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# Family functioning, depression, anxiety and stress, in time of pandemic, in university men and women of the UAEH

Funcionamiento familiar, depresión, ansiedad y estrés, en tiempos de pandemia, en hombres y mujeres universitarios de la UAEH

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#### **Abstract:**

The confinement due to the COVID-19 pandemic has brought with various social, economic and health problems, significantly impacting the psychological state of people around the world; therefore, the present study aimed to analyze the correlation between the variables of depression, anxiety and stress with family functioning in university men and women, through a non-probabilistic sampling for convenience 256 students of the bachelor's degree were included, of which 176 were women and 80 men, in a range of 17 to 30 years, to whom the DASS-21 scale and the Instrument Perception of Family Functioning FF-SIL were applied. It was found that there is a significant and negative correlation between the variables studied, which means that the higher the family functioning, lower will be levels of depression, anxiety and stress; in addition, significant differences were found between men and women for the anxiety and stress variables.

#### Keywords:

Depression, anxiety, stress, family functioning

#### Resumen:

El confinamiento por la pandemia por COVID-19 ha traído consigo diversas problemáticas a nivel social, económico y de salud, impactando de manera significativa en el estado psicológico de las personas alrededor del mundo; por ello, el presente estudio tuvo como objetivo analizar la relación entre las variables de depresión, ansiedad y estrés con el funcionamiento familiar en hombres y mujeres universitarios; a través de un muestreo no probabilístico por conveniencia se incluyeron 256 estudiantes de licenciatura, de los cuales 176 fueron mujeres y 80 hombres, en un rango de edad de 17 a 30 años; a quienes se les aplicaron la escala DASS-21 y el Instrumento de Percepción del Funcionamiento Familiar FF-SIL. Se encontró que existe una correlación significative y negative entre las variables estudiadas, lo que se traduce en que a mayor sea el funcionamiento familiar menores serán los niveles de depresión, ansiedad y estrés; además, se identificaron diferencias significativas entre hombres y mujeres para las variables de ansiedad y estrés.

# Palabras Clave:

Depresión, ansiedad, estrés, funcionamiento familiar

# INTRODUCCIÓN

Coronaviruses are a family of viruses that generally only affect animals. However, it has been seen that some can also be transmitted to humans; Recently, in December 2019, SARS-CoV-2 was detected in Wuhan, China, a new type of coronavirus that causes the infectious disease called COVID-19, which, when it worsens, causes respiratory difficulties and even death, generally in older people, and who suffer from chronic-degenerative diseases such as hypertension and cardiovascular

problems; By March 11, 2020, the World Health Organization declared this disease a pandemic, and since then, it has spread to various countries around the world. It has wreaked social, economic, physical health and mental health havoc (World Health Organization, 2020). By August 22, 2022, 593,269,262 cases of COVID-19 were confirmed, including 6,446,547 deaths worldwide (World Health Organization, 2021); and also for August 19, 2022, in the Region of the Americas, 174,195,591 cases and 2,807,288 accumulated deaths were reported (Pan American Health Organization, 2021).

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In Mexico, according to the National Institute of Statistics and Geography (2021), COVID-19 disease has become the second cause of death nationwide in men and the third in women, with an estimated number of positive cases nationwide of 7,263,534 and 342,845 estimated deaths as of August 17, 2022 (National Council of Science and Technology, 2021); On the other hand, in the state of Hidalgo (the place where this study was carried out), 115,995 cases of coronavirus and 8,280 deaths have been confirmed (also as of August 22, 2022), maintaining the highest concentration of cases in the municipalities of Pachuca de Soto (27,815 cases and 1,395 deaths), Mineral de la Reforma (13,464 cases and 525 deaths) and Tulancingo de Bravo (8,812 cases and 603 deaths) (Government of the State of Hidalgo, 2021).

# Emotional impact of COVID-19

In addition to the excess mortality, the pandemic and confinement have generated problems at the socio-emotional level in the general population. From this, various studies have been developed in Mexico that help demonstrate this situation, which will be mentioned later.

