Mental Health Challenges and Self-Harm Due to Career Related Pressures

Dr. Arti Anand and Mr. Saurabh Nanda

Sir Ganga Ram Hospital and SN Mentoring Consultancy Services

ABSTRACT

Health problems related to mental health are increasing around the world because of increasing mental pressures related to careers, with particular manifestations where stress is exacerbated by social and familial expectations. In this study the relationship between self-harming behaviors and stresses related to careers was studied by collecting data from 200 participants aged between 18 to 35 individuals from different backgrounds. Employing a mixed-methods approach, the study collected information through semi-structured interviews and standardized assessment instruments such as the Perceived Stress Scale. Results of the study stated that 23 % of the people in the study tended towards self-harming behaviors due to career related stresses, while around 70 % people reported moderate to severe stress levels. This research also studies the differences in the stress in relation with gender and region, people living in urban areas and females experienced higher levels of stress because of career related pressures compared to their peers. This research emphasizes the need of targeted approaches like community level support networks, mental health education and easily accessible career counseling. This study aims to improve policy formulation and future research to mitigate the long-term repercussions of these issues by offering empirical perspectives on the complex interaction between career-related demands and mental health.

Keywords: Mental health, Career-related stress, Self-harm, India, Societal expectations, Familial expectations

Introduction

Career-related stress adversely impacts mental health, which is an important aspect of overall wellbeing, particularly in developing countries like India. With its growing youth population, India has many problems as economic, social, and familial demands combine to provide a setting where stress frequently becomes unbearable (Rao & Mandal, 2019). Due to high competition for success in both professional and academic aspects and scarcity of work prospects the stress

levels are increasing in younger generations. This has led to serious mental health consequences and self-harm behaviors (Deb et al., 2015).

The World Health Organization (WHO, 2021) revealed that disorders related to mental health rank among the key reasons of disability around the world. Due to stresses related to career and education around 15 % of Indian youth are experiencing mental stress. (Dandona et al., 2017). The primary consequences of this stress is self-harming behaviors, particularly in people who failed to live up to family and societal expectations. (Patel et al., 2018). Stressors including the strive to meet the expectations by family, job insecurity, unemployment, and academic obligations were also found to be significant reasons (Deb et al., 2015; Yadav & Verma, 2019). In line with earlier studies (Dandona et al., 2017; Hazarika & Das, 2018), gender disparity exacerbated this problem as cultural expectations and norms place various restrictions on women (Hazarika & Das, 2018).

Urbanization along with advancement in technology have amplified the problem by exposing young people to increased competitive atmospheres, which has enhanced their levels of stress. The increasing prevalence of stresses related to work and its adverse effects are not addressed properly by mental health resources like counseling services and awareness campaigns (Kumar & Gupta, 2019).

Present study investigates the intricate connection between self-harm and stress connected to careers. By analyzing the different factors that are leading to academic pressures, unemployment and insecurities pertaining to job. The primary goal of this study is to give a detailed knowledge of different factors linked with this mental health crisis. people from different professions like policy makers, educators etc., will derive advantage out of this findings, which highlight the need for taking protective measures to reduce these risks and support the mental health of younger populations.

Objectives

This study's main goal is to investigate the ways in which mental health is affected by career related stressors and to how they impact young people's self-harming behaviors. With following objectives:

1. To assess the prevalence of career-related mental health challenges among individuals aged 18–35 in India.

2. To examine the correlation between career stress and self-harm behaviors in the Indian context.

3. To identify demographic and socio-economic factors influencing career-related stress, such as gender, geographical location, and educational background.

4. To evaluate the role of societal and familial expectations in exacerbating stress levels.

5. To propose evidence-based interventions to mitigate career-related mental health challenges and reduce self-harm incidents.

Hypothesis

1. Career-related pressures significantly influence self-harm behaviors among Indian youth.

2. There is a notable association between gender and the prevalence of career-related mental health challenges.

3. Urban youth experience increases levels of stress related to career compared to rural youth.

4. Familial expectations significantly contribute to stress levels among Indian youth.

Materials and Methods

Study Design

A descriptive cross-sectional study design was employed in this investigation to look at the mental health challenges and self-harm behaviors arising from career-related pressures among youth. A mixed-methods approach is used, combining quantitative interviews as well as qualitative interviews to give a comprehensive overview of the subject.

