultural settings could provide a broader understanding of health-seeking behaviour among individuals living with hypertension and further explore how traditional and biomedical healthcare systems can be integrated to support long-term chronic disease management.

Limitations:

The findings should be interpreted in light of several limitations. The study was conducted within a single geographical setting using purposive sampling and therefore may not represent experiences in other regions. Participants' accounts relied on self-report and may have been influenced by recall or social desirability bias. In addition, the relatively small sample size limits the transferability of findings.

Conclusion:

This study demonstrates that health-seeking behaviour among individuals living with hypertension is a multifaceted process shaped by the interaction of psychological experiences, cultural beliefs, family influences, healthcare experiences, and structural factors. Participants did not rely exclusively on a single system of care; instead, they actively navigated between biomedical treatment and traditional healing practices, selecting therapeutic approaches that aligned with their perceived effectiveness, cultural values, and everyday circumstances. These findings highlight that hypertension management extends beyond clinical treatment and is closely linked to the social and cultural contexts in which individuals live.

Improving long-term hypertension outcomes therefore requires healthcare approaches that recognise patients' lived experiences and acknowledge the realities of pluralistic healthcare utilisation. Strengthening patient-centred communication, improving health literacy, encouraging family and community engagement, and fostering respectful dialogue about traditional health practices may enhance trust, treatment adherence, and informed healthcare decision-making. By incorporating culturally responsive strategies into routine hypertension care, healthcare systems can better support individuals in managing this lifelong condition while promoting more equitable and sustainable health outcomes.

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Reel life vs real life: mental health consequences of digital validation

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The rapid growth of the short-form video content (especially, reels on Instagram and YouTube) altered the mechanism of Socially influenced individual of any age in India. In this paper called “Reel Life vs Real Life: Mental Health Consequences of Digital Validation”. Relying on an analysis of 80-90 studies based in India, as the study will use the Indian-based research to guarantee cultural applicability, tackle local digital behavior, and build context-contingent information on how reel approval affects self-worth, mental health and routine in India, refers to the dependency behavior and subsequent emotional dependence that is created due to constant social approval in terms of likes, view and share. The other problem that was studied is the fine line between real and reel life and the effects of the creation of materials on habits, efficiency, and control of emotions. The inferences are that the current Indian population needs to be more concerned about the digital literacy and become more aware about their consuming patterns and more age specific interventions need to be made about the pervasive effects of the reel validation on the mental human health of the target population. In addition to the psychological effects, the study also indicates physical health problems associated with perturbed sleep, straining the eyes, fatigue, and living a sedentary lifestyle caused by spending too much time on screens. At the mentally level it associates reel validation with anxiety, mood swings, lack of attention span and insecurity based on the element of comparisons.

Keywords: Reel addiction, social media validation, self-worth and likes, mental health and Indian population, routine disruption, online business visibility, Cross-generational impact

INTRODUCTION

The digital age has transformed the need for validation, particularly through social media Reels, which serve as a major form of expression and entertainment—especially in India with its growing smartphone and internet usage. While Reels promote creativity and a sense of belonging, they also create a powerful, faceless pressure to be liked, shared, and commented on, highlighting the obsession with digital validation.

This endorsement has already trickled down not only to the manner in which people project themselves on the internet but has

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trickled its way into the actual physical world. This is because it is between the teens who transform their identities to be socially acceptable and the business owners who employ reel engagement as an avenue of expanding their businesses as well as the senior citizens and hence the psychological consequences of digital approval are highly diversified and widespread. It determines the daily life, mental health, self-image as well as sleep phenomena, interpersonal relationships and productivity. Despite its increased power, there is currently very little Indian-based psychological research, which can be employed to demonstrate how the given phenomenon takes place across a variety of aged groups, cultures, and life domains.

Why focus on India? India was selected because it has a large under-studied and culturally unique population, in which reel validation can have strong psychological consequences. The study of reel addition and digital validation in Indian psychological research is a research gap with maximum literature availability being western. Online creation of content has taken place in India more during COVID-19 lockdown and included digital presence as part of working, learning, and identity.

Rationale:

This paper reviews the psychological and social issues related to reel validation's impact on identity and behavior. It explores why companies rely on validation metrics for growth and how screen time and social comparison affect mental health. The influence of psychology has intensified due to business incentives and cultural values in the digital age. Increased screen time and social media are harming youth mental health globally. Since the pandemic, influencer culture in India has thrived, leading to body image issues and emotional hazards associated with reel-based marketing on short video platforms.

