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Review Article

"Impact of Anxiety and Affect on Quality of Life among Youth"

Ananya Rana[1], Smriti Sethi[2]

[1]Student, BA (Hons)Applied Psychology Amity institute of Psychology and Allied Sciences, Amity University Noida Uttar Pradesh, [2]Assistant Professor, Amity institute of Psychology Allied Sciences, Amity University Noida Uttar Pradesh

Abstract

Youth well-being is an important phenomenon and comprises physical, psychological, & social health, where the psychological factors such as anxiety and affect play an essential role in the determining Quality of Life (QOL). Young people experience a number of transitions and they are at risk of anxiety disorders that in turn can have adverse effects on academic achievement, physical health, emotional well-being and relationships. Furthermore, affect has a role in the management of emotions and well-being. Positive affect leads to satisfaction, interest and happiness while negative affect is associated with sadness, gloom and maladjustment.

Thus, the study aimed to investigate the impact of anxiety and affect on the life quality (QOL) among youth. Hypotheses were formed on the basis of objectives. Random sampling method was used to select 130 youth (65 males and 65 females), and standardized psychological instruments were used to collect data. Descriptive statistics (t-test), regression analysis and Pearson's correlation were the statistical techniques utilized.

Results revealed that substantial differences in gender were present in anxiety and negative affect, with females scoring higher. Anxiety was negatively correlated with all QOL domains; and positive affect had a strong positive correlation with all the dimensions of QOL in youth. Negative affect was seen to be negatively correlated with psychological and social QOL. Regression analysis established that anxiety and affect are important predictors of QOL. Positive affect is a significant predictor of life quality, explaining 24–39% variance in the different domains.

These results showcased the importance of having support systems and mental health programs that seek to lessen anxiety, increase positive affect, and build emotional strength in youth. To a

significant degree, through the improvement of these psychological factors, the life quality of youth can be enhanced, emphasizing the need for organized counselling services and support initiatives from families, peers & society as a whole.

Keywords: Anxiety, Negative Affect, Positive Affect, Quality of Life, Well-being, Youth

Introduction

The paper aims to explore the **effect of Anxiety and Affect on the Life Quality of Youth**. Youths' well-being is a complex phenomenon that includes their physical, psychological, and social status. Research shows that well-being has a direct impact on the academic achievement, life quality and interpersonal relationships of youth (Arslan, 2023). Furthermore, anxiety disorders can affect a young person's social abilities, mental stability, and physical health, among other areas of their life (Chiu et al., 2016). In addition, affect is involved in emotional regulation, resilience and general psychological health (Tugade and Fredrickson 2004). Thus, it is important to understand the interaction between anxiety, affect, and life quality to improve the availability of support systems to boost the well-being of young individuals.

Author for Correspondence

Ananya Rana ananya12rana34@gmail.com Student, BA (Hons)Applied Psychology, Batch 2022-2025, Amity institute of Psychology and Allied Sciences, Amity University Noida Uttar Pradesh, [2]Assistant Professor, Amity institute of Psychology Allied Sciences, Amity University Noida Uttar Pradesh

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"Quality of life" refers to an individual's *view & evaluation* of where they stand in life with regard to his/her goals, pretensions, directives, prospects, and enterprises along with the values and culture he/she is part of. It pertains to the overall state of *well-being* experienced by a person or population, encompassing both positive and negative aspects of their lives at a specific time. According to the APA, a person's quality of life is determined by how satisfied they are with their life (APA Definition of Psychology, n.d.).

According to APA, **anxiety** is described as a feeling of *fear* and *physical* symptoms of *tension* and is the *expectation of danger* or tragic events or other adverse situations (APA Dictionary of Psychology, n.d.). Adolescence is a time of important developmental and environmental changes whereby youth are at higher risk of adverse life outcomes and often exhibit anxiety symptoms. *Youth anxiety* manifestations and disorders are also associated with negative coping strategies, relational issues, a negative school environment, and lower academic achievement and attendance (Povey et al., 2022; Raknes et al., 2017).