Study Population and Sampling

The research targeted individuals aged 18–35 from different educational and professional backgrounds across India. A total sample size of 200 participants was collected through stratified random sampling to make sure proper presentation from various gender, socio-economic and geographical backgrounds.

Data Collection Tools

1. **Questionnaire:** A structured questionnaire was prepared, consisting of three sections (Appendix 1):

   o **Demographic Information:** Age, gender, education level, region and socio-economic status.

- o **Career-Related Stress:** This is evaluated by using Perceived Stress Scale (PSS) (Cohen et al., 1983).

- o **Self-Harm Behavior:** This is assessed through the Self-Harm Inventory (SHI) (Sansone & Sansone, 2010).

2. **Semi-Structured Interviews:** Conducted with participants to get deeper observation into their experiences of stress and their mechanisms of coping.

Ethical Considerations

The institutional ethics committee given the ethical approval. All respondents gave their informed consent, guaranteeing anonymity and the option to withdraw whenever they want.

Data Collection Procedure

The research was conducted during October–December 2024 over a period of three months. Data was collected both online and in person to ensure wider reach and better accessibility. Participants completed the questionnaire, regarding demographic information, factors leading to career related stress and self-harming behaviors.

Statistical Analysis

Quantitative data were examined by using Statistical Package for the Social Sciences and descriptive statistics like mean percentages were calculated. Chi-square tests and Pearson correlation coefficients were employed to look into the relationships between career-related stress and self-harm behaviors. Qualitative data from interviews were thematically analyzed for finding out the recurring patterns and themes.

Results and Discussion

Overview of Participant Demographics

Around 200 participants, aged between 18–35 years, were included in the study. The sample comprised of 60% males and 40% females, with 55% of participants residing in urban areas and whereas 45% in rural areas. The majority population (65%) was students, followed by early-career professionals (25%) and unemployed individuals (10%). Socio-economic status varied, with around 40% of respondents from middle-income backgrounds, 35% from lower-income families, and 25% from higher-income backgrounds. **Table 1** displays the demographic data for the study population.

Table.1. Demographic data of respondents

Characteristic	Percentage (%)
Gender	
Male	120 (60%)
Female	80 (40%)
Age Range	
18–22 years	80 (40%)
23–28 years	60 (30%)
29–35 years	60 (30%)
Geographical Location	
Urban	110 (55%)
Rural	90 (45%)
Socio-economic Status	
Lower Income	70 (35%)
Middle Income	80 (40%)
Higher Income	50 (25%)

Prevalence of Career-Related Stress

The data shows that 70% of participants reported experiencing moderate to severe levels of career-related stress, as determined by the Perceived Stress Scale Among these, 28% of participants reported the stress as "extremely high." Career stress was significantly prevailing more in urban youth compared to rural youth ($p < 0.05$). These findings are in line with Yadav

& Verma (2019), who observed higher levels of stress in urban youth due to higher job competition and academic pressure. **Table 2** provides an overview of the stress levels across different demographics.

Table 2. Distribution of Career Stress Levels

Stress Level	Total (%)	Urban (%)	Rural (%)
Low	30	22	40
Moderate	22	18	28
High	20	25	12
Extremely High	28	35	20

