# UNDERSTANDING THE SURGE OF MENTAL AND PSYCHOLOGICAL DISORDERS AMONG TODAY'S YOUTH, SPECIFICALLY ANXIETY AND SUBSTANCE ADDICTION: A COMPREHENSIVE LITERATURE REVIEW

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Theme of the Article: Mental Health





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#### Bio

Dr. Rituu Guptaa, born and raised in the scenic valleys of Dehradun, India, is a passionate advocate for justice and empowerment. With a career spanning over 25 years as a clinical psychologist and counsellor, she has been a guiding light for many in overcoming life's challenges. Rituu believes the firmly in inherent resilience and strength within each individual, empowering her clients to navigate through adversity with courage and determination. She epitomizes the adage "Be the change you want to see," inspiring others to tap into their inner resources and embark on a journey of self-discovery and transformation.

### Bio

Uddayvir Singh is a dedicated student with a clear ambition to pursue a career in medicine. Currently, he is rigorously studying a diverse range of subjects including Chemistry, Biology, Physics, Psychology, and Mathematics, laying a robust foundation for his future medical studies. His academic journey began with a strong performance in his I/GCSEs, where he developed a keen interest in the sciences and an understanding of the intricate workings of the human body. With a passion for learning and a commitment to excellence, Uddayvir is keen to make significant contributions to the field of medicine in the future.

### **Objectives**

Understand the growing issues of anxiety and substance addiction among today's youth. Examines the impact of these problems on young lives, it underscores the urgency of addressing them. Reviews current prevention and intervention methods to provide a clear understanding of how to support youth struggling with these issues.

### **Abstract**

The prevalence of mental and psychological disorders among younger generations has significantly increased in recent years, raising critical public health concerns. This literature review examines the factors contributing to this rise and explores various disorders affecting today's youth. Using a systematic search and analysis articles scholarly from databases such as PubMed. Google PsycINFO, and Scholar, the review identifies studies on prevalence, correlation, and determinants of depression. anxiety, substance addiction, among adolescents young adults, with a specific focus anxiety on and substance addiction.

critical appraisal framework evaluates the methodological rigor and quality of included studies, ensuring reliable and valid findings. By synthesising current research, the review elucidates the complex of interplay genetic. environmental, social, and cultural factors influencing the mental health landscape of younger generations.

This understanding essential for developing targeted interventions and promoting resilience among youth facing mental health challenges. The review also highlights the impact technology, social media. academic pressures, family dynamics. and socioeconomic disparities on mental health outcomes. By critically evaluating existing literature, the review offers insights into potential research avenues and underscores the need for evidencecomprehensive. based approaches to address the growing crisis of mental health disorders among younger populations.

### Keywords

Mental Health, Adolescents, Anxiety, Depression, Addiction

### Introduction

Many studies have reported an increase of anxiety-related symptoms within the past decade, but the exact prevalence remains unknown. Anxiety disorders are complex and often under-diagnosed because

they can manifest a variety of physical and psychological symptoms (Back, Waldrop, & Brady. 2010). Anxiety commonly identified as sense  $\circ$ f dread or apprehension, which is often accompanied by physical complaints such headache. stomach-ache. muscle tension, shortness of breath. shakiness. and dizziness. Sudden and intense anxiety for no apparent reason is referred to as a panic attack (Marks, not 1987). Though threatening. anxiety disorders often impair functioning and quality of life. It is a main contributor to mental health diagnoses and can often be an offshoot or additional precursor to psychiatric disorders such as depression or further anxiety conditions. The social and pressures academic on today's youth, in addition to an uncertain economic and political climate also contributing to loss of identity. have been presumed as an attributing factor to anxiety prevalence (Baumeister & Muraven. 1996) (Baumeister Muraven, 1996). These factors are expected to increase competition in the market and thus increase the requirements for higher.

education and standard of living. This, in turn, brings higher expectations upon our youth and a scarce job market for unskilled workers The recent shift towards a global community has proposed increased opportunities for travel and a wider and more competitive job market on a world scale. This has created a mindset of necessity for today's youth to achieve and be successful on an international platform. Failure to meet those more riaid standards could contribute to a sense of inadequacy and additional pressures high in causative factors for anxiety conditions.