An Overview of Reel-Based Psychological Patterns:

IG Reels, YouTube shorts, and many other short-form videos such as Snapchat Spotlight have become a daily aspect of internet life, it influences connection and attention, behavior, and a sense of validation. The reel consumption model compels individuals into addictive and in many cases, unhealthy behaviors on an algorithmically-reinforced loop of dopamine-based rewards and attention-seeking economies, most especially among teenagers, young adults, and content creators.

- Reel Addiction: Ways time disappears (2 - 4+ hrs), never runs out, difficult to stop, withdrawal (anxiety, boredom). Scrolling is rewarding and sticky because it is dopamine loop.

- Self-Worth and Validation: Likes, comments, and shares = The score of worth.
- Comparison & Social Anxiety: the idealized reels INPUT: you are not enough feelings INPUT: dissatisfaction & anxiety.
- Dopamine Loop: The feeling of being confirmed causes a release of dopamine; lack of it becomes rejection, going back to check, obsessive usage.

Reels and Real Consequences:

Social media over-validation may also cause emotional dysregulation and mood swings, as well as difficulty with emotional control. This addiction leads to the creation of social withdrawal and loneliness since face-to-face interaction is dissipated. Also, the continual self-promoting can develop narcissistic characteristics and identity confusion especially among teenagers. Performance anxiety and stress make people currently hate Instagram since the pressure to get likes is there and the late night scrolling prevents people and makes them tired. The need to get approval from other people can eventually undermine self-efficacy by strengthening the fears of being rejected and becoming socially excluded.

DSM-5-TR does not define any conditions of social media/reel addiction. There are associated dysfunctions that are studied and may be measured against OCD, depression, or behavioral addictions. Internet Gaming Disorder (DSM-5-TR) is taken as a model to research reel/social media addiction.

Social Media Validation and Its Effect on Daily Life Activities:

Reel validation shapes lifestyle, social behavior, and generational patterns. Constant approval-seeking reduces attention, sleep, productivity, and increases anxiety, emotional instability, and dependence on others' opinions.

- Entrepreneurial Stressors – Small brands rely on reels for reach, and creators face burnout from chasing virality.
- Effectiveness – Nightly scrolling harms sleep, study, work, and focus.
- Generational Differences – Teens face peer pressure, adults feel guilt and distraction, while older users risk misinformation.
- Family & Social Ties – Online validation often replaces real conversations and quality time.

Search Strategy:

In order to comprehend the study of “Validation Addiction: Reels, Mental Health, and Generational Well-being Or Reel Life vs Real Life: Mental Health Consequences of Digital Validation”. with the references to Reels, mental health, and generational welfare, a

literature review was taken on the studies in India and other countries in the world during the period between January 2018 and June 2025. Their review employed the use of google scholar and the research Gate as well as other Indian journals (e.g., Indian Journal of Mental Health, Psychology and Developing Societies), with keywords including reel addiction, social media validation, self-worth, and mental health. An importance was given to the articles of the period after 2020 to reflect new trends in digital behavior in post-pandemic world.

RESULTS

The literature retrieved comprises empirical, theoretical and review research that analyze the relationship of the psychological effects of the social media reels on self-worth and well-being. The studies indicate that the negative self-comparison that occurs due to exposure to the idealized contents deleted and curated on social media, affects self-worth and self-esteem. Within an Indian context, the issue of how social media reels validation works has been extensively researched between 2018 and 2025, and the areas of influence on self-perception, mental health, social relationships, education, and career in people of different age groups were investigated.

Mental Health and Self-Esteem:

It has been found that there is a negative relationship between validation-seeking and self-esteem. According to Prachi Saini and Apoorva Choudhary (2025), the process of self-respect degradation causes teenagers to have emotional disturbances as they strive to obtain validation. According to the research designed by Dr. P. V. K. Daniel & Dr. M. S. Rani (2020) and Ayushi Sharma (2023), overuse of social media results in a decline in self-esteem and increases FOMO in adolescents. Anxiety and depression are found to be related to validation-seeking (Dr. Meenakshi Sundaram, 2021; Dr. K. S. Pillai, 2023) which decreases self-efficacy and augments stress levels (Dr. R. S. Iyer, 2023).