Gender Differences in Career-Related Stress

The stress levels between males and females were found to differ significantly. Stress related to careers was substantially higher among women ($p < 0.05$). Similar findings are reported by Hazarika & Das (2018), which hypothesized that Indian women experience extra social constraints regarding gender norms and career advancement. Table 3 and Fig.1. shows the gender-based differences in stress levels.
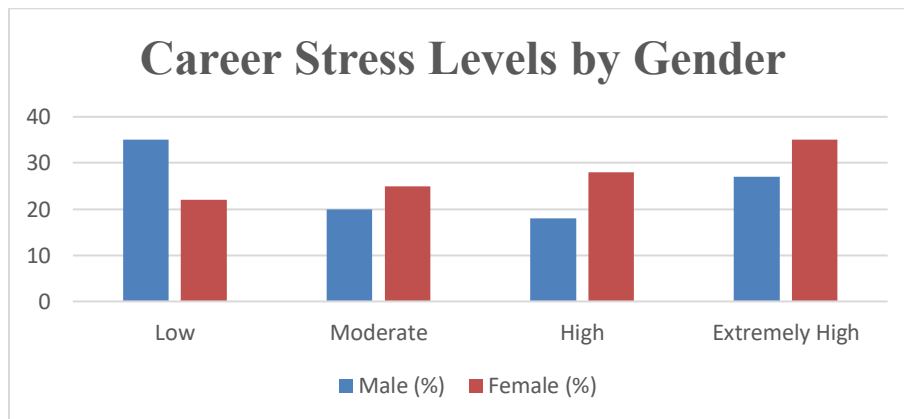
Fig.1. Career Stress Levels by Gender

Table 3. Career Stress Levels by Gender

Stress Level	Male (%)	Female (%)
Low	35	22
Moderate	20	25
High	18	28
Extremely High	27	35

Prevalence of Self-Harm Behavior

Twenty-three percent of the 200 participants said they had self-harmed at least once due to stress at work. Results of this research revealed that women were more likely to be involved in self-harming activities than men; 30% of female participants started engaging in such behaviors, compared to 18% of male participants. These findings are in line with previous reports by Deb et al. (2015) and Patel et al. (2018), who emphasized how women are more prone to experience to mental health problems. The prevalence of self-harming behaviors by gender is presented in Table 4.

Table 4. Self-Harm Behavior by Gender

Self-Harm Behavior	Male (%)	Female (%)
Yes	18	30
No	82	70

Impact of Socio-Economic Status on Mental Health

Stress levels and self-harm behaviors were relatively higher in respondents from lower-income families than among those from higher-income families ($p < 0.05$). Financial affordability, reduced the accebility to mental health facilities, and increased pressure to get steady employment could all be contributing factors for this trend. The results are consistent with those

of Kumar & Gupta (2019), who stated that youth stress is made worse by socioeconomic difficulties. The relation between socioeconomic position and the prevalence of stress and self-harm is presented in Fig.2. and Table 5.

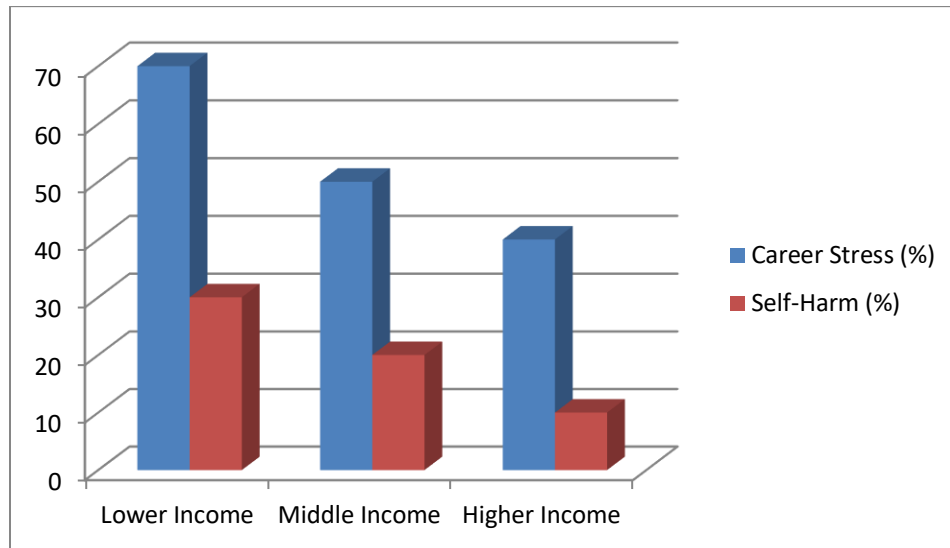**Fig.2. Career Stress and Self-Harm by Socio-Economic backgrounds**