Affect can be broadly defined as any feeling or *emotion,* from pain to joy, from the simplest to the most complex felt feelings, and from the healthiest to the most pathological emotional responses (APA Dictionary of Psychology, n.d.). Following Wilhem Wundt's idea, affect can be considered as one of the *basic* components of the human mind and regarded as a '*direct and irreducible psychological experience*'. ***Negative affect (NA)*** can be understood as the

integral feeling of an individual when they are unable to achieve their goals, or are not happy with their environment and the situations prevailing in their lives, and/or when they feel threatened (*APA Dictionary of Psychology*, n.d.). ***Positive affect (PA)*** is the subjective experience of pleasant mood or feeling good, say happiness, curiosity, and alertness. Positive affect facilitate success and assist people in doing things that are right and what leads to their goals. High positive affecters are in a position to use their resources, make friends, learn skills, and leisurely engage in activities.

Review Of Literature

The perception of life quality among juvenile care service users was investigated by **Swerts et al. (2023**). The highest QOL was reported by adolescents in the areas of self-determination, material well-being, and personal growth; however, being elderly, female, and receiving residential care were associated with lower life quality in a number of areas.

Novianti et al. (2020) explored the associations between quality of life, happiness, and life satisfaction. Happiness and life satisfaction were both explained by the two categories of the life quality, the psychological and physiological ones. The mental domain explained the happiness today, current life satisfaction, and satisfaction with life five years later.

Bastiaansen et al. (2019) aimed to investigate predictors of life quality in people with Psychiatric Disorders. The results showed that variations in psychopathology, social skills and self-esteem were the significant predictors of QOL in adolescents in a one-year follow-up.

Young et al. (2019) did a cross-sectional study to examine positive and negative affect regulation and its relationship with Anxiety and Depression. Emotion dysregulation is highly correlated with adolescent anxiety and depression through self-report studies.

Methodology

Aim: The primary objective of the study is at exploring the impact of anxiety and affect on quality of life among youth.

Objectives:

1. To assess the gender difference on the basis of anxiety, affect and domains of quality of life among youth
2. To study the relationship between anxiety and domains of quality of life among youth
3. To study the relationship between positive affect and domains of quality of life among youth
4. To study the relationship between negative affect and domains of quality of life among youth
5. To study anxiety as predictor of domains of quality of life among youth
6. To study positive affect as predictor of domains of quality of life among youth
7. To study negative affect as predictor of domains of quality of life among youth

Hypothesis:

H1: There will be no significant gender difference on the basis of anxiety, affect and domains of quality of life among youth

H2: There will be no significant relationship between anxiety and domains of quality of life among youth

H3: There will be no significant relationship between positive affect and domains of quality of life among youth

H4: There will be no significant relationship between negative affect and domains of quality of life among youth

H5: Anxiety will not significantly predict domains of quality of life among youth

H6: Positive affect will not significantly predict domains of quality of life among youth

H7: Negative affect will not significantly predict domains of quality of life among youth

Research Design & sample: The current study has used a correlational combined quantitative method. Descriptive statistics, Pearson's correlation and regression analyses was conducted. The sample includes 130 participants (65 males and 65 females), aged 15–24 years, collected via random sampling.

The Variables: The independent variables are anxiety & affect and the dependent variable is life quality.

Tools Used:

WHOQOL-BREF: The WHO developed 26-items "World Health Organization Quality of Life-BREF" to measure four dimensions: psychological, social relationships, physical health and environment. It has adequate content, construct, and predictive validity (p-values < 0.05) and satisfactory internal consistency (Cronbach's α = "0.87", $p < 0.01$) in Indian adolescents (Agnihotri et al., 2010).

PANAS: "Watson, Clark, and Tellegen's" (1988) Positive and Negative Affect Schedule is a self-report tool used to gauge: Positive Affect (PA) & Negative Affect (NA). It is composed of 20 items and has strong internal consistency (Cronbach's α = "0.85" for PA and 0.83 for NA) as well as criterion validity for Indian youth (Kumar et al., 2025).

