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The lived experience of stress among fifteen-year-old adolescents: A qualitative study

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ABSTRACT

Background: Adolescence is a critical developmental stage marked by heightened vulnerability to stress across academic, family, and social domains. Fifteen-year-old students often face multiple pressures that influence their emotional well-being and coping capacity. Understanding how adolescents perceive and respond to stress is essential for designing effective support strategies.

Objective: To explore the sources of stress, coping responses, and support needs among 15-year-old adolescents.

Methods: A qualitative descriptive study was conducted in Tarakan City, Indonesia. Twenty junior high school students aged 15 years were recruited using purposive sampling. Data were collected through semi-structured face-to-face interviews lasting 40–60 minutes, supplemented by field notes, and analyzed using Miles and Huberman's interactive model of data reduction, display, and conclusion drawing. Data saturation was reached at 20 participants.

Results: Four themes emerged: (1) Complex origins of stress academic demands, family conflict, and peer challenges created multifaceted stress experiences; (2) Stress responses to challenges—stress manifested in anxiety, sadness, disappointment, lethargy, and somatic complaints; (3) Adaptive and maladaptive coping strategies -adolescents used both constructive approaches (e.g., socializing, drawing, listening to music, exercising) and detrimental behaviors (e.g., self-harm, aggression, smoking, yelling); and (4) Adolescents' wishes during difficult times—participants expressed a strong desire for parental attention, empathy, and supportive peer relationships. **Conclusion**: Fifteen-year-old adolescents experience stress from interconnected academic, familial, and social sources that shape diverse emotional and behavioral responses. Their coping strategies range from adaptive to maladaptive, and they consistently seek greater support and understanding from parents and peers. These findings highlight the need for comprehensive, adolescent-centered support systems involving families, schools, and healthcare providers to strengthen resilience and promote mental well-being.

Keywords: adolescents; coping; emotions; stress; support systems

Nursing and Healthcare Practices

- Nurses should provide health education and equip adolescents with coping skills—such as relaxation, mindfulness, and healthy lifestyle practices—to prevent maladaptive behaviors.
- A safe, supportive, and nonjudgmental environment enables adolescents to express stress and mental health concerns, facilitating early detection and intervention.
- Collaborative efforts among families, schools, and multidisciplinary teams strengthen nursing interventions and promote long-term adolescent resilience.

INTRODUCTION

Adolescence, beginning with the onset of puberty, is a developmental stage often marked by emotional upheaval, withdrawal from family, and challenges across home, school, and peer environments (Karlina, 2020). During this period, adolescents undergo rapid psychological, biological, and social changes that may generate internal conflict. Unresolved challenges can hinder healthy development, particularly character formation, and increase vulnerability to mental health disorders (Alini & Meisyalla, 2022). Physical, emotional, and social transitions—along with exposure to poverty, abuse, and violence—further heighten this risk (WHO, 2021).

Globally, 166 an estimated million adolescents experience stress, including 89 million boys and 77 million girls, and approximately 264 million people have experienced stress severe enough to contribute to depression. In Indonesia, the 2018 National Health Research (RISKESDAS) reported that 6.2% of those aged 15-24 experienced stressrelated depression, with the highest prevalence (9.8%) occurring among those aged 15 years and older (Indonesian Ministry of Health, 2028).

Adolescent mental health challenges manifest through thoughts, emotions, behaviors, and social interactions. Common issues include anxiety, feelings of insecurity, and

interpersonal conflicts with parents or peers, which often escalate into stress and broader psychological or social problems. Stress, defined as the emotional and physiological response to environmental demands requiring adaptation, is a normal part of life. However, when intense or prolonged, it can seriously harm physical and mental health (UNICEF, 2022; Ministry of Health, 2022). In Tarakan City, three youths died by suicide between 2020 and 2024 for various reasons (Egeham, 2020; Halim, 2024). Although no major issues were formally reported at the school, unrecognized challenges may still exist beneath the surface. This study was therefore designed to explore how 15-year-old students experience and manage stress, offering insights that may also reflect the realities of adolescents in similar school settings.

METHODS

Design

This study employed a qualitative descriptive approach to investigate the experiences of 15-year-old junior high school students in Tarakan as they navigated stress, with a focus on participants' subjective interpretations to gain deeper understanding and meaning.