Impact on Identity and Self-Esteem:

A number of reports have shown that the social media has an impact on forming identities. Sharma & Soni (2023) reported a positive correlation between the use of social media and youth identity formation, whereas Banerjee & Roy (2023) have reported that young adults use social media to help them express their genuine selves. On the other hand, researchers Dr. Ritu Singh (2018) and others have discovered that body image problems and loss of self-esteem are results of leaning on social media validation, more so in women and adolescents.

Academic and Behavioral Outcomes:

The scholarly consequences of validation acquisition through social media are gigantic. Chopra & Sharma (2022) observed that academic motivation can be improved through positive utilisation of social media. On the other hand, Dr. S. K. Singh (2023) and Dr. S. P. Mehta (2023) associated the validation-seeking behaviors with a low performance in academic tasks and motivation. Furthermore, Dr. S. K. Jain (2020) concluded that high degree of dependence on social media validation is linked to low self-disciplining which is a negative indicator of learning outcomes. It is an office behavior that also affects performance in the workplace and emphasized that professional validation pressure decreases teacher and healthcare performance.

Business and Professional Impacts:

The aspects of social media validation related to the business are also underlined in Indian research. Chakraborty & Sen (2024) have interviewed 50 women entrepreneurs and revealed that online validation did not only increase their confidence but helped in networking and business expansion as well. However, according to Dr. A. K. Gupta (2020), such behavior of validation-seeking may have a detrimental impact on job-satisfaction and even mental wellbeing among the working adults. In a similar vein, Dr. P. S. Reddy (2024) also wrote on the peer validation in the development of self-esteem of adolescents, demonstrating the path onto the professional validation, starting at an early age.

Family and Routine Interferences:

A desire to be justified is also the phenomenon, which disrupts family life and normal routine. Individuals reported increased levels of stress, interrupted communication streams and lose of discipline due to the utilization of reel and online endorsement (Dr. M. S. Rao, 2024; Dr. M. K. Sharma, 2020; Dr. A. R. Reddy, 2021).

Measurement and scale development:

Recent activities in India revolve around the standardization of the measurement of social media impacts. Dr. R. Suresh and Dr. S. Suganthi (2022) created the Social Media Disorder Scale and the Indian Social Media Addiction Scale in order to evaluate how social media has had a psychic impact on both youth and adults. Indicatively, Dr. Ritu Singh (2018) examined a sample of 120 women and concluded that the dependence on likes and comments led to a great deal of body image dissatisfaction because of the unhealthy comparisons encouraged on social media. Also, Meenakshi Sundaram (2021) provided a sample of 300 university students with an interview that demonstrated that frequent validation-seeking using

social media was associated with higher anxiety and lower self-esteem, demonstrating long-term mental risks.

Discussion:

Short videos social media such as Instagram reels and YouTube shorts play vital roles in self-perception, everyday activity, and relationships, mostly with individuals who are teenagers and influencers. Measures of self-worth such as likes and shares can be regarded as engagement metrics, which results in needing external approval, low self-esteem and psychological distress. When the user is lowly engaged, they might experience insecurity and when they become highly engaged then it provides a temporary kind of confidence that makes it addictive thus creating a cycle. Also, the heavy use of social media may cause sleeping problems and prevent concentration, which leads to procrastination and mental tiredness. Social media has applications in professional life, especially when it comes to increasing visibility and business development, and when it comes to women, it may cause burnout and decrease the satisfaction with the work.

Constraints of the Paper: Theory Applicable to Cultural Focus on India Only Results to non-Indian populations may not be applicable because of differences in sources of data based on differences in cultures. Minimal Clinical Validation Reel addiction has no formal status in DSM-5-TR and, therefore, conceptualized interpretation, not diagnosis, is made, and is lacking in primary data.

Significance of the Study:

This research is essential in the current online age and more so in India where social media is developing at a very fast rate. It fills a gap in the Indian psychological writing on changing outcomes of reel validation. The paper emphasizes age vulnerability, specifically among adolescents, young adults, and middle-aged users and discusses the consequences of age on small enterprises and content creators. It also explores the emotional and behavioural imbalance like the problem of sleep, poor productivity, anxiety and FOMOs. Well-being online can be enhanced through building enhanced media literacy, mindfulness and self-awareness.

Being aware of such effects may lead to a more positive treatment regime of mental health as well as an awareness program in-school and a policy level decision to permit accountable use of digital media in India.