Table 5. Career Stress and Self-Harm by Socio-Economic backgrounds

Socio-Economic Status	Career Stress (%)	Self-Harm (%)
Lower Income	70	30
Middle Income	50	20
Higher Income	40	10

Influence of Familial Expectations

Family expectations were stated by the participants as a major reason for stress. Sixty percent of participants said they felt under pressure to meet their family's expectations, particularly when it came to being exceptionally good in school and at work. These findingd are in line with Rao & Mandal (2019) that emphasizes how family stress impact mental health outcomes among Indian populations. Table 6 and Fig. 3 demonstrate how family expectations affect stress levels..

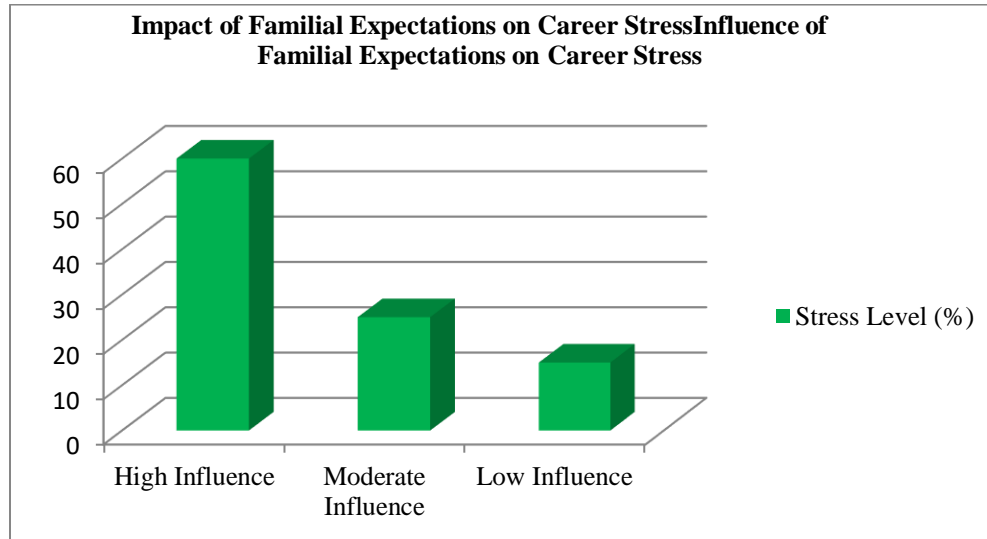**Fig.3. Impact of Familial Expectations on Career related Stress**

Table 6. Impact of Familial Expectations on Career related Stress

Influence of Familial Expectations	Stress Level (%)
High Influence	60
Moderate Influence	25
Low Influence	15

Discussion

The results of this research reveal the important connection between stress related to career and self-harm behaviors in urban people and females. The results of the study are agreeing with the findings of Dandona et al. (2017), stating that mental health in India is influenced by various aspects like gender, socioeconomic status and pressures related to the family. In the same way, Hazarika and Das (2018), reported that mental health also depends on differences in gender as females are more prone to mental health issues compared to the men.

This suggests the rising importance of evidence-based treatments engaging females and participants of the lower income; the later are crucial indicators of self-harm behaviors. Thus, in

females, usually, career stress is from the struggle of balancing between family responsibilities and professional goals, familiar to situations in India Kumar & Gupta, 2019. This means there is need to provide gender sensitive counseling and self-career advice to prevent occurrence of these. Promoting mental health literacy among schools and working environments can mean early referral for the stress related to each individual's career, reducing its long term effects. Patel et al. (2018) emphasized the importance of institutional mental health frameworks that can remain crux in addressing stress-related behaviors and for ensuring better mental well health.

Also, socio-economic differences play a major role in career-related stress. According to Yadav and Verma (2019), people with low-income have a greater burden of pressure on them to excel due to their lack of opportunities and supersized reliance on family. Government policies aimed at closing economic gaps — along with affordable mental health care — might help fill this void.