With the steady dominance of mental and psychological disorders among today's youth, researchers aim to decipher the primary catalysts and aid pathways to potential solutions. A media storm of technological

advancements. social networking. and added pressures such as academic financial targets and uncertainties have all played a supportive role in the accelerated prevalence of mental disorders within the millennial postand millennial generations. Anxiety and substance

addiction are the primary focus due to noting the substantial rise of diagnoses within these specific areas and the dire negative implications they pose to a person's mental health and future outcomes. This research study will seek to comprehensively

understand the surge of mental and psychological disorders among today's youth, specifically anxiety and substance addiction. By synthesising quantitative and qualitative data over a multi-disciplinary arena, we identify the hope to causative factors that have contributed to the escalation of these conditions, attempt to quantify the severity of these issues, and explore potential preventative and intervention measures.

#### Aim

This literature review aims to understand and discuss the following:

·Growing issues of anxiety and substance addiction among today's youth.

Examines the impact of these problems on young lives, it underscores the urgency of addressing them. Reviews current prevention and intervention methods to provide a clear understanding of how to support youth struggling with these issues.

### Methodology

This review examined literature on the rise and causation of mental and psychological disorders among todav's vouth. focusing on anxiety and substance addiction. Despite the increasing number of studies on the prevalence of these disorders. understanding why this increase is occurring remains crucial. Bv identifyina the causes. prevention strategies can be developed to avoid a lifetime of copina. The review included literature from journals and various youth samples, ranging from clinical populations to college students. Although the severity of anxiety and some substance disorders varied, the issue is relevant to all youth, especially those facing the stresses of higher education. The review explored the various causes and issues surrounding diagnosable anxiety disorders, noting similarities addiction to substance issues.

### Results and Discussion

In the National Health Interview Survey, 6.8% of Americans (about 17 million people) had at least one depressive episode in the year prior to being surveyed. Of these, 80% reported some  $\circ f$ functional level impairment in doing work. school, or housework, or in their interpersonal relationships. In the United States, the leading cause of dropout in high schools is depression related (Rones & Hoagwood, 2001). Figures for other anxiety disorders are not easy to split from figures for behaviour disorders, but one UK study found that 3.3% of children aged 4-16 an anxiety disorder had (Ford, Goodman, & Meltzer, 2003). In Australian an survey, it was found that 14.4% of 4-17-year-olds, and 21% of 18-24-year-olds were assessed as having either a "high" or "very high" level of psychological distress (based on K-10 scores) (AIHW, 2021). In twelve months prior to the survey, 7.7% or around 300,000 young Australians had experienced an anxiety disorder, while the rate of affective disorders for the

same period was 5.1%. With the growing realisation of the seriousness of anxiety disorders and their grave life outcomes on impairment, it is important that they are not ignored in research and elgoeg continue to trv to understand them. Figure 1 illustrates Psychological Distress Levels Among 11-17 Year Olds, Categorised by Age Group and Gender, 2013-14. An understanding of this needed persuade to funding bodies to support further research into anxiety disorders. High prevalence rates and serious outcomes vounger people potentially affect the future productivity of youths and have implications for future generations.

# 3.1 The Interplay Between Anxiety and Substance Addiction

The enhanced predisposition of those with anxiety toward consuming addictive substances is well documented. Anxiety was positively associated with a wide range of lifetime substance use:

ten of the eleven substances studied (cannabis, inhalants, cocaine. hallucinogens, heroin, ecstasy, prescription medications. alcohol. nicotine) showed positive associations with anxietv (Conrod, Castellanos-Ryan, & Mackie, 2011) Though among specific anxiety disorders, only social anxiety has been consistently associated with substance use and abuse. the data is more robust for alcohol especially abuse, male subjects. A among possible explanation is that those with social anxiety utilise alcohol to ameliorate the negative emotions associated with the disorder (Vasey, 1995).