Ethical consideration

This study received ethical approval from the Ethics Committee of the Faculty of Health Sciences, Universitas Borneo Tarakan 080/KEPK-FIKESUBT/ (Approval No. VIII/2024). All participants were provided with detailed information about the study's aims, procedures, potential risks, and benefits prior to data collection. Written informed consent was obtained from each participant, ensuring voluntary participation without coercion. To protect confidentiality, all identifying information was anonymized, and data were securely stored and accessible only to the research team. Participants were also informed of their right to withdraw from the study at any time without penalty.

Participants and Setting

Purposive sampling was employed to recruit participants, who were 15-year-old students currently enrolled in junior high school in Tarakan City. Prior to data collection, the researcher provided clear explanations regarding the study's objectives, procedures, potential

benefits, and risks. Students who agreed to participate signed an informed consent form, confirming their voluntary participation without coercion or intimidation. A total of 20 students consented and were included in the study. To ensure confidentiality, all personal identifiers were removed and replaced with alphanumeric codes, and data were handled anonymously throughout the research process.

Data Collection

Data were collected in June and July 2024 through semi-structured interviews lasting 40-60 minutes. The interview guide was developed based on a literature review of adolescent stress experiences to ensure relevance and comprehensiveness. All interviews conducted face-to-face by the first researcher in a designated private room within the school, providing a quiet environment that supported confidentiality and participant comfort. In addition to audio recordings, nonverbal expressions and contextual conditions were documented in field notes to enrich data interpretation. Recruitment continued until data saturation was achieved, with no new themes emerging after the 20th participant, at which point data collection was concluded.

Data analysis

Data were analyzed using Miles and Huberman's interactive model for qualitative research, which involves three iterative steps: data reduction, data display, and conclusion drawing/verification (Asipi et al., 2022). Data reduction entailed simplifying, coding, and selecting information most relevant to the study objectives, allowing the researchers to identify emerging patterns and themes. Data display involved organizing and visually presenting the reduced data in tables and charts to facilitate systematic interpretation. Finally, conclusion drawing and verification were carried out through careful synthesis of the findings, continual comparison with the raw data, and confirmation that the interpretations were consistent with the research objectives.

The process was conducted collaboratively by the first and second researchers, incorporating triangulation through the use of interviews, observations, and documentation. This rigorous approach enhanced the validity and trustworthiness of the findings. By systematically aligning the results with the research questions, the analysis not only ensured internal consistency but also

generated insights that contribute to existing knowledge and highlight directions for future research.

Trustworthiness

Transferability was enhanced by providing detailed descriptions of the research context, participant characteristics, and interview settings, enabling readers to assess the applicability of findings to other contexts. Dependability was ensured through an audit trail documenting all stages of data collection and analysis, including interview notes and coding processes for both verbal and nonverbal data. Participants included active 15-year-old students from SMPN 7 Tarakan, Class IX, who voluntarily agreed to collaborate in the study.

Confirmability was supported by reflexive journaling, in which the researcher consistently reflected on personal assumptions and potential biases. Peer debriefing was conducted by the first and second researchers to review coding and interpretation, ensuring that findings accurately reflected participants' perspectives. In addition, all three researchers systematically documented participants' experiences and provided detailed descriptive accounts to strengthen the credibility of the results.

RESULTS

All participants met the established inclusion criteria. A total of 20 junior high school students—10 males and 10 females—were enrolled, allaged 15 years. Informed consent was obtained in Indonesian, a language understood by both researchers and participants. The study was conducted in Tarakan City, a border region in North Kalimantan, Indonesia, categorized as Underdeveloped, Outermost, and Foremost area comprising one city and four sub-districts.

Data analysis produced four main themes and six subthemes that captured adolescents' experiences of stress. These themes reflected the complexity of stressors, emotional and physical responses, coping strategies, and expectations for support (Table 1). Saturation was achieved when recurring patterns emerged across participants, with more than four individuals contributing to each subtheme, confirming the robustness of the findings.