For Taylor (2019, cited by Orellana and Orellana, 2020), a pandemic is an event with a tremendous collective psychological impact that can influence the generation of emotional responses of concern and social disorder so that during these types of events, populations are in a constant social and emotional crisis. As noted by Scholten et al. (2020), the pandemic has brought with it various psychological and social consequences; the rapid expansion of information about COVID-19 through the media and social networks has caused populations to start creating conspiracy theories and catastrophic ideas, this order to explain the situation that is being experienced, but, far from this becoming a way to cope with confinement, the overload of information has only generated more significant stress and collective hysteria in societies, thus contributing to the emotional and psychological impact presenting itself in a much more significant way.

It is known that, due to the rapid expansion of the virus, the different countries where cases have occurred have asked the population to isolate themselves at home to avoid contagion in such a way that stressors have been generated, such as despair, loss of Freedom, boredom, sleep problems, irritability, anxiety and anguish (Piña-Ferrer, 2020).

The psychological impact that the pandemic and confinement have had on societies (such as Barcelona and Mexico) has been manifested through not very positive emotional responses, which are mostly related to catastrophic ideas; Therefore, it is common for people to present feelings of nervousness, stress, anxiety, depression, fear, sadness, feelings of guilt, uncertainty, decay, resignation, anguish, overwhelmed, confusion, insomnia, critical attitude, irritability, anger and fear at work. , which is diminishing the quality of the mental health of the general population; This is mainly due to the number of stressful factors that were shown during this contingency period, and that has to do mainly with suffering from the disease or fear of contagion,

loss of loved ones or inadequate information that can be consumed on social networks., monotony, boredom, and inadequate basic needs supplies (Balluerka, 2020; Brooks et al., 2020; Morales, 2021). Such prolonged confinement has had a significant impact not only on people's mental health but also on their physical well-being; The interruption of daily tasks and the patterns of Coexistence with others, in addition to the constant fear of contagion, have brought with them not only feelings of stress, anxiety, and depression but also the acquisition of unhealthy habits that can lead to various physical health problems (Balluerka, 2020); Taking these factors into account, it can be affirmed that the situation of social isolation has added new problems to the context of the pandemic that we are currently experiencing, in such a way that the physical and psychological health of societies is being significantly affected. Similarly, in studies carried out in El Salvador and Mexico, it was found that a significant percentage of the participants presented mild symptoms of depression, anxiety, and stress and that these symptoms predominate in women, single people, and with comorbidities, in addition to higher levels of emotional symptoms are present in young people who only study, with an average age of 21.5 years, due to the sudden readjustment that they have to do in their daily activities, in addition to the uncertainty about continuing their studies virtually and the detachment of their interaction with peers in leisure activities, in addition to residing in areas of high contagion; In addition, a strong relationship was found between these symptoms and panic buying, fear of contagion, alteration of routines, and perception of deterioration in family relationships (Galindo et al., 2020; González, Tejeda, Espinoza, and Ontiveros, 2020; Orellana and Orellana, 2020).

# Impact on family life

In a previous reality, the home was considered that private space to rest from all those public tasks that were carried out abroad; however, in what is now called a "new normality," this conception has been broken since all exterior tasks have had to be adapted, at least for the most part, to the reduced space of the home; so that all the tasks can be reduced to a routine that, to this point, for many has been difficult to bear, and on the other hand, it has become a habitat where people live permanently, and personal spaces are shared, invade; now, the home, which used to mean a resting place from the outside world, has become "the battlefield" on which families develop during confinement (Gaytán, 2020).

For Van Bavel et al., 2020 (cited by Pérez, López, and De León. 2022), in contingency states, families must adapt to new circumstances, putting the flexibility to change that arises into practice, or otherwise, evidencing its possible deficiencies. The confinements due to COVID-19 and H1N1 influenza turned families into closed systems, which has revealed the importance of activities outside the home and foreign relations in the balance of the family organization; Given this, families have been forced to "coexist in a forced way," thus, those family systems that are

capable of managing their time and generating resources that allow them to adapt to new forms of organization, present fewer internal conflicts; however, for other families, confinement has only meant a destabilization of family relationships, which is characterized by conflicts between various members, mainly due to boredom and the impossibility of going out; In this way, living together becomes suffocating, manifesting itself in the breakdown of hierarchies, the emergence of previous and new conflicts within the family, and the inability of family systems to deal with these problems.