There are functional ramifications of the relationship between anxiety disorders and substance abuse. Following exposure to anxiogenic stress, individuals with anxiety disorders have been shown to be more vulnerable to developing an abused addiction to an substance. The seeking of intoxication and subsequent chronic abuse of a substance can be seen as a method of self-medication to reduce affect and the negative suffering emotional associated with the anxiety disorder (Cisler. Olatunii. Feldner, & Forsyth, 2009).

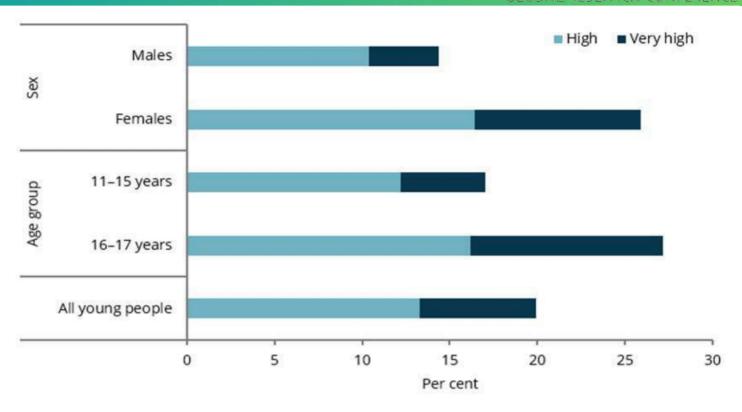


Figure 1. (AIHW, 2021)

The acute intake of an abused substance has an immediate effect on the brain and neurotransmissions, potentially causing a rapid psychological shift from negative affect to relief. This shift can serve as positive reinforcement for continued substance use and in the gradual formation of an addiction. High comorbidity rates are seen in the more anxiety disorders. severe of the with ten eleven substances studied (cannabis, inhalants, cocaine, hallucinogens, heroin, prescription ecstasy. medications. alcohol, and nicotine) showed positive

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reinforcement for continued substance use and in the gradual formation of an addiction. High comorbidity rates are seen in the more anxiety disorders. severe with addicts making up as much as 20% of those with social anxiety disorder and disorder. This panic represents a near doubling the odds of being addicted to alcohol and a 4-5-fold increase in the odds of addiction to another drug. Time constraints and participants means having the presented literature has been focused on adults, and it is important to consider further the link between anxiety disorders and substance abuse in adolescents. Numerous studies have found strong associations between psychiatric conditions, both treated and untreated, and subsequent academic achievement (Rones Hoagwood, 2001).

A British birth cohort study found that parental report of 'emotional disturbance' at age 16 was associated with reduced occupational attainment at age 26. Those who met criteria for depression at ages 15 and 16 in another study were found to have lower grade point averages, educational

attainment. and occupational functioning ten years later, as compared with non-depressed their counterparts. Although it is difficult to dissociate the effects of comorbidity. substance abuse, medication. and the underlying disorder itself. the clear impact on educational functioning is compelling (Fergusson Lynskey, 1998).

### 3.2 Treatment Approaches and Modalities

Treatment types in general practice the recommended approach for choosing the right treatment for each specific problem should involve considering recent While advancements. primary care is typically sufficient for managing mental health issues young individuals, it may not always be the ideal option. Psychological therapies can be administered in primary care, but specialists may be required to provide more assistance specialised guidance. When selecting the most suitable form of treatment, factors such as the problem's severity.

persistence. associated functional impairment, and the specific preferences of the child or young individual and their family should be taken into account. It is crucial to recognise that early intervention at the least severe level is often the most effective approach in addressing most mental health problems.