Theme 1. Complex Origins of Stress

Stress is a common experience that affects individuals across all age groups, with adolescents being particularly vulnerable. It

Table 1. Theme Description

Major themes	Subthemes	Categories
Complex origins of stress	Causes of stress in teenagers	Many tasks Hard lessons Busy parents Often quarrel New friends Friend insults Telling bad stories
Stress responses to challenges	Adolescents' reactions to stress	Worried Sad Angry Disappointed Lonely Thinking Dizzy No spirit Lazy Silence
Adaptive and maladaptive coping strategies	How teenagers cope with stress	Go for a walk Jogging Draw Write Listen to music Studying Buy what you want Sleep Play with friends
	Venting emotions through negative expressions	Destroy items Injured hand Hit an object Smoke Rude talk Yelling at parents Slam the door
Adolescents' wishes during difficult times	Support from parents	Parents care more Parents are closer Attention from parents Affection Parents listen Encouraged by parents

Attention and actions from family take a walk

Family talk
Family invited to eat
Friends invite to play
Friends invite stories

represents both a physiological and emotional response to environmental changes that require adaptation (Ministry of Health, 2022). The Big Indonesian Dictionary defines stress as a disturbance or emotional reaction triggered by external circumstances. In this study, three primary sources of adolescent stress were identified: academic pressure, dysfunctional family dynamics, and challenges in social interactions. Participants frequently described stress arising from excessive schoolwork, difficult lessons, parental conflicts, and derogatory remarks from peers.

Subtheme 1: Causes of Stress in

Teenagers

Adolescents frequently reported experiencing stress related to heavy academic demands, family conflict, and negative peer interactions. A substantial volume of homework and challenging lessons were identified as significant academic stressors.

"If the assignment remains incomplete, I feel stressed" (P1), while another added, "Occasionally, there are so many assignments" (P4). Difficult lessons also contributed to feelings of pressure, as reflected in the statement, "The lessons are challenging; at times, it seems they lack focus" (P2). Similarly, another participant noted, "If the lessons are difficult, they also induce stress in me" (P6).

Family issues, particularly economic hardship and parental conflict, were also common sources of stress.

"Due to economic difficulties, my parents frequently argue" (P3), while another shared, "I often overheard my parents arguing; they are now separated" (P5).

Social relationships further added to stress, with derogatory remarks and peer insults frequently mentioned.

"They mock individuals for being short, making fun of their height" (P7).

Theme 2: Stress Responses to

Challenges

Adolescents demonstrated a range of stress responses when confronted with academic pressures, family problems, and difficulties in friendships, all of which negatively affected their mental well-being. These responses encompassed both emotional and physical manifestations. Emotionally, adolescents commonly reported feelings of worry, sadness, disappointment, and rumination, anger, which often disrupted their daily functioning. Physically, stress was expressed through symptoms such as dizziness, fatigue, and lethargy. These findings highlight how stress during adolescence not only influences emotional states but also extends to behavioral and somatic reactions, reflecting the pervasive impact of stress on overall well-being.

Subtheme 1: Adolescents' Reactions to

Stress

Adolescents described a variety of emotional and physical reactions when experiencing stress. Stress, often triggered by academic demands or interpersonal challenges, was perceived as a natural response to pressure and uncertainty. Participants frequently expressed feelings of worry, sadness, anger, disappointment, and mental fatigue, along with physical symptoms such as dizziness and lethargy.

"I feel worn out and anxious if it's not finished" (P1), while another noted, "I feel disappointed too" (P3). Similar expressions of sadness and discouragement were reported, as reflected in the statement, "I feel sad and disappointed" (P5). Cognitive strain also contributed to physical discomfort, as one participant explained, "Sometimes I become dizzy if I don't understand the lesson" (P2).

Others emphasized a combination of emotional and physical responses, such as,

"I feel tired, dizzy, thinking, that's all" (P4) and "Stressed, dizzy, like I'm lazy and

don't want to do the work" (P6).

These accounts highlight how stress during adolescence manifests holistically, affecting not only emotions but also cognition, motivation, and physical well-being.

Theme 3: Adaptive and Maladaptive Coping Strategies

When confronted with academic, familial, and social stressors, adolescents reported engaging in a variety of coping strategies to reduce their distress. These strategies ranged from constructive, adaptive behaviors to maladaptive responses. Adaptive approaches often involved activities that provided distraction, relaxation, or social connection, such as walking, jogging, listening to music, drawing, storytelling, or spending time with friends. These activities helped adolescents redirect their thoughts, release tension, and regain a sense of calm.

