

# “I AM MENTALLY HEALTHY, SO I CAN CHOOSE WELL.” QUARTER-LIFE CRISIS AND POSITIVE MENTAL HEALTH IN STUDENTS

**Herdian Herdian<sup>a, b\*</sup>, Dzikria Afifah Primala Wijaya<sup>a</sup>**

<sup>a</sup>*Universitas Muhammadiyah Purwokerto, Purwokerto, Indonesia*

<sup>b</sup>*Nanjing Normal University, Nanjing, China*

\*Corresponding author: Email: [herdian@ump.ac.id](mailto:herdian@ump.ac.id)

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## Abstract

*The transition from adolescence to adulthood is marked by psychosocial and other psychological changes. Quarter-life crisis is a symptom that appears during the transition period. We examined how quarter-life crisis impacts mental health using a convenience sampling technique. A total of 459 students, 18 to 25 years old, filled out questionnaires distributed online. The data measurement tool used quarter-life crisis and positive mental health scales adjusted into Indonesian form. The results show a significant negative correlation ( $R = -0.437$ ;  $p < .001$ ) between quarter-life crisis and positive mental health in students. The regression analysis shows an impact of quarter-life crisis on positive mental health of 19%, which is relatively small. The implications of our research results are discussed.*

**Keywords:** College student; Mental health; Quarter-life crisis; Stress.

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## 1. INTRODUCTION

According to Arnett (2000), the transition from adolescence to adulthood of individuals in the 18-to-25 age group is referred to as emerging adulthood. Individuals in emerging adulthood have subjective feelings between adolescence and adulthood and experience changes in psychosocial development associated with expanded identity exploration (Arnett, 2001). The identity exploration comprises three main areas: love, work, and education (Atwood & Scholtz, 2008; Wood et al., 2017).

Regarding love, relationships with the opposite sex have begun to be considered at a more serious level, such as marriage. As for work, adolescents must consider not only salary but also how suitable and comfortable the job is for them. Students in intended major are also starting to consider whether their intended major is one that will be competitive in the job market. There are many things to consider at one time, giving individuals who are in emerging adulthood a wide range of choices. Not infrequently, the many choices make them feel anxious, depressed, or even feel that life is meaningless (Rahmania & Tasaufi, 2020).

In addition, the many choices faced also create confusion in taking roles that make individuals anxious and depressed (Arini, 2019; Reinherz et al., 2003). In Indonesia, individuals in emerging adulthood are included in the age group with a depression prevalence of 9.8%, according to data from the Ministry of Health of the Republic of Indonesia (2018). In emerging adulthood, individuals experience various changes in their lives and significant roles, such as starting to leave home, entering or leaving the educational environment, and even starting a career that puts them at a significant mental health risk (Lane, 2014). According to Robinson et al. (2020), individuals who scored high on measures of depression in emerging adulthood reported having a developmental crisis. A person who experiences serious depression also tends to experience a developmental crisis.

The developmental crisis in emerging adulthood is known as a quarter-life crisis (QLC). A quarter-life crisis is an episode characterized by more difficult, stressful, unstable conditions are an important turning point in a person's life (Robinson et al., 2013). A QLC can be interpreted as a condition that develops when individuals leave either secondary school or university and face more challenging conditions (Robinson & Wright, 2013).

Understanding the condition of individuals experiencing psychological problems in a QLC phase is of special concern for maintaining positive mental health.. Mental health is an important aspect of human life. A person with good mental health is characterized by flexible behavior and the ability to build satisfying interpersonal and intersocial relationships (Dewi, 2012). In addition, other characteristics possessed by someone who has good mental health include absence of mental illness or disorder, ability to handle various pressures, and ability to adapt to the environment (Hamid, 2017; Mubasyaroh, 2013; Purnama & Prasetyo, 2016).

Martin (2017) found millennial students to have higher levels of anxiety than their older peers. Research results (Riyanto & Arini, 2021) reveal that students who experience QLC experience anxiety. In addition, a longitudinal study of female participants by Robinson (2019) found two types of QLKC episodes: locked-out and locked-in. The locked-out type of QLC occurs when a person experiences multiple failures to find work, which causes anxiety and a decrease in self-esteem. The locked-in type occurs when a person feels obliged to keep working, despite experiencing bullying from superiors. Thus, it can be hypothesized that QLC is a problem that impacts to positive mental health. Mental health influenced by QLC influences is still rarely studied, but it is known that students in adolescent development need a good understanding of the events that they experience so that their mental health can be maintained.

## 2. METHODOLOGY

This study uses a quantitative approach. The independent variable is QLC and the dependent variable is positive mental health. The quantitative approach addresses the research objective by assessing the effect of QLC on mental health.

### 2.1. Participants

The participants in this study were 459 students in Central Java, Indonesia, ranging in age from 18 to 25 years. The study used convenience sampling. The participants were primarily 18 (57.08%) and 19 (31.80%) years of age. Female participants were the dominant group at 74.51%, while male participants made up 25.49%. Information about the participants is given in Table 1.