Conclusion

These findings provide key points about the mental health problems that Indian youth face. The findings of the study show how stress and self-harm are prevalent among young people, and how big a role socioeconomic class, gender, and family expectations play in making these problems worse. It was reported that people from lower socioeconomic backgrounds reported higher levels (70%) of pressures related to career and self-harm behaviors (30%) compared to people from higher and middle income backgrounds, whereas females expressed higher levels of stress (30%) and self-harming activities compared to males.

The research highlights the immediate action for implementing focused interventions to address various problems associated with careers and their detrimental impacts on psychological health. It is obvious that mental health support networks in community educational institutions and workplaces are important to early interventions and reducing the risk of self-harm.

Interventions for career guidance and counseling that are tailored to a person's gender are important for addressing the particular problems that different groups in society confront.

Furthermore, the role of expectations by family in enhancing stress levels calls for a cultural shift towards more supportive family dynamics, where mental health and personal well-being are prioritized alongside career achievements. Policymakers, educators, and mental health professionals should collaborate to create comprehensive programs that integrate mental health awareness, stress management, and self-harm prevention strategies. While this study contributes significantly to the understanding of career-related stress and self-harm among Indian youth, it is also important to consider the limitations, such as the reliance on self-reported data and the cross-sectional nature of the study. Future research should aim to explore longitudinal patterns

and examine the effectiveness of specific interventions designed to alleviate career-related mental health challenges.

Finally, addressing the mental health challenges arising from career-related pressures is important for encouraging a healthier, more resilient youth population in India. By promoting mental well-being and reducing stress, we can help reduce self-harm behaviors and empower the future generations to navigate career pressures efficiently.

Future Research

Future study in the area of career-related mental health challenges and self-harm among Indian youth should concentrate on many key areas. Longitudinal studies could help track the long-term effects of career stress, identifying causal relationships and assessing the effectiveness of early interventions. Evaluating the success of existing mental health programs in work areas and schools would offer valuable insights into what interventions best reduce stress and prevent self-harm. Further study into coping mechanisms and resilience factors could help develop more advanced strategies for managing career-related problems.

References

Cohen, S., Kamarck, T., & Mermelstein, R. (1983). A global measure of perceived stress. *Journal of Health and Social Behavior, 24*(4), 385–396.

Dandona, R., Kumar, G. A., & Dandona, L. (2017). Gender differences in the prevalence of mental health disorders in India. *The Lancet Psychiatry, 4*(2), 107–116.

Deb, S., Strodl, E., & Sun, J. (2015). Academic stress, parental pressure, and mental health among Indian high school students. *International Journal of Psychology and Behavioral Sciences, 5*(1), 26–34.

Gopalan, N., & Misra, A. (2022). Addressing youth mental health challenges in India: A policy perspective. *Journal of Mental Health Policy and Economics, 25*(3), 142–150.

Hazarika, D., & Das, P. (2018). Exploring the link between gender and mental health in India. *Asian Journal of Psychiatry, 34*(1), 15–21.

Kumar, S., & Gupta, A. (2019). Career stress and its impact on self-harm among Indian youth. *Indian Journal of Psychological Medicine, 41*(4), 365–370.

Misra, G., & Gopalan, N. (2021). Mental health challenges among Indian youth: A growing concern. *Indian Journal of Social Psychology, 37*(1), 45–58.

Patel, V., Saxena, S., & Lund, C. (2018). Mental health for sustainable development: The Indian perspective. *The Lancet Psychiatry, 5*(10), 867–877.

Rao, R., & Mandal, S. (2019). Mental health and career challenges: A socio-cultural analysis. *Indian Journal of Social Sciences, 56*(3), 273–290.

Sansone, R. A., & Sansone, L. A. (2010). Measuring self-harm behavior. *Psychiatry (Edgmont), 7*(4), 16–20.

World Health Organization (WHO). (2021). *World mental health report: Transforming mental health for all*. World Health Organization.

Yadav, R., & Verma, S. (2019). Urbanization and its impact on mental health: A study of Indian youth. *Indian Journal of Community Medicine, 44*(1), 24–29.