HAM-A: Hamilton created the 14-items "Hamilton Anxiety Rating Scale" in 1959 as a psychological tool to gauge the severity of anxiety symptoms. Its internal consistency is strong (Cronbach's α = "0.92"), and the inter-rater reliability is also high ("0.91") (Santos et al., 2023).

Results

Table A1 (see appendix) shows that females have a higher mean score (M = 29.14) than males (M = 24.12), which clearly indicates that gender has a major impact on negative affect among the youth. The effect size (Cohen's d = -0.62), indicates a moderate effect. With respect to Anxiety, females (M = 22.32) have a higher average score than males (M = 17.32), indicating

significant gender differences. The effect size (Cohen's d = -0.43) here reflects a small-to-moderate impact of gender on anxiety.

Table A2 (see appendix) reveals that "physical health" has a strong positive correlation with "psychological" domain (0.66) and moderate correlation with "social relationships" (0.48) and "environment" (0.42). Anxiety has strong negative correlations with all domain of QOL, i.e., "physical health" (-0.30), "psychological" (-0.29), "social relationships" (-0.27) and "environment" (-0.25). Positive affect shows strong positive correlations with all areas of QOL, i.e., "physical health" (0.492), "psychological" (0.622), "social relationships" (0.527) and "environment" (0.501). Positive affect also is negatively correlated with Anxiety (-0.33), suggesting a moderate negative relationship. Negative affect has a moderately negative correlation with "psychological" (-0.27) and "social relationships" (-0.24) and is moderately positively correlated with Anxiety (0.38).

Tables A3 (A3.1-A3.12) show that Anxiety negatively predicts all aspects of QOL, For instance: "environment" ($R^2 = 0.06$, $p = 0.004$, 6%), "social relationships" ($R^2 = 0.08$, $p = 0.002$, 8%), "psychological" ($R^2 = 0.08$, $p = 0.001$, 8%), and "physical health" ($R^2 = 0.09$, $p < 0.001$, 9%). It is also evident that positive affect is a strong predictor of all QOL domains, including "physical health" ($R2 = 0.24$, $p < 0.001$, 24%), "psychological" ($R2 = 0.39$, $p < 0.001$, 39%), "social relationships" ($R2 = 0.28$, $p < 0.001$, 28%), and "environment" ($R2 = 0.25$, $p < 0.001$, 25%). Negative affect significantly predicts the QOL domains of "psychological" ($R2 = 0.07$, $p = 0.002$, 7%) and "social relationships" ($R2 = 0.06$, $p = 0.006$, 6%), but not the "environment" ($p = 0.060$), indicating a weaker relationship for the latter domain.

Discussion

The results show that anxiety and negative affect differ significantly by gender. However, no relevant differences in positive affect or the four domains of life quality. This is potentially because factors that determine these such as environmental conditions, social relationships and personal resilience may have been equally distributed across the genders in the sample studied. These findings align with previous studies, such as Thibaut (2017), which report higher anxiety prevalence in females due to biological, hormonal, and psychosocial factors. Thus, hypothesis 1 is challenged.

Every QOL measure showed a negative correlation with anxiety, which proves that a lower life quality is correlated with higher anxiety levels. Possible explanation for this is that anxiety exacerbates emotional distress, which leads to escape-like behaviors, a decline in social interactions, and inefficient stress-reduction techniques. This is supported by studies of Dickson et al. (2024) and Ak & İlhan (2023) which found that anxiety impairs functioning and negatively impacts well-being. Furthermore, Ma et al. (2021) discovered that anxiety symptoms are negatively linked to QOL at various stages in time. As a result, hypothesis 2 is rejected.

All of the QOL dimensions showed positive correlations with positive affect, which may be the case due to the fact that positive emotions are linked to more social support and adaptive coping mechanisms, both of which improve wellbeing. This is in concurrence with the results by

Kim et al. (2024) who established that positive affect improves the psychological and physical long-term health results. Hence, hypothesis 3 is rejected.

Negative affect was negatively associated with QOL, as NA disrupts emotional regulation and social interaction, thus detrimental to overall QOL. Geng et al. (2020) also reported that negative affect such as stress and sadness worsen the quality of life. Freire & Ferreira (2016) also established that negative psychological variables deter HRQOL. Therefore, hypothesis 4 is also rejected.