It has been identified that, during the confinement due to the pandemic in Argentina, in 20% of homes, there has been an increase in anger and arguments, mainly among adults (50%); Likewise, in Mexico, as a result of the confinement, 35.7% of families with small children and or adolescents report severe symptoms of anxiety, while 34.2% of households, as in Argentina, report an increase in discussions and tensions between members. For this reason, intra-family conflicts have become a worrying situation that is aggravated during social isolation. The most affected families are characterized by low levels of schooling and economic problems, in addition to the fact that the life cycle of the family is of the utmost importance in the impact of the pandemic, and it has become visible that families with children, single-parent, single-person and reconstituted are primarily prone to risk factors (United Nations Children's Fund Argentina. 2020; United Nations Children's Fund Mexico, 2020; Huerta, 2020).

As previously mentioned, social isolation in order to reduce cases of COVID-19 infections has opened the opportunity for many families to live a different coexistence, becoming a means of emotional support that allows them to cope with the ravages that the epidemic has brought with it, however, due to the levels of uncertainty, stress, and depression that occur during confinement, conflicts can be generated that impact the way of relating in family, making it difficult to solve problems, even leading to violence (Center for the Study of Traumatic Stress, 2020; Reluz-Barturén & Palacios-Alva, 2021); That is why it is considered essential to have the ability to recognize how each member of the family is feeling emotionally, since this supposes a preparation to be able to face the changes in coexistence, in addition to establishing guidelines that help to adapt to the new way of living within the family (Ibarra and Pérez, s.f.).

As noted by Wang et al. (2020) and Huerta (2020), isolation and the COVID-19 pandemic have become a public health emergency of great importance at the international level due to the psychological and physical consequences that it has generated; Therefore, it has become a challenge for the adaptation of families to the new situations that arise, as well as for the development of strategies that allow the population to reduce the negative impact, thus increasing the psychological resilience of the population in general that allows them to address the situation effectively and quickly in order to reduce the adverse effects it causes.

# Family functioning and emotional responses in crisis situations

As has been pointed out, the family can be a support network in complicated or contingency situations, helping maintain its members' socio-emotional well-being. However, in the same way, it can generate problems that destabilize the members. In Mexico, in a study carried out by Pérez et al. (2021) on family support, depression, anxiety, and stress in university students during the COVID-19 pandemic we are currently experiencing, there are no significant correlations between these variables; however, the results show that students perceive little family support, since displays of affection and adaptability and autonomy skills within the family are seen as insufficient, and therefore they do not perceive the family as a support network; In addition, these individuals present mild symptoms when faced with the variables of depression, anxiety, and stress. In other crises, such as a suicide attempt, it is possible to analyze how family functioning is perceived in a System; In a study carried out by Vargas, Villafaña, Moysén, and Eguiluz (2019), from the perspective of the parents, it was found that, despite the situation experienced, they perceived the family environment as functional, standing out in aspects such as affective involvement, communication, and problem-solving; this even though children with suicidal incidence reported chaotic family dynamics; In this way, it is possible to observe that, although families may have a support function in crises and contingencies, they may also become risk factors for presenting conflicts or dysfunctional emotional symptoms. On the other hand, in studies that evaluate the relationship between the perception of family functioning with the variables of depression, anxiety, stress, and emotional disorders in Peru, it is evident that these are significantly and inversely related (Rho=-.357, Rho =-.679 p <.001); so that, when an individual develops or at least perceives developing in a functional family environment in which there are skills to relate, communicate and adapt assertively, the levels of negative emotional states such as those already mentioned are less frequent, frequency and severity, thus showing that the family is a highly suitable means of emotional support (Palomino & Velasquez, 2021; Yucra, 2016).

#### Family functioning

For Olson (cited by Ferrer-Honores, Miscán-Reyes, Pino, and Pérez-Saavedra, 2013), family functioning refers to how family members interact with their family ties (cohesion), as well as the ability they have to adapt and overcome the difficulties that arise (adaptability); a balanced family functioning contributes to the family being able to fulfill the objectives and functions that have been provided to each one of the members; but this can be affected by stressful factors that unbalance the family throughout the life cycle.

