

Research Article

Mental Health: An Empirical Research among Adolescents

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Abstract: This research purely spotlight on the notion of mental health and psychological wellbeing among the school going adolescents. The concept of being healthy is not only the proper functioning of the body rather it means the body and mind working together efficiently and smoothly. Mental health is a factor that contributes to the maintenance of physical health as well as social effectiveness with integrated personality. The aim of the present study is to explore the mental health among school going adolescents. Data of 483 adolescents ranging in the age of 14 to 18 years (216 males & 267 females) was collected from the Government model senior secondary schools, Chandigarh. Subjects filled the mental health inventory developed by Jagdish and Srivastava (1983). All the dimensions of mental health (positive self evaluation, perception of reality, integration of personality, autonomy, group oriented attitude, environmental mastery) were taken into consideration and descriptive statistics was calculated gender wise with the help of SPSS version 25. Results revealed that adolescents were low on positive self evaluation, perception of reality, group oriented attitude, environmental mastery, integration of personality and overall mental health. Both the genders showed similar mental health and minor differences were revealed.

Keywords: Mental health, self evaluation, psychological well being, personality

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INTRODUCTION

World health day April 07, 2017 focused on depression among adolescents which clearly makes that mental health among adolescents is a critical problem now a days. Worldwide 10-12% of children and adolescents experiences mental disorders. Many of the psychiatric disorders have an onset in childhood or adolescence which increases the risk for poor physical health, problems in social relationships, reduced psychological well being and growth and increases the financial difficulties too (Kessler *et al.*, 2005). 14 to 18 is the age where adolescents are involved into the studies and facing much difficulty in academics like academic pressure, difficulty in studying at home, loss of interest in academics, lack of concentration, negative attitude of teachers, parents too pressurize their child to get good grades in score cards, poor school discipline etc. No doubt there are many other challenges in front of adolescents and faces difficulty there too like physical changes, emotional changes, mood swings, poor self esteem, inability to communicate with parents, health problems, internet addiction, peer pressure, mobile addiction, substance abuse and social problems like dating and relationships etc. If these problems remains untreated than these conditions severely influence adolescent's development, their educational attainments and potential to live fulfilling and productive lives. Psychosocial problems have emerged as a threat in the overall development of adolescents

(Jain, Singh, Muzammil & Singh, 2014). In the present scenario adolescents are much more conscious, aware and have curiosity to learn from the environment, simultaneously they face competition and internal conflicts. Psychosocial problems are evident among school going adolescent as per the findings by Timalisina, Kafle and Timalisina, 2018. A study done by Sharma, Gupta, Luthra, and Mishra (2018) in Dehradun showed that the overall prevalence of psychosocial problems was 40.5% among adolescents. Thus, this is the critical time for developing good mental health and resolving all the issues among adolescents. India contributes 21% of adolescent's population in the world. The prevalence of child psychiatric disorders in India has been found to be 7% in the community and 23% in schools (Malhotra & Patra, 2014; Murthy, 2017). Thus the aim of the present investigation is to study the mental health of the adolescents. Based on the results of the previous investigation it was hypothesized that there are mental health problems among adolescents.

METHODOLOGY

Participants and Procedure

In the present research sample consisted of 483 adolescents (267 males & 216 females) with the age range of 14 to 18 years and data was collected from different Government Model Senior Secondary Schools of Chandigarh city.

Inclusion Criteria

- Students in the age of 14 to 18 years.
- Only Government Model Senior Secondary Schools were included to maintain homogeneity

Exclusion Criteria

- Students above or below the age of 14 to 18 years
- Private school students
- Students suffering from any psychological or physiological disease

With the prior permission of the Chandigarh administration and school authorities regarding the purpose and data collection a rapport were built up with the adolescents. The purpose of research was explained to the subjects and assured that confidentiality will be maintained. Instructions were provided and mental health inventory was administered with the subjects.

Tools Used

Mental Health Inventory (MHI, Jagdish & Srivastava, 1983) was administered in the present research to study the mental health of school going adolescents. Mental health inventory consists of 54 items and each item has 4 alternatives. Some of these items are positive and some items are negative and these items are further divided into 5 dimensions as Positive Self Evaluation (PSE), Perception of Reality (PR), Integration of Personality (IP), Autonomy (AUTNY), Group Oriented Attitudes (GOA) and Environmental Mastery (EM). The reliability of the inventory is .73 and the validity is .57.