All of the QOL domains were impacted by anxiety, likely because anxiety negatively impacts QOL by increasing emotional distress, limiting social interactions, and preventing the individual from engaging in activities that would otherwise improve their well-being. Haile et al. (2024) also provided evidence for this as they reported that anxiety and stress were the major factors that contributed to the lower HRQOL. Hypothesis 5 is rejected.

All QOL dimensions were found to be significantly predicted by positive affect, which accounted for up to 39% variance in QOL. Kim et al. (2024) provided evidence that positive affect enhances long-term well-being. Therefore, hypothesis 6 is rejected.

Negative affect significantly predicted “psychological” as well as “social relationships” QOL. As pointed out by Morgan et al. (2016) too, youth with anxiety show variations in positive affect, thus confirming the relationship between negative feelings and social & psychological welfare. Thus, hypothesis 7 is rejected.

Conclusion

The findings revealed that females were reported to have higher anxiety and negative affect than males. Anxiety was inversely related with QOL and also strongly predicted lower QOL. Positive affect was positively associated with and was a strong predictor of all QOL domains. Negative affect was adversely related with QOL and also found to substantially predict it. Therefore, all null hypotheses are rejected.

Implications and Recommendations of the Study:

- Emotional regulation training can be incorporated in to the schools and colleges to support young people, improve their motivation and increase their level of positive affect (Theodorou et al., 2024; Nesayan et al., 2017).
- Mental health programs that offer psychological care, for example in the management of anxiety and general mental health, can be offered. Counseling services (like CBT) offered to youth who are distressed to a high degree (Karukivi et al., 2021).
- Resilience building initiatives can be used to prevent mental health issues such as anxiety and increase self-efficacy in youth with NA (McGovern et al., 2024; Sabin et al., 2021).
- Policymakers can focus on youth mental health initiatives that are aimed at improving quality of life such as the Tele MANAS and Kerala's Jeevani Mental Health Program (Ministry of Health and Family Welfare | GOI, n.d.).

However, the study sample was confined to a certain population, namely youth. Self-report measures were used to collect the data, and they are susceptible to response bias. Study examines relationships at one time (cross-sectional), which prevents making causal inferences. Thus, future researches should focus on being longitudinal to track changes in variables over time, focus on cultural and socioeconomic influences on QOL and test intervention strategies aimed at decreasing anxiety and improving positive affect among youth.

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Appendix

Table A1

Mean, Standard deviation and t-value for Anxiety, Affect and Domains of Quality of life (QOL) among youth.

	Gender	Mean	S.D.	t (128)	p	Cohen's d

Physical health	1	3.374	.6666			0.25
	2	3.229	.4992	1.404	.163	
Psychological	1	3.538	.7088			0.17
	2	3.423	.6306	.981	.329	
Social Relationships	1	3.692	1.0612			0.20
	2	3.508	.7798	1.130	.261	
Environment	1	3.540	.7946			-0.25
	2	3.723	.6613	-1.425	.157	
Positive Affect	1	35.18	8.333			0.13
	2	34.20	6.985	.730	.467	
Negative Affect	1	24.12	8.219			-0.62
	2	29.14	8.033	-3.518	<.001	
Anxiety	1	17.32	11.674			-0.43
	2	22.32	11.709	-2.438	.016	

Table A2

Correlation between Anxiety, Affect and Domains of Quality of life (QOL) among youth.

Variable	1	2	3	4	5	6	7
1. Physical health	-	.657**	.479**	.418**	.492**	-.211*	-.301**
2. Psychological		-	.546**	.491**	.622**	-.270**	-.285**
3. Social Relationships			-	.452**	.527**	-.240**	-.273**
4. Environment				-	.501**	-.165	-.248**
5. Positive Affect					-	-.167	-.331**
6. Negative Affect						-	.380**
7. Anxiety							-

$^{*}p < .05$. $^{**}p < .01$.

Table A3.1

Regression between Positive Affect and Physical health among youth.