#### Depression and anxiety

Depression is mainly characterized by sadness, anhedonia, feelings of guilt and lack of self-esteem and concentration,

tiredness and sleep, and appetite disorders, which, when chronic, can hinder the person's development in the different spheres of his life. Moreover, even drive her to suicide; Because it is one of the most frequent mental disorders, it is necessary to diagnose it promptly and adequately intervene in the person (World Health Organization, n.d.). For its part, anxiety is the universal emotion of all, characterized by being a stress reaction that has no apparent cause and is less focused than fear; It is a common emotional state in stressful daily situations, and although, to a certain extent, it is necessary to face the daily demands of life, when it exceeds the "normal" intensity it constitutes a pathological situation that causes an enormous physical, psychological and behavioral discomfort, making it impossible for the person to carry out their daily tasks (Fernández, et al., 2012).

For its part, anxiety is a universal emotion of all, characterized by being a stress reaction that has no apparent cause and is less focused than fear; It is a common emotional state in stressful daily situations, and although, to a certain extent, it is necessary to face the daily demands of life, when it exceeds the "normal" intensity it constitutes a pathological situation that causes physical, psychological and behavioral discomfort, making it impossible for the person to carry out their daily tasks (Fernández, et al., 2012).

#### Stress

Stress is a phenomenon with which we live daily in different areas. Even the birth process constitutes a stressful situation, and it is a phenomenon that has allowed the constant adaptation of man to the environment; Although the term stress is often associated with personal discomfort and disease-provoking, this is necessary and inevitable for us. In general terms, the stress response is understood as preparation, defense, and activation in daily life situations. It is essential to differentiate between positive stress (eustress), which generates effective responses that facilitate well-being, and negative stress (distress), which becomes chronic and causes suffering to the person and, therefore, a decrease in well-being; Thus, stress occurs as a coping or flight reaction of the organism in situations that are perceived as threatening, and that is typical of the demands of the environment that can be positive or negative (Barrio et al., 2006).

### **METHOD**

This quantitative study has a non-experimental cross-sectional design with a descriptive-correlational scope. Through the present, it is intended to determine if there is a relationship between perceived family functioning, depression, anxiety, and stress generated by confinement due to the COVID-19 pandemic in university students. The association was analyzed using Spearman's correlation coefficient to determine the degree of relationship between the variables. In addition, a comparison was made between groups of men and women to identify

statistically significant differences using a Mann-U test. Whitney, and for this, the SPSS version 26 program was used.

#### **Participants**

The population includes undergraduate students in the 1st to ninth semesters of a public institution in Hidalgo. The sampling was non-probabilistic for convenience, and this is made up of 256 participants, of which 176 were women and 80 men, with a mean age of 19.93 years, in a range of 17 to 30 years (*DE*=1.884) who answered the online form.

Regarding the sociodemographic data, the sample is characterized by being mostly single (97.7%), having a greater concentration in the fourth and first semesters with 23.7% and 25.8%, respectively, in addition to the fact that most of them are dedicated solely to the school environment (72.7%).

#### Instruments

For the collection of data regarding the variables of depression, anxiety, and stress, the DASS-21 was used in its abbreviated version in Spanish of self-report that contributes to evaluating the negative psychological state of the person (Lovibond and Lovibond, 1995, cited by Tovar, 2019), consists of 21 items, divided into three subscales (depression, anxiety, and stress) that are answered with a Likert scale that goes from 0 (it has not happened to me) to 3 (it has happened to me a lot) according to the experience of the participant during the last week. According to the Laboratory of Clinical Psychology of the Konrad Lorenz University Foundation (s.f.) this scale uses specific clinical cutoff points for each subscale:

- Depression: Mild from 5 to 6, moderate from 7 to 10, severe from 11 to 13, and extreme from 14 to 21.
- Anxiety: Mild from 4, moderate from 5 to 7, severe from 8 to 9, and extreme from 10 to 21.
- Stress: Mild from 8 am to 9 am, moderate from 10 am to 12 pm, severe from 1 pm to 4 pm, and extreme from 5 pm to 9 pm.

Each subscale is composed of 7 items that evaluate specific situations; the depression subscale, for its part, evaluates the lack of pleasant feelings and encouragement that cause disinterest in daily life and self-devaluation; the anxiety subscale evaluates situations of situational anxiety, physiological agitation, and tension, and the subscale The stress test evaluates situations related to agitation, irritability, reactivity, and difficulty relaxing (Rueda & Zamora, 2016). The validation of the scale in the Hispanic population was carried out, in which an alpha coefficient of 0.96 was obtained for the total scale, and 0.91 for the stress subscale, 0.86 for the anxiety subscale, and 0.93 for the depression subscale (Daza, et al., 2002, cited by Tovar, 2019). The family functioning variable was measured with the FF-SIL instrument, which was built as part of the Master's in Health Psychology Program at the UAEH, in order to evaluate family functioning through the variables of cohesion, harmony, communication, permeability, affectivity, roles and adaptability