### 3.3 Cognitive-Behavioural Therapy (CBT)

The focus in CBT is to redefine irrational beliefs that may lead to emotionally distressing events, series of teaching a client to monitor and identify their thoughts and attitudes. With CBT, the patient is thought to be equipped to alter those thoughts and this, in turn, will change their reaction to those events (Jones & Pulos, 1993). Once the patient has mastered the reconstruction of events to outcomes that relieve emotional can distress. a clear plan of gradual exposure to the distressing events can now be tackled with a defined cognitive and behavioural formula that will not cause distress (David &

Szentagotai, 2006). This is a process that can be seen in the treatment of anxiety disorders where people will often avoid certain situations and events and thereby deny themselves the opportunity to alter an outcome to less distressing or treat a fear which in reality is not threatening. The end treatment with CBT is always termination with a conscious use of the coping methods learned by the patient and with a reinforcement of the new methods as a way of life. Szasz, 1960 and Scheff, 1966, and many other sociologists of the labelling theory within mental illness, have had a pivotal view in the criticism of psychological treatments (Krohn, Lizotte, & Hall, 2009). have researchable Thev evidence that shows the process of how a patient of a mental illness beina subjected certain to а medical therapy or treatment is. in fact. conforming to the label of their illness and in many getting worse cases prolonging the illness. This is due to the social construction of the label: the patient is stigmatised to being who has a mental illness and the only way they can escape the label is to consider themselves as

cured and that the treatment failed to remove the irrational belief that led to the distressing events. This view of CBT can be seen as somewhat positive, in the case that there is the variability for individual or group therapy and that the treatment is а focused attempt at changing specific symptoms. The different techniques and methods used in CBT show that it is a viable treatment option for common mental many disorders and its direct and problem-based approach make it favourable in the medical community in today's age.

### 3.4 Medication Management

anxiety particular, In medications play a role in self-medication the anxiety conditions. A recent study with over 1000 college students showed that 9 out of 10 of these individuals sought out various medications, both legal and illegal, to get them through problems. their anxiety Hence, the opportunity for a student to abuse anxiety medications is very high. Tolerance can develop for

anxiety medications, causing an individual to need more and more of this drug to calm down. There are various types of medications used to treat anxiety. Acute treatment for anxiety usually a prescription for a benzodiazepine. of Benzodiazepines are a class compounds that of are widely for the used treatment of anxiety and insomnia. These types of medications are known to be effective and fast-acting for relief of anxiety symptoms; however, the long-term use of these medications is not recommended and can be habit-forming. Long-term medications maintenance include certain SSRIs and buspirone, which are safer compared benzodiazepines and do not induce a dependency. Betablockers are also used on an as-needed basis for control of performance anxiety. Any of these medications should be utilised while combined with psychotherapy for the best effectiveness and longterm results.

### 3.5 Holistic and Alternative Therapies

Holistic treatment looks at the situation as a whole and decide what tries to elements of life are causing individual distress. the Alternative treatments may include activities such as yoga, Tai Chi, or meditation. It is possible that alternative treatment may be mixed with herbal medicine, for example taking herbal supplements to relieve anxiety symptoms. Yoga and meditation have been scientifically proven to decrease anxiety and stress levels. Tai Chi has the same effect, although it is not as researched: well recent studies have proven that herbal supplements are just as effective as prescription medication. and patients view them more positively. Many patients never return to herbal medicine once they have been prescribed psychiatric drugs, and it is likely that there are differences in people seeking herbal treatments prescription drugs. and Mixing the two treatments is ill-advised and it can be dangerous, patients should seek advice from an herbal practitioner or homeopathic doctor, who is likely to be about mixina alternative and prescription remedies. Engaging in

physical exercise increases the serotonin in the brain, which leads to improved mood and decreased anxiety. This mav anything from going for a run, to taking a dog for a walk in the park. There are a vast number of activities which people can undertake to increase their fitness, and it is up to the individual to find something that they will enjoy and will maintain. The exercise recommended to combat anxiety would be that which gets the heart pumping, as this is what is required increase to serotonin. Nutrition is also important, and maintaining a healthy diet will improve individual's an general health and resistance to illness. Step one is avoiding junk food, which is high in sugar and fat. High levels of sugar cause hyperactivity and elation due to increased blood sugar, however this is followed by fatique depression when it drops. A good diet does not simply mean not eating bad food, and it is important that people eat sufficient amounts of good, nutritious food. It may involve some research and many people are unaware of the nutrients that they are supposed to be taking. It may be necessary