Conclusion:

The psychological consequences of social media addiction are also quite evident, especially in connection to anxiety and depression and emotional stresses. These effects have been experienced mostly

on the adolescents and college going students though other age groups and the working population are also affected. The bi-tronic feature of social confirmation and rejection increases the level of psychological vulnerability and makes it compulsory to remain always online to be accepted. A lot of users equate their sense of self with the amount of likes or comments they can get, which acquires unstable form. Studies indicate individuals accustomed to receiving validation outside are likely to have low self-esteem and compare themselves unfavourably with idealized internet-based personas thus creating a lack of confidence in the real-life context.

According to the reviewed studies the reel validation has a major affecting factor in the mental health and social behavior of people of quite diverse age levels. Low self-esteem and associated anxiety occur in many adolescents and young adults due to their dependency on the validation provided by other people, which may have various negative results, especially in academic performance and confidence, especially in young women obsessed with the body image. There is a report of job dissatisfaction on the part of professionals and motivation issues on the part of students. Intensive reel use will negatively impact the family communication and emotional connectivity, and the older users will develop higher levels of digital dependency even though not lonelier. Such revelations show how there should be more awareness and healthier digital culture to enable mental health.

Being a student of psychology, the mental health consequences of reel validation can be addressed by exercising precautionary measures, hear-back techniques as well as creating awareness via Psychoeducation, Mindfulness & Self-Awareness Training, and Behavior Activation.

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Interpersonal sensitivity among young adults: The role of family emotional climate

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Interpersonal sensitivity reflects an individual's heightened responsiveness to the evaluations, emotions, and behaviors of others, and was often accompanied by self-critical thoughts and insecurity. This study examined how family emotional dynamics predicted interpersonal sensitivity in young adults. Specifically, it investigated perceived criticism, emotional involvement, and expressive suppression within the family as predictors of interpersonal sensitivity. A sample of 100 young adults aged (19-29) completed self-report scales measuring these family-emotion variables alongside a standardized interpersonal sensitivity measure. After scores were computed, both simple linear regressions (each family variable predicting interpersonal sensitivity individually) and a multiple regression model (with all predictors entered simultaneously) were conducted. In the simple regressions, higher levels of perceived criticism and emotional involvement were significantly associated with greater interpersonal sensitivity. In the multiple regression model, expressive suppression also emerged as a unique significant predictor, above and beyond criticism and involvement. The combined model accounted for a substantial portion of variance in interpersonal sensitivity. The findings suggested that the emotional climate of the family especially criticism, over-involvement, and suppression of emotional expression contributed meaningfully to young adults' interpersonal sensitivity.

Keywords: *perceived criticism; emotional involvement, interpersonal sensitivity; expressive suppression*

INTRODUCTION

Interpersonal sensitivity is a multidimensional psychological construct that refers to an individual's heightened awareness of, and responsiveness to, the behaviors, emotions, and evaluations of others (Boyce & Parker, 1989). It involves a tendency to perceive and react strongly to social cues, particularly those signaling criticism, rejection, or disapproval. Individuals high in interpersonal sensitivity often exhibit self-consciousness, anxiety, and excessive concern with how they are perceived in social contexts (Harb et al., 2002). While such sensitivity may facilitate empathy and social attunement, excessive levels can lead to interpersonal anxiety, low self-esteem, and increased vulnerability to depression and other affective disorders (Wilhelm et al., 2004).

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the prevailing emotional tone of the family system, including patterns of communication, affective expression, warmth, and conflict (Expressed Emotion model; Hooley & Parker, 2006). A positive emotional climate, characterized by emotional warmth, acceptance, and open communication, fosters adaptive emotional regulation and social competence (Eisenberg et al., 2005). Conversely, a negative emotional climate marked by criticism, over-involvement, or suppression of emotions may hinder the development of healthy interpersonal functioning and contribute to maladaptive social sensitivity (Kim et al., 2021).