(Ortega, et al., 1999). The FF-SIL consists of a series of situations that may or may not occur in the family environment, it consists of 14 items divided into the 7 corresponding subscales (2 items per subscale) and which are answered with a Likert scale ranging from 1 (almost never) to 5 (almost always) and the sum represents the familiar functioning of the system as follows:

- Functional family from 57 to 70 points.
- Moderately functional family from 43 to 56 points.
- Dysfunctional family from 28 to 42 points.
- Severely dysfunctional family from 14 to 27 points (Nieto, 2014).

This test was validated in the Mexican population, in which a very good Cronbach's alpha of 0.89 was obtained (Rosales, et al., 2017).

#### **RESULTS**

The study sample was made up of 256 UAEH undergraduate psychology students with a mean age of 19.93 years, in a range of 17 to 30 years (DE=1,884) who responded voluntarily through informed consent, to the online form that contained the instruments that measure the variables presented in this section; Within the form, sociodemographic data were collected, which is shown below in Table 1.

**Table 1**Sociodemographic data of psychology students

Data	Category	Frecuency	Percentage (%)	
		(fi)		
Sex	Women	176	68.8%	
Sex	Men	80	31.3%	
	4°	70	27.3%	
	1°	66	25.8%	
	3°	54	21.1%	
Compaton	2°	28	10.9%	
Semester	6°	19	7.4%	
	9°	11	4.3%	
	8°	5	2.0%	
	7°	3	1.2%	
	Student	186	72.7%	
Occupation	Study and	70	27.3%	
	work			
	Single	250	97.7%	
Civil status	Free union	4	1.6%	
	Married	2	0.8%	

With the aim of exploring the context in which the students live during the confinement due to the pandemic, a price questionnaire was carried out, inquiring about the emotional state and their family life prior to isolation and university life; It was found that 76.2% of the students reside with their family nucleus, in addition, it is evident that despite the fact that a significant percentage of the sample (51.2%) is foreign, most of the students (76.6%) have not left their family core as a result of entering the University during the pandemic, while those who

did (23.4%) had a short period away from it, ranging from one to six months.

The students report that the emotional state they experienced most frequently before confinement was happiness (61.7%), followed by tranquility (23.0%). In comparison, their perception of their family life was reported as mostly good (42.2%) or distant (31.6%). On the other hand, the participants report that the activities that most influence their emotional state now during confinement are academic, leisure, and domestic (91.8%, 57.8% and 57.4% respectively) since they perceive a high load of activities that They can vent with recreational activities.

Regarding the depression subscale of the DASS-21, it was found that both sexes mostly report mild symptoms, this being more frequent in the male sample, representing 43.8% for women and 53.8% for men, while a moderate level is more reported by women (26.7%). Contrasting the results of both groups using a Mann-Whitney U test, no statistically significant differences were observed (Table 2).

 Table 2

 Levels of depressive symptoms in men and women

Sex	Category	Frecuency	Porcentage (%)	
		$(\mathbf{f_i})$		
	Mild	43	53.8%	
	Moderate	14	17.5%	
Men	Severe	12	15.0%	
	Extreme	11	13.8%	
	Total	80	100%	
	Mild	77	43.8%	
	Moderate	47	26.7%	
Women	Severe	19	10.8%	
	Extreme	33	18.8%	
	Total	176	100%	
Sig.		.227**		

Note: \*\*Significance level is .05

For the anxiety subscale of the DASS-21, it was observed that students mostly present mild symptoms, with men reporting it more frequently, representing 52.5% over 34.7% of women; On the other hand, for this variable, women report greater extreme symptoms with 31.3%, while men remain at moderate levels with 25.0%. Using a Mann-Whitney U test, statistically significant differences were observed between both groups (Table 3).