Statistical analysis

Descriptive statistics was calculated with the help of SPSS version 25.

RESULTS AND DISCUSSION**Table 1.** Descriptive Statistics of the mental health among male adolescents

	Males		Females		Description
	Mean	SD	Mean	SD	
Dimensions of Mental Health					
Positive Self Evaluation	25.70	4.04	25.37	3.64	Poor
Perception of Reality	19.70	3.51	20.26	3.55	Poor
Integration of Personality	27.25	5.49	27.98	4.91	Poor
Autonomy	16.13	3.33	15.94	3.41	Average
Group Oriented Attitude	24.54	4.45	24.21	3.79	Poor
Environmental Mastery	23.56	4.44	23.34	3.89	Poor
Overall Mental Health	136.88	10.69	137.09	8.44	Poor

Table – 1 shows the means and standard deviations of the mental health of adolescents. Table values revealed that there is no difference between males and females mental health. The mean±SD value of the male adolescents on positive self evaluation was found to be 25.70±4.04 and for female adolescents it was 25.37±3.64. It clearly shows that they evaluated self as worth less and low on self identity and self confidence. This might be because as school going adolescents try to make identity and not realizes his or her potentialities. According to Erickson (1968) this is the stage of identity vs confusion, where adolescents search for a sense of self and personal values, beliefs and goals.

Mean±SD value of the male adolescents on perception of reality was found to be 19.70±3.51 and for females it was 20.26±3.55. Results also revealed that both the genders have narrow look on the world. However mean values shows the slight differences between genders as female adolescents were found to be high on perception of reality.

On integration of personality for males the mean±SD value was comes out to be 27.25±5.49 and for females it was 27.98±4.91. Integration of personality means the integration of psycho physical

traits of personality. Findings revealed that both the males and female adolescents were found to be low on emotional intelligence, high on instability and have loose organized reactions.

The mean±SD value of the male adolescents on autonomy was found to be 16.13±3.33 and for females it comes out to be 15.94±3.41. Mean values depicts the average description on autonomy. Further no gender differences exist on autonomy might be because in today's modern scenario no discrimination exist and both males and females treated equally. Only discrimination between boys and girls leads to differences in development, however parents in today's world much more aware about rights of boys as well as for girls.

On group oriented attitude the value of mean±SD of the male adolescents was 24.54±4.45 and for females it was 24.21±3.79. Findings revealed that both the gender were low on ability to get along with others. However, they were low on group oriented attitude might be because adolescents in this age developing identity, competition is high in academics as well as in other areas and have a comprehensive view on change which may lead the adolescents towards individual oriented behavior approach.

The mean±SD value of the male adolescents on environmental mastery was found to be 23.56±4.44 and for females the mean±SD was 23.34±3.89. Environmental mastery includes the ability to work and take responsibilities. Values disclose that adolescents were not able to modify their behavior according to environmental situations. Still maturity was missing among adolescents and that is one of the reasons that adolescents not act as per situations in the surroundings. For the total mental health the mean±SD was found to be 136.88±10.69 and for females it was 137.09±8.44. Results found to be low on mental health between gender and the cause of this low mental health was not one however it may be many.

Another cause might be work pressure from teachers as well as expectations from parents may lead to the adolescents towards poor mental health. Students in higher classes are reminded again and again by parents, guardians and teachers about the approaching high school examinations. The excessive stress on attending coaching classes in order to get into professional streams is much more than the students studying in lower classes. Thus they are under constant pressure to be more serious and committed to academics than the students of junior classes. Therefore, they have poor mental health. The competition is very high among today's generation and all wants to achieve success from all corners of their academic life which requires too much efforts, dedication, concentration, positive attitude and efficiency. The adolescents who are unable to cope up with such pressures, feels burden and sometimes take extreme steps like suicide or faces number of psychological problems like depression, anxiety, frustration etc. This entire pressure and work load makes the well being poor. Both the gender working on identity formation and have role confusion which emerges as another factor which contributes towards the poor mental health of the adolescents.