to see professional nutritionist who can advise on meal plans and diets; this is a long-term investment which will lead to improved mood. self-esteem, and confidence. The overall effect of alternative therapies is a positive one. successfully removing an anxiety sufferer from their problem. At this stage a person would no longer be classified as mentally ill and would have achieved a high level of mental health. This is different to the aim removing a person from severe depression to a state of nothingness, and it is difficult to weigh up the cost efficiency of the two as the effect of removina depression is an increased suicide risk.

### 3.6 Support Groups and Peer Counselling

An effective intervention for mental health vouth support groups that focus on social skill building and selfactivities. esteem These normalise help aroups experiences, as shown in an anxiety study where clients felt relief discovering others shared similar issues (Durlak & Wells, 1997).

The social context of groups can harness peer pressure positively. According Bandura's social learning theory, youth learn coping behaviours by modelling others (Koutroubas 2022). Galanakis. Support groups provide a setting that teaches healthy coping habits, especially beneficial for socially anxious youth. They offer exposure therapy and help generalise coping through homework tasks. While group CBT can treat adolescent depression, research favours individual therapy for severe cases, selfharm. and complex depression, as recommended **NICE** bv *auidelines* (NICE. 2022). Despite accessibility their cost-effectiveness. and research on support groups youth anxiety depression is limited, even though they are effective for adults (Gibbons, et al., 2010). Prioritising the development and research of group-based interventions is essential for improving youth mental health.

# 3.7 Future Directions and Research Implications

Results have highlighted an increase in youth mental health problems and drug use as a temporary escape. focused Explanations adolescent experiences, and while predictions were not tested within problem behaviour theory. future research could validate these hypotheses. Reassessing future generations' mental health will be crucial. Today's benefit from vouth technological advancements. with new media and computers developed standard in countries. Technology has educational benefits, but its impact on mental health is mixed, potentially leading to issues like internet addiction. Conversely, technology can aid in prevention through

Longitudinal studies following current youth to evaluate these theories would valuable. be The overlap between mental health and drug abuse, such self-medication depressed adolescents using prescribed antidepressants, suggests these fields may merge. It's not a question of whether vouth face problems but what will come next. Anxiety disorders often lead to other issues, including depression.

educational resources.

Understanding these sequences in adolescence requires ongoing research and integration with existing explanations.

## 3.8 Identifying Protective Factors and Resilience

Other than targeting the risk identifying, factors, and building on the protective factors and resilience of the youth is also an important means of preventing youth mental disorders. Protective factors are influences that reduce the impact of early stressful life events and act a shield against the as progression from stress to mental disorder. It was found in a cross-sectional study in Victoria, Australia that the common protective factors amongst young people with high levels of mental wellbeing the were possession of good life skills (including social, personal, and study skills, and skills related to future employability) and participation in structured prosocial (including and voluntary) activities. These factors were associated with mental wellbeing in youth

across the range of socioemotional problems and levels of functioning. On the other hand, poor mental wellbeing was strongly linked with the voung being person not education and employment. Although the presence of good life skills and the engagement in structured and prosocial activities are considered protective, recent study found that the intrinsic belief in the value of the future of these young people was the most important factor in determining whether activities skills and act protectively. This profound finding presents a potential intervention point enhancing mental wellbeing amongst Australian youth. Risky behaviors and poor physical health are common in young people with mental disorders and have been described as markers of an underlvina continuum social and emotional problems (Salkovskis, 1991). There bidirectional is а relationship between poor physical health and mental disorders, and it is likely that a strong focus on improving health the physical individuals with mental disorders will reap its own

improved mental wellbeing. Development interventions targeting health behaviours and early medical treatment of youth mental disorders may be a further investment in the mental health continuum of generations (Côté. 2009). . A recent study has shown that for those individuals at the severe end of the continuum. death premature decreased life expectancy is likely and represents a major public health issue. Suicide is the leading cause of death in people aged 24 years or younger in Australia and New Zealand, and for these reasons, it is important to enhance the continuum of care for young people with mental disorders until their health and life general closely expectancy more resembles that of people disorders. without mental This might also be considered for at-risk populations of vouth showing socio-emotional problems before the point of diagnostic mental disorder in order to reduce the prevalence and burden of these problems.