One important dimension of the family emotional climate is perceived criticism, defined as an individual's subjective sense of being criticized, disapproved of, or judged by significant others, especially parents (Hooley & Teasdale, 1989). Research indicates that perceived criticism is not merely a reflection of actual negative comments but rather a stable cognitive-affective perception shaped by both family interactions and individual interpretation (Renshaw et al., 2011). High perceived criticism has been linked to heightened interpersonal vigilance, self-critical thinking, and increased emotional reactivity to evaluative feedback (Falkum et al., 2017). Individuals raised in highly critical family environments may internalize negative evaluations, leading to hypersensitivity in later relationships (Wang et al., 2020). It is said as a central component of family emotional climate, reflecting the extent to which individuals feel judged, faulted, or disapproved of by family members. Unlike objective criticism, perceived criticism emphasizes the individual's subjective interpretation of familial interactions, which can powerfully influence self-concept and emotional regulation. Repeated exposure to perceived criticism during formative years is associated with internalized negative self-evaluations, heightened vigilance to social evaluation, and a tendency to anticipate disapproval in interpersonal contexts. These experiences can contribute to the development of maladaptive interpersonal patterns, such as avoidance, excessive reassurance-seeking, or hypersensitivity to social feedback.

Another vital aspect is emotional involvement, which refers to the degree of emotional closeness, empathy, and engagement among family members (Leff & Vaughn, 1985). While appropriate emotional involvement can provide security and a sense of belonging, excessive involvement—or emotional enmeshment—can blur boundaries between family members, limiting autonomy and fostering dependency (Minuchin, 1974). Studies have found that over-involved family relationships may contribute to emotional over-identification and a tendency to internalize others' emotional states, thereby

heightening interpersonal sensitivity (Schneider & Younger, 1996). Young adults emerging from such family systems may struggle to differentiate their own emotional experiences from those of others, increasing vulnerability to relational stress and emotional exhaustion (Rabinowitz et al., 2019). It is degree of closeness, engagement, and entanglement among family members in each other's emotional lives. While healthy emotional involvement can foster a sense of belonging, security, and emotional support, excessive involvement—or emotional enmeshment—may impede the development of autonomy, self-efficacy, and emotional regulation. Young adults who have experienced over-involved family dynamics often demonstrate heightened interpersonal sensitivity, as they become highly attuned to the moods, expectations, and judgments of others. This hyper-attunement can lead to emotional overreactivity, difficulty establishing boundaries, and vulnerability to relational stressors outside the family. Expressive suppression, a form of emotion regulation, involves consciously inhibiting the outward display of internal emotional states (Gross & John, 2003). In family environments where open expression is discouraged or met with criticism, individuals may learn to suppress emotions as a defensive strategy to maintain harmony or avoid negative evaluation (Butler et al., 2007). However, chronic reliance on suppression is associated with reduced emotional clarity, increased physiological arousal, and impaired interpersonal functioning (John & Gross, 2004). Individuals who habitually suppress emotions may appear socially withdrawn or inauthentic, which paradoxically increases the likelihood of misunderstanding and interpersonal strain (Srivastava et al., 2009). Over time, this may reinforce patterns of interpersonal sensitivity and relational anxiety. It is an emotion regulation strategy characterized by the deliberate inhibition of emotional expression. In the context of critical or emotionally over-involved family environments, young adults may learn to suppress emotional reactions to avoid conflict, negative evaluation, or disapproval. While expressive suppression can serve as a short-term coping mechanism, chronic reliance on this strategy is associated with increased physiological stress, diminished emotional awareness, impaired social communication, and reinforced interpersonal sensitivity. Individuals who habitually suppress emotions may also experience reduced social support, as their internal states are less visible to others, potentially perpetuating cycles of social anxiety and relational insecurity.

The emotional patterns, coping mechanisms, and social schemas learned within the family environment continue to shape how young adults navigate interpersonal challenges (Allen et al., 2007). Thus,

examining the links between family emotional climate specifically perceived criticism and emotional involvement and the use of expressive suppression provides valuable insight into how these factors collectively influence interpersonal sensitivity during this critical stage of development.

In summary, interpersonal sensitivity in young adults can be understood as an outcome of complex family emotional processes. A family climate characterized by high perceived criticism and excessive emotional involvement may cultivate emotional suppression and social hyper vigilance, reinforcing patterns of interpersonal sensitivity. Exploring these relationships offers a theoretical foundation for understanding how family emotional dynamics contribute to psychological adjustment, emotional well-being, and relational functioning in emerging adulthood.

METHOD

Research Design: The present study employed a cross-sectional research design.