 Table 3

 Levels of anxious symptoms in men and women

Sex	Category	Frecuency	Porcentage	
		$(\mathbf{f_i})$	(%)	
	Mild	42	52.5%	
	Moderate	20	25.0%	
Men	Severe	6	7.5%	
	Extreme	12	15.0%	
	Total	80	100%	

Sig.		.002**	
	Total	176	100%
	Extreme	55	31.3%
Women	Severe	17	9.7%
	Moderate	43	24.4%
	Mild	61	34.7%
	3.61.1	<i>C</i> 1	24.70/

Note: \*\*Significance level is .05

Regarding the stress subscale of the DASS-21, students report mild symptoms more frequently, representing 73.8% for men and 50.6% for women. Conversely, it is notable that women refer to more moderate symptoms at 21.0% and men with moderate symptoms at 11.3%. Using the Mann-Whitney U test, statistically significant differences were observed between the results of men and women (Table 4).

 Table 4

 Stress symptom levels in men and women

Sex	Category	Frecuency	Porcentage (%)	
		$(\mathbf{f_i})$		
	Mild	59	73.8%	
	Moderate	9	11.3%	
Men	Severe	8	10.0%	
	Extreme	4	5.0%	
	Total	80	100%	
	Mild	89	50.6%	
	Moderate	32	18.2%	
Women	Severe	37	21.0%	
	Extreme	18	10.2%	
	Total	176	100%	
Sig.		.001**		

Note: \*\*Significance level is .05

On the other hand, according to the FF-SIL Family Functioning Perception test, both sexes report a moderately functional perception of their family, with 40.0% in men and 39.8% in women, followed by a functional perception of the family. Contrasting the results of men and women using a Mann-Whitney U test, no statistically significant differences were observed (Table 5).

 Table 5

 Perception of family functioning in men and women

Sex	Category	Frecuency	Porcentage	
		$(\mathbf{f_i})$	(%)	
	Severely	2	2.5%	
	dysfunctional			
Men	Dysfunctional	19	23.8%	
	Moderately	32	40.0%	
	functional			

	Functional	27	33.8%
	Total	80	100%
	Severely	10	5.7%
	dysfunctional		
	Dysfunctional	42	23.9%
Women	Moderately	70	39.8%
	functional		
	Functional	54	30.7%
	Total	176	100%
Sig.		.480**	

Note: \*\*Significance level is .05

For the total sample, students mostly present mild emotional states, with 46.9% for depression, 40.2% for anxiety, and 57.8% for stress. In comparison, their perception of family functioning is located in the category of moderately functional with 39.8%. The descriptive statistics of the scores obtained in both instruments are described in Table 6.

 Table 6

 Scores obtained in the FF-SIL test and the DASS-21 scale

	Minimu	Maximu	Mea	Deviatio
	m	m	n	n
Depressio	0	21	7.85	5.531
n				
Anxiety	0	21	6.30	4.829
Stress	0	21	8.92	4.970
FF-SIL	14	70	49.29	11.994

Note: FF-SIL, Family Functioning Perception test

Regarding the correlations of the subscales that make up the DASS-21 and the FF-SIL Family Functioning Perception Test, negative and moderately significant correlations were obtained for the depression and stress subscales; while for the anxiety subscale, the correlation was negative and of low significance (see Table 7); correlations were analyzed using Spearman's correlation coefficient.

**Table 7** *Correlation between the Perception of family functioning and the subscales of the DASS-21* 

Subscale	Depression		Anxiety		Stress	
	P	Rho	P	Rho	P	Rho
FF-SIL	.000	507 **	.000	400 **	.000	460 **

Note: \*\*p < .01 FF-SIL, Family Functioning Perception Test As can be seen, the results show that if there is a mostly functional perception of family dynamics within the home, the levels of depression, anxiety, and stress will be lower.

# DISCUSSION AND CONCLUSIONS

The main objective of this research was to analyze the relationship between family functioning and emotional state in

university men and women. The results were found to determine that there is a negative and significant correlation that goes from moderate to low. These results are in line with those found by Palomino and Velasquez (2021), where it is evident that the better the perception of family functioning, the lower the levels of depression, anxiety, and stress; even though in his research, a sample of the Peruvian Armed Forces was analyzed. For his part, Yucra (2016) reports similar results where a negative relationship is identified between family functioning and some emotional disorders in a sample of university students.