At the same time, some participants described maladaptive strategies that reflected difficulty in managing emotions, including the use of harsh language, aggression, and other impulsive behaviors. These responses, while providing temporary release, often carried negative consequences for relationships and well-being. Overall, the findings reveal that adolescents employ both positive and negative coping mechanisms, demonstrating resilience in some contexts while also exposing vulnerabilities that may place them at risk for harmful outcomes.

Subtheme 1: How Teenagers Cope with Stress

Adolescents described a range of adaptive strategies to manage stress, many of which involved engaging in enjoyable activities or seeking social connection. Leaving the home environment was often perceived as helpful, allowing them to rejuvenate the mind, redirect negative thoughts, and achieve a sense of calmness. Common strategies included walking, jogging, traveling, socializing with peers, drawing, and listening to music.

Participants highlighted these activities as effective means of distraction and emotional release.

"I like going for a walk with friends" (P2), while another shared, "Sometimes I jog with my friends" (P14). Others sought comfort in sharing experiences with trusted individuals, as expressed by a participant who noted, "I usually tell my cousin" (P1). Creative outlets were also emphasized, such as, "Doing what I like, like drawing, and just thinking good thoughts" (P9). Similarly, music served as a coping tool, with one student stating, "Sometimes I listen to music" (P13).

These accounts illustrate how adolescents actively engage in adaptive coping strategies to manage stress, emphasizing the importance of social support, physical activity, and creative expression in promoting resilience.

Subtheme 2: Venting Emotions Through Negative Expressions

Some adolescents reported coping with stress by venting their emotions through negative or impulsive behaviors. Although such strategies were acknowledged as ineffective, participants described them as immediate outlets for releasing built-up tension and frustration. This often included the use of profanity, speaking harshly to parents, or expressing anger through physical actions.

One student admitted, "Yes, it's the same as talking rudely to your parents" (P5), while another reflected, "Indeed, it is akin to speaking disrespectfully to one's parents. I recall a moment when I was feeling emotional and inadvertently spoke harshly; I even found myself slamming a door in frustration" (P14). Similarly, another participant explained, "Sometimes, when there is a problem, we speak harshly because we are annoyed" (P16).

These accounts highlight how stress can trigger maladaptive coping strategies in adolescents, which may provide short-term relief but carry the risk of straining family relationships and reinforcing negative behavioral patterns.

Theme 4: Adolescents' Wishes During Difficult Times

When facing stress, adolescents expressed a strong desire for support and understanding from those around them. Their hopes reflected a longing for encouragement, empathy, and positive interactions that could strengthen their ability to cope. The aspiration for optimism and reassurance was described as a vital source of strength, helping them to alleviate stress and maintain enthusiasm in daily life. Two main areas of desired support emerged: assistance

from parents and attention from the wider social environment. Participants consistently highlighted the importance of being listened to, cared for, and engaged through acts of parental concern, words of encouragement, and invitations to socialize. These supportive gestures were perceived not only as comforting but also as empowering, enabling adolescents to navigate stressful situations with greater resilience.

Subtheme 1: Support from Parents

Adolescents emphasized the importance of parental support, particularly the value of being listened to and cared for during stressful moments. They associated parental attention with feelings of calmness, appreciation, and renewed motivation.

"When I tell a story, it's like they listen to me" (P3). Another noted, "I was encouraged and invited to go out" (P5). Expressions of care and concern were viewed as uplifting, as reflected in the statement, "Given attention and encouragement... so I feel enthusiastic again" (P1).

Similarly, one student highlighted the significance of quality time and shared activities, explaining,

"My parents care more about me, like they have time for me, like drawing; they support me" (P1).

Subtheme 2: Attention and Actions

from Family and Friends

Support from family members and peers also played a crucial role in helping adolescents cope with stress. Verbal encouragement and social engagement were particularly valued, as they created a sense of ease and belonging.

"When there is an issue, they listen and engage in conversation with me, which helps me feel at ease" (P1).

"They invite me to socialize with friends or engage in discussions with them" (P6).

These findings underscore the significance of emotional presence and active involvement from both family and peers in fostering resilience during challenging times

DISCUSSION

This study explored the experiences of adolescents in managing stress and identified four overarching themes and nine subthemes.