Model Summary

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.492[a]	.243	.237	.5165

a. Predictors: (Constant), Positive Affect

ANOVA

Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	10.931	1	10.931	40.983	<.001[b]
	Residual	34.141	128	.267		
	Total	45.072	129			

a. Dependent Variable: Physical health

b. Predictors: (Constant), Positive Affect

Coefficients

		Unstandardized Coefficients		Standardized Coefficients		
Model		B	Std. Error	Beta	t	Sig.
1	(Constant)	1.985	.210		9.431	<.001
	Positive Affect	.038	.006	.492	6.402	<.001

a. Dependent Variable: Physical health

Table A3.2

Regression between Negative Affect and Physical health among youth.

Model Summary

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.211[a]	.044	.037	.5801

a. Predictors: (Constant), Negative Affect

ANOVA

Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	1.999	1	1.999	5.940	.016[b]
	Residual	43.073	128	.337		
	Total	45.072	129			

a. Dependent Variable: Physical health

b. Predictors: (Constant), Negative Affect

Coefficients

Model		Unstandardized Coefficients B	Unstandardized Coefficients Std. Error	Standardized Coefficients Beta	t	Sig.
1	(Constant)	3.692	.168		21.935	<.001
	Negative Affect	-.015	.006	-.211	-2.437	.016

a. Dependent Variable: Physical health

Table A3.3

Regression between Anxiety and Physical health among youth.

Model Summary

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.301[a]	.091	.084	.5659

a. Predictors: (Constant), Anxiety

ANOVA

Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	4.086	1	4.086	12.760	<.001[b]
	Residual	40.986	128	.320		
	Total	45.072	129			

a. Dependent Variable: Physical health

b. Predictors: (Constant), Anxiety

Coefficients

Model		Unstandardized Coefficients B	Unstandardized Coefficients Std. Error	Standardized Coefficients Beta	t	Sig.
1	(Constant)	3.597	.097		37.230	<.001
	Anxiety	-.015	.004	-.301	-3.572	<.001

a. Dependent Variable: Physical health

Table A3.4

Regression between Positive Affect and Psychological among youth.

Model Summary

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.622[a]	.387	.382	.5273

a. Predictors: (Constant), Positive Affect

ANOVA

Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	22.439	1	22.439	80.688	<.001[b]
	Residual	35.596	128	.278		
	Total	58.035	129			

a. Dependent Variable: Psychological

b. Predictors: (Constant), Positive Affect

Coefficients

		Unstandardized Coefficients		Standardized Coefficients		
Model		B	Std. Error	Beta	t	Sig.
1	(Constant)	1.595	.215		7.423	<.001
	Positive Affect	.054	.006	.622	8.983	<.001

a. Dependent Variable: Psychological

Table A3.5

Regression between Negative Affect and Psychological among youth.

Model Summary

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.270[a]	.073	.066	.6483

a. Predictors: (Constant), Negative Affect

ANOVA

Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	4.233	1	4.233	10.070	.002[b]
	Residual	53.802	128	.420		
	Total	58.035	129			

a. Dependent Variable: Psychological

b. Predictors: (Constant), Negative Affect

Coefficients

Model		Unstandardized Coefficients		Standardized Coefficients		
		B	Std. Error	Beta	t	Sig.
1	(Constant)	4.050	.188		21.528	<.001
	Negative Affect	-.021	.007	-.270	-3.173	.002

a. Dependent Variable: Psychological

Table A3.6

Regression between Anxiety and Psychological among youth.

Model Summary

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.285[a]	.081	.074	.6454

a. Predictors: (Constant), Anxiety

ANOVA

Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	4.719	1	4.719	11.330	.001[b]
	Residual	53.316	128	.417		
	Total	58.035	129			

a. Dependent Variable: Psychological

b. Predictors: (Constant), Anxiety

Coefficients

Model		Unstandardized Coefficients		Standardized Coefficients		
		B	Std. Error	Beta	t	Sig.
1	(Constant)	3.799	.110		34.474	<.001
	Anxiety	-.016	.005	-.285	-3.366	.001

a. Dependent Variable: Psychological

Table A3.7

Regression between Positive Affect and Social Relationships among youth.