**Table 1. Participants**

| Category | Count | Percentage (%) |
|----------|-------|----------------|
| Sex      |       |                |
| Male     | 117   | 25.49          |
| Female   | 342   | 74.51          |
| Age      |       |                |
| 18       | 262   | 57.08          |
| 19       | 146   | 31.81          |
| 20       | 37    | 8.06           |
| 21       | 8     | 1.74           |
| 22       | 2     | 0.44           |
| 23       | 1     | 0.22           |
| 24       | 0     | 0              |
| 25       | 3     | 0.65           |

## 2.2. Instrument

### 2.2.1. Positive Mental Health (PMH)

Mental health measurement using the positive mental health (PMH) scale was developed by Lutz et al. (1992, unpublished manuscript) (as cited in Lukat et al., 2016) and has been tested for psychometric properties by Lukat et al. (2016). The PMH scale uses only one dimension. Participants in our study were asked to respond to 19 items, with a choice of answers from 1 (not true) to 4 (true). Examples of items include “I feel that I can cope well with life’s difficulties,” and “Many things I do make me happy.” The PMH scale in this study has a Cronbach’s alpha value of 0.882.

### 2.2.2. Quarter-Life Crisis Scale

The quarter-life crisis variable was measured using the quarter-life crisis scale, compiled and modified by Agustin (2012) based on the 2009 book, *Twenty-Something Manifesto: Quarter Lifers Speak Out about Who They Are, What They Want, and How to Get It* by Christine Hassler. For the quarter-life crisis scale, participants were asked to fill in a 24-item questionnaire. The participants could choose among six answer choices according to their views and feelings, ranging from 1 (strongly disagree) to 6 (strongly agree). Examples of items include “I feel unmotivated and have no direction in life,” and “I am very worried and anxious because I do not know my purpose in life.” A high score indicates that QLC is high. The quarter-life crisis scale in this study has a Cronbach’s alpha value of 0.938.

## 2.3. Analysis

The purpose of this research is to examine the impact of quarter-life crisis on mental health. The analysis consists of two stages. The first stage is to test the correlation between the variables. The second stage is to perform a regression analysis to determine the magnitude of the influence of the quarter-life crisis variable on mental health. The Jamovi statistical analysis tool was used for both stages.

## 3. RESULTS AND DISCUSSION

The purpose of this study is to analyze the impact of the quarter-life crisis on mental health. The correlation results are presented in Table 2.

**Table 2. Intercorrelation Matrix**

|     | Mean | SD   | PMH    |
|-----|------|------|--------|
| PMH | 28.8 | 5.32 | -      |
| QLC | 94.5 | 23.8 | -0.437 |
|     |      |      | < .001 |

Table 2 shows that QLC has a correlation with PMH ( $R = -0.437$ ;  $p < .001$ ). This means that the correlation between QLC and PMH is negative and significant. Thus, it can be interpreted that the lower the QLC value, the higher the PMH in individuals. The amount of the effective contribution of QLC to PMH can be seen in Table 3. This study examines these two variables to determine whether positive mental health plays a role in the quarter-life crisis. The regression results show QLC, can explain 19% of the variation in PMH.

**Table 3. Regression Analysis**

| Predictor           | Estimate | SE      | t     | p      | R      | R <sup>2</sup> |
|---------------------|----------|---------|-------|--------|--------|----------------|
| Intercept           | 38.0201  | 0.87181 | 43.6  | < .001 |        |                |
| Quarter Life Crisis | -0.0979  | 0.00895 | -10.9 | < .001 | -0.437 | 0.191          |

The QLC phase is a condition experienced by some people in the process of development. The quarter-life crisis is a crisis in early or emerging adulthood characterized by feelings of confusion, frustration, panic, helplessness, lack of enthusiasm, and loss of direction (Hilton et al., 2021). The period of crisis episodes is characterized by more difficult circumstances, stress, and unstable conditions (Robinson et al., 2013). As previously explained, periods of stress, emotional upheaval, and insecurity are common at 18 to 28 years of age (Murphy, 2011). The QLC phase is generally experienced at school age before or after graduation, which can trigger ongoing problems, especially in mental health. The results of our study indicate that QLC affects positive mental health. Our study confirms that the quarter-life crisis can be a threat to mental health because it can affect an individual's functioning in life (Hilton et al., 2021). Arnett (2000) states that the instability felt by individuals in the first years of adult life is a characteristic feature and can lead to individual vulnerability to mental illness. This happens because the fear of failure to achieve goals can cause mental health problems for individuals (Robbins & Wilner, 2001).

Implication of this research is to prepare students to make good decisions. This is because their psychological condition is generally indecisive. Treatment is needed for students who experience a quarter-life crisis because it can lead to more severe problems such as depression and other mental health disorders (Karpika & Segel, 2021). We recognize that this study has limitations. First, the variables in this study are very limited, so they do not reveal how other factors affect mental health or even the quarter-life crisis. The number of participants is quite large, but the demographic data mining is insufficient. Mental health variables in this study are limited to one side of positive mental health, but mental health can be seen from two sides, such as subjective well-being and psychological distress. Therefore, future research may need to expand the scope of the participants or increase the number of variables that are interrelated with quarter-life crisis and mental health.

#### 4. CONCLUSION

Positive mental health is an important concern for students because it has a significant impact on many things, such as academic performance while attending lectures. We take advantage of the QLC phenomenon that occurs during the adolescent-

to-adult transition. Thus, this study aims to examine the association of QLC with positive mental health. It can be concluded that QLC has a significant direct negative relationship on positive mental health with an effective value of 19%. The influence of the QLC variable is low on students' positive mental health, so it is necessary to re-examine it with a larger number of participants or with a qualitative approach or other methods to understand the phenomena that occur during the transition from adolescence to adulthood. But even though the effect is relatively low, QLC still effects student mental health. Thus, the results of this study can recommend to students that every event that occurs in adolescence must be considered for its impact on mental health. Students may have to be able to balance desires and expectations so as not to feel many obstacles in dealing with quarter-life crisis.

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