Sample: The sample of the study comprised 100 young adults, including both males and females, selected through purposive sampling. The inclusion criteria will consist of individuals aged between 19 and 29 years, those living with both parents, currently enrolled in colleges or universities, and not undergoing any psychotherapeutic interventions at the time of the study. The exclusion criteria will include individuals, who are employed, married, or pursuing education in a city or state different from their native place. Additionally, individuals with a history of major family disruptions, such as divorce, separation, or loss of a parent, will be excluded from the sample to maintain consistency in family background variables.

Measurement Tools:

1. Family Emotional Involvement and Criticism Scale (FEICS)

A self-report scale with 14 items divided into two subscales: Perceived Criticism and Emotional Involvement. It measures how much criticism one feels from family and how much emotional involvement (or over-involvement) one perceives in family relationships.

Responses are given on a Likert-type scale indicating how true each statement is for the respondent. It's used to gauge expressed emotion dynamics in families, often in studies linking family climate with psychological outcomes.

2. Self-Expressiveness in the Family Questionnaire (SEFQ)

A 40-item questionnaire measuring how frequently family members express positive and (separately) negative emotions. It uses a Likert-type scale to rate expressiveness (how often emotions are shown) in

day-to-day family interactions. The two main subscales are **Positive Expressiveness** and **Negative Expressiveness**. It is often used to understand the emotional climate of a family and how open or reserved emotional communication is.

3. Interpersonal Sensitivity Measure (IPSM)

A 36-item self-report questionnaire that evaluates how sensitive an individual is to others' feelings, judgments, or potential rejection. It includes subscales such as Interpersonal Awareness, Need for Approval, Separation Anxiety, Timidity, and Fragile Inner Self. Higher scores reflect greater vigilance to interpersonal cues and fear of evaluation or rejection. It's often used in studies of social anxiety, depression risk, or personality traits linked to relationship sensitivity.

RESULTS

Table 1: *Descriptive Statistics*

Variable	N	M	SD	Min–Max
Emotional Involvement	100	24.31	5.62	11–35
Perceived Criticism	100	20.23	3.91	13–30
Self-Expressiveness (+)	100	97.45	18.32	50–155
Self-Expressiveness (–)	100	105.67	12.45	90–146
Interpersonal Sensitivity	100	108.72	22.14	63–151

Note. *M* = Mean; *SD* = Standard Deviation; *Min–Max* = observed minimum–maximum scores.

Emotional Involvement's results show moderate family emotional interdependence (mean ≈ 24) and lower psychological control (mean ≈ 20). Self-Expressiveness scores indicate families express both positive and negative emotions frequently, with negative expressions slightly higher. IPSM scores vary widely (mean ≈ 109), suggesting participants differ greatly in interpersonal sensitivity, which may influence family's emotional dynamics.

Table 2: *Correlational Analysis showing Correlation between Independent Variable Interpersonal Sensitivity with dependent variable perceived criticism, emotional involvement, self-expressiveness.*

Variable					
Emotional Involvement	—				
Perceived Criticism	.42*	—			
Interpersonal Sensitivity	.28*	.52*	—		
Self-Expressiveness (+)	.22*	-.08	-.18	—	
Self-Expressiveness (–)	-.15	.58*	.38*	-.12	—

Note. $N = 100$. $*p < .05$. Correlations are Pearson's r ; only the lower triangle is presented.

The data suggests Interpersonal Sensitivity is a core driver, as it significantly predicts the dependent variables: it strongly correlates with Perceived Criticism (0.52*) and Self-Expressiveness(-) (0.38*). However, Self-Expressiveness(+) (-0.18), showing it specifically influences negative, not positive, relational outcomes. Emotional Involvement moderately relates to all, acting as a contextual bridge.

Table 3: Regression Analysis Predicting Interpersonal Sensitivity

Predictor Variable	B	SE B	β	t
(Constant)	12.45	3.12	—	-
Emotional Involvement	0.38	0.11	0.32	-
Perceived Criticism	0.52	0.13	0.41	-
Self-Expressiveness (-)	-0.29	0.10	-0.25	-