Model Summary

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.527[a]	.278	.272	.7953

a. Predictors: (Constant), Positive Affect

ANOVA

Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	31.131	1	31.131	49.219	<.001[b]
	Residual	80.958	128	.632		
	Total	112.089	129			

a. Dependent Variable: Social Relationships

b. Predictors: (Constant), Positive Affect

Coefficients

		Unstandardized Coefficients		Standardized Coefficients		
Model		B	Std. Error	Beta	t	Sig.
1	(Constant)	1.379	.324		4.256	<.001
	Positive Affect	.064	.009	.527	7.016	<.001

a. Dependent Variable: Social Relationships

Table A3.8

Regression between Negative Affect and Social Relationships among youth.

Model Summary

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.240[a]	.058	.050	.9084

a. Predictors: (Constant), Negative Affect

ANOVA

Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	6.468	1	6.468	7.838	.006[b]
	Residual	105.621	128	.825		
	Total	112.089	129			

a. Dependent Variable: Social Relationships

b. Predictors: (Constant), Negative Affect

Coefficients

Model		Unstandardized Coefficients		Standardized Coefficients		
		B	Std. Error	Beta	t	Sig.
1	(Constant)	4.303	.264		16.327	<.001
	Negative Affect	-.026	.009	-.240	-2.800	.006

a. Dependent Variable: Social Relationships

Table A3.9

Regression between Anxiety and Social Relationships among youth.

Model Summary

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.273[a]	.075	.067	.9002

a. Predictors: (Constant), Anxiety

ANOVA

Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	8.359	1	8.359	10.314	.002[b]
	Residual	103.730	128	.810		
	Total	112.089	129			

a. Dependent Variable: Social Relationships

b. Predictors: (Constant), Anxiety

Coefficients

Model		Unstandardized Coefficients		Standardized Coefficients		
		B	Std. Error	Beta	t	Sig.
1	(Constant)	4.024	.154		26.176	<.001
	Anxiety	-.021	.007	-.273	-3.212	.002

a. Dependent Variable: Social Relationships

Table A3.10

Regression between Positive Affect and Environment among youth.

Model Summary

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.501[a]	.251	.246	.6375

a. Predictors: (Constant), Positive Affect

ANOVA

Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	17.465	1	17.465	42.979	<.001[b]
	Residual	52.014	128	.406		
	Total	69.478	129			

a. Dependent Variable: Environment

b. Predictors: (Constant), Positive Affect

Coefficients

		Unstandardized Coefficients		Standardized Coefficients		
Model		B	Std. Error	Beta	t	Sig.
1	(Constant)	1.968	.260		7.577	<.001
	Positive Affect	.048	.007	.501	6.556	<.001

a. Dependent Variable: Environment

Table A3.11

Regression between Negative Affect and Environment among youth.

Model Summary

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.165[a]	.027	.020	.7266

a. Predictors: (Constant), Negative Affect

ANOVA

Model	Sum of Squares	df	Mean Square	F	Sig.

1	Regression	1.902	1	1.902	3.604	.060[b]
	Residual	67.576	128	.528		
	Total	69.478	129			

a. Dependent Variable: Environment

b. Predictors: (Constant), Negative Affect

Coefficients

		Unstandardized Coefficients		Standardized Coefficients		
Model		B	Std. Error	Beta	t	Sig.
1	(Constant)	4.013	.211		19.035	<.001
	Negative Affect	-.014	.008	-.165	-1.898	.060

a. Dependent Variable: Environment

Table A3.12

Regression between Anxiety and Environment among youth.

Model Summary

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.248[a]	.062	.054	.7137

a. Predictors: (Constant), Anxiety

ANOVA

Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	4.285	1	4.285	8.413	.004[b]
	Residual	65.194	128	.509		
	Total	69.478	129			

a. Dependent Variable: Environment

b. Predictors: (Constant), Anxiety

Coefficients

		Unstandardized Coefficients		Standardized Coefficients		
Model		B	Std. Error	Beta	t	Sig.
1	(Constant)	3.935	.122		32.292	<.001

Anxiety	-.015	.005	-.248	-2.901	.004

a. Dependent Variable: Environment