One of the most potentially modifiable factors of mental disorders in youth is a family history of mental and substance use disorders. It is well known that there is both a strong genetic and environmental risk from parental mental illness, and a recent study has estimated that 15-20% of children are at risk of developing a mental disorder due to a parental history. This has been linked to poor parent mental health disturbances parenting practices, which can result in the exposure of these children to a range of socio-emotional problems. effects negative parental disorders are particularly concerning given the potential prevent disorders in both the parents and children and in terms of the high human and economic burden from disorders across the lifespan. such. there is areat potential to prevent the development of mental disorders in these children through the improvement of parent mental health and parenting practices, and this may also serve to protect against disorders developing in subsequent generations.

# 3.9 Addressing Cultural and Socioeconomic Disparities

benefits in terms of

There are particularly important issues to consider in the context of anxiety and substance addictions in the young, and that is of culture and socioeconomic status. Studies have shown that members of ethnic and racial minority groups in the United States are less likely to receive diagnosis and treatment for their mental illness, have fewer positive attitudes toward mental health, and are more likely to use emergency mental health care or general medical services rather than specialists mental health (Stephens, Bohanna. Graham, 2017).

Research also indicates that even when minorities are diagnosed with mood. anxiety, or substance abuse disorders, they are still less likely than the white majority population to receive any treatment (McHugh, Hearon, & Otto, 2010). It is believed that the disparities occur because ethnic and racial minorities have less access to mental health services, are less likely to seek help, and are more likely to receive poor quality care. This is especially problematic as rates of anxiety, depression, and substance misuse are often the same or sometimes higher for

minority groups than the white majority population. This section aims to discuss some potential reasons for these disparities and how they can be addressed to provide better quality care for those affected by anxiety and substance addictions.

### Conclusion

The surge of mental and psychological disorders among today's youth has become a growing area of interest for researchers. clinicians. educators. and parents. Given that mental disorders usually have their onset in childhood and adolescence, it is of vital importance to understand why this disturbing trend is occurring, what are the consequences in terms of youths' well-being, and what can be done to prevent it. In this paper, we have reviewed the evidence of the past 50 vears and have seen dramatic increase in rates of a variety of mental disorders children amona and adolescents. This has been shown for different types of disorders. in different by many countries. and measures of mental disorder. The review covered the

prevalence of youth mental disorders and their impact; the changing rates of disorders; the significant link between mental disorders and mental health services use; and clinical severity/detection of disorders.

The evidence points to a complex and as yet not fully mix understood of contributing factors to the increase in youth mental disorders that is almost certainly multi-determined. Pressing areas for further research exist. This includes the reasons for the wide variation in rates of disorder across developed countries, and why youth today appear much be SO more distressed than those of the past. For the sake of today's and of future vouth generations, it is hoped that research that seeks understand the origins of this trend will continue to be prioritised. . In particular, a greater focus on prevention rather than cure is needed. Given the clear evidence of the potential for adverse impacts of mental disorders of youth well into adult life. every effort should be made to reduce the prevalence of these disorders amona young people today.

The increase in mental and psychological disorders is now alarmingly high and this research study has shown often thev are more prevalent than other health issues. This is now the time for psychological health to stand on its pedestal and receive the recognition it deserves. High rates of anxietv and substance addiction in youth may serve as a wake-up call-in mental health recognition. It can be hoped that mental health will now start to receive more funding and research tipping towards the provided better care and options for adolescents in the future.

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