

A Study To See The Effect Of Mental Health Issues On Youth

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ABSTRACT

The objective of the study was to see the effect of Mental Health Issues on Youth. The locale of the study was confined to the state of Rajasthan. The total sample for the present study consisted of 50 respondents. Sample will be selected by purposive random sampling method. The respondents were divided on the basis of gender i.e. male and female. Mental health check list

(Dr. Pramod Kumar ,2005) will be used. The results indicates that mental health issues affect both females and males and gender difference will be found for mental health.

Key Words Mental Health Issues, Anxiety, Stress, Depression, Youth

INTRODUCTION

Mental health is the level of psychological well-being or an absence of mental illness. It is the state of someone who is functioning at a satisfactory level of emotions and behaviors. Mental health may include an individual's ability to enjoy life, and to create a balance between life activities and efforts to achieve psychological resilience. According to the World Health Organization, mental health includes "subjective well-being, perceived self-efficacy, autonomy, competence, inter-generational dependence, and self-actualization of one's intellectual and emotional potential, among other.

Mental health includes our emotional, psychological, and social well-being, mental well-being. It all about how we our think, feel, and act and behave. It also helps to determine how we handle stress, solve problem and overcome difficulties. Mental health is important at every stage of life, from childhood and adolescence through adulthood. According to **World Health Organization** "There is no health without mental health." The term 'mental health' is sometimes used to mean an absence of a mental disorder.

Mental health can affect physical health, daily life, relationships, work study job etc. Mental health also includes a person's ability to enjoy life, to attain a balance between life activities and efforts to achieve psychological resilience.

According to the **WHO (World Health Organization)**, mental health is:

"...a state of well-being in which the individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community." Good mental health is absence of mental illness. It can be seen as a state of mental health that allows one to flourish and enjoy life completely. Some of the factors that affect the mental health of youth are as follows: Self -Esteem, feeling loved, confidence, family breakup or loss difficult behavior, physical ill health etc.

Some common **mental health issues** that affect youth are Anxiety, Stress Attention-Deficit Hyperactivity disorder, Conduct disorder, Depression, Bipolar disorder, Eating disorder, Schizophrenia, Suicide.

Anxiety is a feeling of uneasiness, such as worry or fear. Each one of us has anxiety issues at some point in our life like sitting an exam, having medical test, job interview etc.

According to American Psychological Association - anxiety as "an emotion characterized by feelings of tension, worried thoughts and physical changes like increased blood pressure."

Anxiety is a normal reaction to stress, and sometimes it helps youth to deal with dense or overwhelming situations. Numerous youth, face many problems like public speaking, final exams, important athletic competitions, co-curricular activity, career, money problem, health problem, family problem etc. That time an increase in heartbeat or excessive sweating and brain responds to anxious feelings.

Anxiety disorders are the most common mental health conditions in the United States. Actually, over 40 million people are affected by anxiety disorders at least once in their life. However, it affects female as well as males.

Stress is a feeling of strain and pressure is a type of psychological pain. Stress can be external and related to the environment but sometime cause may be negative emotion and anxiety.

stress as a significant life event or change that demands response, adjustment, or adaptation.

Stress as a physiological response pattern and was captured within his general adaptation syndrome .

Depression- Sadness, feeling down, having a loss of interest or pleasure in daily activities - these are symptoms familiar to all of us. But, if they hang on and affect our life factually, it is called depression

Youth is the stage of constructing the self-concept. The self-concept of youth is influenced by variables such as peers, lifestyle, gender, and culture. It is a time of a person's life when their choices are most likely to affect their future youth is associated with young men from 15 to 35 years of age.

REVIEW OF LITERATURE

Darryl L.Read &et.all (2018) Purpose of the present study was to investigate whether attachment-related anxiety and avoidance are associated with symptoms of social anxiety and whether cognitive emotion regulation strategies play a role in the relationship between adult attachment and social anxiety. A sample of 253 adults (male n = 47, 18.6%; female n = 202, 79.8%; gender not disclosed n = 4, 1.6%) ranging in age from 18 to 74 years (M = 33.12, SD = 11.56) completed an online questionnaire that consisted of the Experience in Close Relationships–Revised Questionnaire (ECR-R); The Inventory of Interpersonal Situations Discomfort scale (IIS-D); and The Emotion Regulation Questionnaire (ERQ). Results indicated that both attachment anxiety and attachment avoidance have a direct effect on indices of social anxiety symptomology. Reappraisal partially mediated the relationship between attachment anxiety and social anxiety. However, the relationship between attachment avoidance and social anxiety was not mediated by the use of reappraisal and suppression. Findings of the study have implications for the development of clinical interventions targeting mediators of psychological distress associated with social anxiety.

Filip Van Droogenbroeck & et.all (2018) Studied on the gender difference in mental health problems among youth and the role of social support results from the Belgian health interview surveys 2008 and 2013 For this study respondents of the age of 15 to 25 years. Multivariate analysis of variance was used to investigate psychological distress, anxiety and depression among 713 boys and 720 girls taken from two successive waves (2008 and 2013) of a representative sample of the Belgian population (Belgian Health Interview survey). Psychological distress was measured by the General Health Questionnaire, anxiety and depression by the Symptom Check-List-90-Revised. Results show gender differences were found for psychological distress, anxiety and depression with girls reporting significantly higher scores than boys. Multivariate analysis of variance revealed that adolescents who are dissatisfied with their social contacts and experience poor social support reported more psychological distress, anxiety and depression. In addition, young adult boys (20–25 years of age) were more likely to experience psychological distress when compared to late adolescent boys (15–19 years of age). Finally, the prevalence of anxiety and depression increased substantially between 2008 and 2013 for girls and to a lesser extent for boys.