Poor mental health has effects on wider health and its association with social outcomes like alcohol, smoking, tobacco and illicit substance use, adolescent's pregnancy, school dropouts and delinquent behaviors. The vast majority of tobacco users worldwide begin the use of tobacco during adolescence. Systematic review of 15 studies across India aged 13-15 yr showed a median prevalence of tobacco use (ever users) to be 18.2 per cent; 14 per cent among males and 6.3 per cent among females (Pal & Tsering, 2009).

Other reason for poor mental health are the severe psychological trauma suffered as a child, adverse childhood experiences are important determinants of mental disorders (Felitti 2009). Exposure to early toxic stress, including maltreatment, family violence, and parental instability, has immediate and lasting disruptive effects on physiological development, health,

and mental health (Shonkoff *et al.*, 2012). Childhood disparities remain in mind which unconsciously affects the current affairs of the individual.

Senior secondary school students have too much in their cognitive areas upon which they are thinking like they have their coaching classes assignments, school assignments, extracurricular activities (sports, inter school competition etc.), exam anxiety, performances, friend circle etc. These pressures have direct effects on mental health. Irrespective of these things there are many problems of adolescents like school violence, peer pressure, internal conflicts, peer rejection, difficult challenges in life, hormonal changes, fatigue etc.

Social media or social networking sites also affect mental health negatively. No doubt media and social networking sites have positive aspects too but it has more negative impact on adolescents. Facebook, twitter, whatsapp, instagram, snapchat are some of the networking sites through which adolescents share personal information, photos, ideas etc., and always expect positive reply. If they do not get positive feedback they become very upset and conscious. Simultaneously adolescents also involved into watching pornography, exchanged images and videos which are not socially acceptable. This undue exposure of all these things without limiting any check affects their mental health. This mobile phone and internet addiction decreases outdoor activities and social interaction. Facebook hits 100 million Indian users, which is the second highest after USA according to face book's own database (Press Trust, 2014) and this data clearly gives the information that majority of the Facebook users are adolescents. Most young people spend several hours per day on the internet or playing electronic games.

Other reasons could be the availability of the population during collection of data; adverse family climate, lack of resources, awareness, guidance etc.

During the data collection when the researchers interacted with the students than it was came in the knowledge that those students who belongs to lower communities were also faced a tag that they belong to some specific category and the attitude of teachers and fellow friends is not up to the mark due to number of unknown reasons and they are also not giving proper attention in the schools.

Suggestions to improve mental health of the adolescents

Studies suggest that sound mental health is an essential constituent of our harmoniously developed personality. Sound mental health is must for students to get a stand in carrier and future. Following are the suggestions for the parents, teachers, and adolescents and of course for the society as well to improve the mental health of the adolescents.

- First of all there must be proper parental support and parents should not adopt the authoritarian parenting style.
- Parents should spend time with their children and have a healthy talk regarding school activities, academics, friends etc.
- Prepare the child that if not succeed in achieving the desired goal than how to cope up with the situation.
- Give them responsibility to the children so that they may experience a sense of responsibility.
- Consistent interaction with adolescents on all issues of family, society, profession etc.
- Consistency in the communication between parents and their children.
- Continuous encouragement.
- Reinforcement for the students in every success and achievement.
- Counseling of the teachers, parents as well as of the students.
- Talking therapy about problems or difficulties.
- Innovative lectures on self acceptance, encouragement, motivation etc.
- After school entertainment (sports, watching movie, going out with friends and family).
- Hormonal changes in teenagers may make them act impulsively. It is very important to talk with your children and make them understand and clear.
- Do not say NO to internet as they could be doing the productive things on the system rather use parental control. Guide them as a parent but never decide for them.
- Limit the use of mobile phone.
- Adolescents are very aggressive too so nurturing relationships at home can help them low on aggression. Teach them life skills.
- Try alternative ways for being with the child like going out together, doing yoga etc.
- As a parent or teacher you have to intervene if child is falling into bad company. Adolescents are very sensitive thus to talk with the child in a soft manner as they may not take criticism well.

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