According to the reported results of the emotional symptoms focused on depression, anxiety, and stress, there is an agreement with the data obtained by Orellana and Orellana (2020), Galindo et al. (2020), and González, Tejeda, Espinoza, and Ontiveros (2020) where it is evident that university students present mostly null or low symptoms of the variables already mentioned, followed by lower percentages of high symptoms, especially in the age group of 18 to 21 years old, this is due to the fact that the survey carried out was carried out during phases 2 and 3 of the pandemic, in addition to the fact that, in the case of Mexico, the states of the country that reported the highest anxious, depressive and stress symptoms, They are surrounding the CDMX and the State of Mexico. In these social strata, the number of infections and deaths are higher and therefore cause a greater impact on the population. Regarding the perceived family functioning, a divergence is identified with what was obtained by Estrada (2010) (cited by Pérez, López and de León, 2022), United Nations Fund for Children Argentina (2020), United Nations Fund for Children Mexico (2020) and Pérez et al. (2021) in their analysis of families during periods of confinement, in these a deterioration of family relationships was observed as a result of confinement or the increase in conflicts; while, the results obtained in the present investigation reveal that students perceive family relationships as moderately functional, however, in other contexts and taking into account the perception of family functioning from parents, it can be observed that they usually see the dynamics family as functional, where there is correct communication, cohesion and displays of affection, as mentioned by Vargas, Villafaña, Moysén and Eguiluz (2019) in their study on suicide, where then, the family is evidenced as a means of Extremely important social support in traumatic situations such as suicide attempts and health crises. Regarding the contrast between the groups of men and women, the data obtained show us that there are statistically significant differences for the anxiety and stress variables in these groups, which is also reflected in the studies carried out by Galindo et al. (2020); González, Tejeda, Espinoza and Ontiveros (2020); Orellana and Orellana (2020), who indicate that the symptoms related to these variables are predominant in women, largely due to the overload of activities that this group usually has and the social expectations that are placed on them in terms of compliance with their gender role, which is why women tend to present more intense symptoms of anxiety and stress compared to men, who tend to have a mild expression of these symptoms.

As seen in the literature, the confinement due to the pandemic has opened the possibility for families to acquire new patterns of behavior and conflict resolution, which allows them to perceive better family functioning; It is, therefore, possible that, throughout the period of confinement, students and their families have developed new adaptation skills to the "new normal" that contribute to making conflicts within the home less frequent. We see then that the family becomes a means of support and socioemotional support in contingency situations such as the one currently experienced, which is why there is a relationship between family functioning and emotional states, as mentioned by Reluz-Barturen and Palacios-Alva (2021).

However, it is necessary that in future research, the variables related to the student population that has left the family nucleus for a significant period of time, as well as the population in general, be evaluated in order to identify if these are a determining factor in the emotional levels and perception of family functioning that one has; likewise, studies on these variables are necessary from the perspective of parents and/or guardians who can add relevant data on family dynamics as generators of certain emotional expressions; since the perception that parents and children have about the family environment can diverge; while parents or caregivers may maintain an idea of it, in which communication and conflict resolution are highly functional, children may see the family as a factor that generates unpleasant sensations, conflicts, or perceive little or no support within this context, or vice versa. Likewise, it is necessary to address new studies that take into account variables such as the type of family, the life cycle they experience, the social stratum, socioeconomic and educational position, in addition to the accessibility to health services; since it has been seen that this means a risk factor for presenting dysfunctional interactions or conflicts within the family nucleus. In addition, it is essential to delve into the differences by sex in terms of emotional symptoms and the perception of family functioning, with the aim of identifying whether this is a determining or risk factor in their expression, which would serve as a basis for the development of care programs in these situations taking into account the needs of both groups, the load of activities, the sociocultural conditions in which they develop, gender roles and stereotypes, in order to create more effective interventions that contribute to the improvement of the mental, physical and social health of men and women in our country. On the other hand, this study has some limitations; Firstly, the context of confinement that is currently being experienced, as this makes it difficult to expand the sample and better control of the variables during the answering of the questionnaires and instruments; In addition, being an exploratory study within the Mexican territory, there were no previous studies and investigations that would allow a greater discussion of the results of the correlations carried out, since in other social contexts factors such as culture and language can influence the reported results. Despite these limitations, this research provides relevant results to understand the relationship between emotional state and family functioning;

however, it is necessary to continue investigating these variables in the Mexican population, which allows us to understand this relationship more thoroughly, and subsequently give rise to developing strategies that contribute to maintaining or developing coexistence and assertive communication skills in families during times of contingency such as the one we are currently experiencing.

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