$R = 0.68$ $R^2 = 0.46$ Adjusted $R^2 = 0.44$ $F(3,96) = 27.21$ $p < .001$

The results of the regression analysis indicate that the overall model is statistically significant, $F(3, 96) = 27.21$, $p < .001$, suggesting that the set of predictors reliably explains variation in interpersonal sensitivity. The model accounts for 46% of the variance in interpersonal sensitivity ($R^2 = .46$), which reflects a moderately strong explanatory power. Among the predictors, perceived criticism emerged as the strongest positive predictor ($\beta = .41$), indicating that individuals who perceive higher levels of criticism tend to report greater interpersonal sensitivity. Emotional involvement also significantly and positively predicts interpersonal sensitivity ($\beta = .32$), suggesting that higher emotional engagement in relationships is associated with increased sensitivity. In contrast, self-expressiveness predicts interpersonal sensitivity ($\beta = -.25$), meaning that individuals who are more expressive tend to exhibit lower levels of interpersonal sensitivity. Overall, these findings highlight the important roles of perceived criticism self-expressiveness and emotional involvement in interpersonal sensitivity, while self-expressiveness appears to function as a protective factor.

Discussion:

The study offered an integrated analysis of questionnaire data collected from 100 participants to explore how emotional

expressivity, interpersonal sensitivity, family support, and perceptions of mattering interrelate within the target population.

The descriptive statistics indicate moderate levels of family emotional involvement ($M = 24.31$, $SD = 5.62$) and perceived criticism ($M = 20.23$, $SD = 3.91$) among young adults, suggesting that participants generally experienced emotionally engaged family environments with a noticeable degree of evaluative pressure. Scores for positive self-expressiveness ($M = 97.45$, $SD = 18.32$) and negative self-expressiveness ($M = 105.67$, $SD = 12.45$) were both relatively high, with negative expressiveness exceeding positive expressiveness, indicating emotionally active families where negative emotional communication may be more frequent. Interpersonal sensitivity showed substantial variability ($M = 108.72$, $SD = 22.14$; range = 88), reflecting pronounced individual differences in sensitivity to social evaluation. This wide dispersion highlights interpersonal sensitivity as a psychologically salient variable shaped by diverse emotional experiences within the family system.

The correlation matrix reveals interpersonal sensitivity as a central construct interconnected with multiple family emotional variables. Interpersonal sensitivity demonstrated a strong positive correlation with perceived criticism ($r = 0.52$, $p < .05$), indicating that individuals with higher sensitivity are significantly more likely to interpret family interactions as critical. A moderate positive correlation was also observed between interpersonal sensitivity and negative self-expressiveness ($r = 0.38$, $p < .05$), suggesting that emotionally negative family environments are associated with heightened interpersonal vigilance. Emotional involvement correlated moderately with both perceived criticism ($r = 0.42$, $p < .05$) and interpersonal sensitivity ($r = 0.28$, $p < .05$), implying that emotionally enmeshed family contexts may amplify evaluative awareness. In contrast, the weak negative association between interpersonal sensitivity and positive expressiveness ($r = -0.18$) suggests that supportive emotional communication plays a limited protective role against heightened sensitivity.

The present regression findings suggest that interpersonal sensitivity is meaningfully shaped by relational and emotional dynamics. The model explained a substantial proportion of variance (46%), indicating that perceived criticism, emotional involvement, and self-expressiveness together play an important role in understanding interpersonal sensitivity. Perceived criticism emerged as the strongest predictor, implying that individuals who frequently interpret interactions as critical may become more vigilant, self-conscious, or reactive in social contexts. Emotional involvement also showed a significant positive association, suggesting that greater emotional investment in relationships may heighten sensitivity to interpersonal

cues. In contrast, self-expressiveness demonstrated a negative relationship, indicating that individuals who are more open and expressive may experience lower interpersonal sensitivity, possibly because expression facilitates emotional regulation.

Conclusion:

Based on the study's results, interpersonal sensitivity emerged as a central psychological characteristic, significantly shaped by a complex interplay of familial dynamics and personal emotional tendencies. The findings suggest that while a supportive family environment contributes to this sensitivity, it is likely that more negative familial factors like perceived criticism and excessive emotional involvement also play a foundational role by fostering a heightened vigilance to the emotions and evaluations of others. Furthermore, regression analyses confirmed that interpersonal sensitivity is not only predicted by family support but also uniquely and more strongly predicted by an individual's own tendency for emotional expressivity. This indicates that the propensity to be attuned to others is fueled not just by family context, but also by a personal capacity for self-expression, which may itself be either encouraged or suppressed by the same family climate. Ultimately, this heightened attunement is strongly linked to a greater sense of social significance, suggesting that interpersonal sensitivity connects the early experiences of family criticism, involvement, and emotional expression to the fundamental adult need to feel that one matters.

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