These findings differ from some previous studies, which suggested that adolescent stress is primarily caused by external factors and can be managed independently without family involvement. In contrast, this study found that stress was deeply connected to academic demands, family conflict, and peer relationships. The most prominent findings concerned adolescents' coping strategies and their expectations for support during stressful periods.

Adolescents described managing stress through both adaptive and maladaptive strategies. Adaptive strategies included engaging in pleasurable activities such as walking, jogging, drawing, listening to music, writing, reciting the Koran, and spending time with peers. Resting, including sleeping, and social interaction, such as sharing stories and playing with friends, also served as effective outlets. However, several participants also reported maladaptive behaviors such as destruction of property, self-harm, aggression, smoking, cursing, yelling at parents, and slamming doors. These responses highlight both the resilience and vulnerabilities present in adolescent coping.

Theme 1: Complex Origins of Stress

Adolescents identified across stressors three domains: academic, family, and peer relationships. Academic stressors included heavy homework loads and difficulty understanding lessons, often resulting in anxiety about poor performance and examinations (Edison et al., 2023; Dafig et al., 2023). Familial stressors involved limited quality time due to parental busyness and frequent parental conflict, consistent with prior studies linking poor communication and family discord with adolescent stress (Khotmi, 2023; Rakhmaniar, 2023). Social stressors included shifting friendship dynamics and peer insults, which echo previous findings on the role of peer rejection in adolescent distress (Dafnaz & Effendy, 2020; Kholifah & Sodikin, 2020).

Theme 2: Emotional and Physical Burden

Stress manifested in a combination of emotional and somatic responses. Adolescents frequently reported anxiety, sadness, anger, disappointment, and loneliness, alongside symptoms such as dizziness, lethargy, and fatigue. These findings align with research

showing that academic and interpersonal pressures are linked to psychosomatic symptoms and diminished motivation (Rahmah et al., 2023; Andirwan et al., 2024). Such responses demonstrate how stress disrupts daily functioning and well-being.

Theme 3: Adaptive and Maladaptive Coping Strategies

Coping strategies were varied. Adaptive methods included hobbies, physical activity, and social interaction, which adolescents found calming and restorative. Religious and creative practices, such as prayer, drawing, or journaling, were also highlighted, consistent with findings from Sari et al. (2023) and Rahman & Paryontri (2023). However, maladaptive strategies such as self-harm, aggression, or impulsive expressions of anger (e.g., yelling or slamming doors) were also reported, underscoring the risks faced by adolescents who lack constructive outlets.

Theme 4: Support and Aspirations During Stressful Times

Adolescents expressed a strong desire for parental and social support. Being listened to, receiving encouragement, and having quality time with family were identified as crucial. Peers also played an important role by providing companionship and opportunities for socialization. These findings are supported by prior studies emphasizing the role of social validation and guidance in reducing feelings of isolation and enhancing adolescent wellbeing (Nuramanah et al., 2023; Faridah et al., 2024). Emotional support from parents and peers fosters resilience, while effective communication reduces academic psychological stress (Rakhmaniar, 2023).

Taken together, these results demonstrate that adolescent stress arises from a complex interplay of academic, familial, and social challenges. Stress is expressed through both emotional and physical symptoms, and coping strategies vary widely between adaptive and maladaptive forms. Importantly, adolescents consistently emphasized their wish for greater support, particularly from parents and peers, to help them navigate difficult times. These findings reinforce the need for comprehensive support systems that integrate families, schools, and communities to strengthen adolescent resilience and mental health.

CONCLUSION

Adolescent stress arises from interconnected sources, including academic demands, family conflict, and peer relationship difficulties. In response, adolescents employ a range of coping strategies, such as engaging in hobbies, seeking social interaction, and taking breaks to distract themselves. However, some also adopt maladaptive behaviors that may worsen their well-being. Importantly, adolescents consistently express the need for support from their surrounding environment, particularly from parents, peers, and schools. These findings underscore the importance of developing comprehensive support systems that foster resilience, promote adaptive coping, and address the multifaceted nature of stress during adolescence.

Declaration of Interest

The authors declare no conflict of interest.

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Data Availability

Data is available upon reasonable request by contacting the corresponding author.

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