JLP Staff (2017) studied on Difference in Men and Women's Mental Health. Mental health looks different for men and women, too. A study on mental health and gender by the American Psychological Association found that women are more likely to be diagnosed with anxiety, depression and post-traumatic stress disorder (PTSD), while men are more likely to suffer from substance abuse issues and suicide.

Mahnaz Fallahi Khesht Masjedi & et.all(2017) Studied on Comparing Depressive Symptoms in Teenage Boys and Girls. The sample was taken of 191 depressed youth, 108 males and 83 females age group of 13 to 19 years old. Data collected for 10 years from 2005 to 2015 and their depressive symptoms were evaluated by the Beck Depression Inventory-Second Edition.

Results showed that depressed girls felt sadness, guilt, punishment, worthlessness, low energy and fatigue, or more asthenia, whereas depressed boys have symptoms such as irritability, depression, suicidal thoughts, or desires to reduce their pleasure. The results of t-test showed that the difference between the total scores of boys and girls with depressive disorder (16.93) is significant at 0.001. F values for feeling sad (58.13), hatred of self (12.38), suicidal thoughts or desires (12.97), restlessness (17.35), and irritability (46.41) were significant in the 0.001. Conclusions came out that experiencing depression according to the role of gender was different in boys and girls. Gender can have an effective role in showing depression symptoms in adolescents.

Anne Gulland (2016) Studied Woman has higher rates of mental disorder than men. Women are more likely to have mental health problems than men, with young women at particularly high risk, the biggest survey of mental health disorder and treatment in England has found. The Adult Psychiatric Morbidity Survey, conducted every seven years are based on interviews with a cross section of the general population aged 16 and over, found that

one in six adults (17%) had a common mental disorder—one in five women (20.7%) and one in eight men (13.2%). Common mental disorders were classified as generalized anxiety disorder, depression (including mild, moderate, and severe), phobias, obsessive compulsive disorder, panic disorder, and non-specified disorder.

Deepa K Damodaran & Varghese Paul K (2016) the aim of this study to investigate the gender differences in mental health among youth in Kerala. The participants were taken of 211 undergraduate students between 18 and 24 years. The data were collected using the Demographic Performa and the Mental Health Inventory (MHI). Results showed that youth in Kerala had average mental health. There were no significant associations between demographic characteristics and mental health. T-test revealed no significant gender difference in overall mental health but gender difference was observed in General positive affect. General positive affect was greater among males than in females. Findings of the current study conclude that male and female youth of Kerala do not differ in terms of their mental health.

Aliriza Arenliu & et.all (2016) This paper focused on gender differences in depression symptoms. It takes into consideration relevant contextual factors of a country in transition. This paper's was analyzed data was extracted from European Social Survey, Sixth Round (ESS-6). ESS uses strict probability samples of the resident national population, aged 15 or older, and living in private households. Females reported a significantly higher mean depression on average ($M = 8.14$; $SD = 3.88$) compared to males ($M = 7.56$; $SD = 3.86$) at $t(1247) = 2.604$, $p < .009$. The average for depressive symptoms found in the Kosovar population was higher than the averages showed in other European countries, but corresponded with those in Eastern European countries.

Raminder Singh (2016) studied to investigate the stress among school-going adolescents in relation to psychological hardiness and also to study the gender and locale-wise differences in various dimensions and components of stress. Sample were taken of 200 (100 rural and 100 urban) adolescents studying in 10+1 and 10+2 classes in four schools (2 rural and 2 urban) of the Muktsar Sahib District of Punjab. Dr. Abha Rani Bisht's Battery of Stress Scales (1992) and Nowack's Psychological Hardiness Scale (1990) were employed to measure the adolescents' various dimensions and components of stress and psychological hardiness respectively. The results showed that there existed significant gender differences among school-going adolescents in terms of their existential stress, achievement stress, academic stress, self-concept stress, self-actualization stress, physical stress, social stress, institutional stress, financial stress and superstition stress, whereas significant locale-wise differences among school-going adolescents were found only in terms of existential stress, role stress, institutional stress and financial stress. Apart from the above, stress among school going adolescents was found to be significantly negatively correlated with the psychological hardiness of the adolescents.

Gerhard Meisenberg, Michael A. Woodley (2015) the present study investigates the social and cultural conditions that favor higher female relative to male happiness and life satisfaction. Results from more than 90 countries represented in the World Values Survey show that conditions associated with a high level of female relative to male happiness and life satisfaction include a high proportion of Muslims in the country, a low proportion of Catholics, and absence of communist history.

Ajay Kumar Bakhla & et.all(2013) Studied on anxiety in school students :Role of parenting and gender. Methods was used a cross sectional study all students of both sexes studying in class VIII, were assessed using the Spence anxiety scale (children version). Results: The sample consisted of 146 (55% male and 45% female) with a mean age of 12.71 years. A total of 16 (11%) students scored above cutoff for high anxiety, the mean scores across gender shows that female students scored significantly higher in total and all sub types of anxiety. Most of the students perceived their parents as democratic and other two authoritarian and permissive type of parenting were almost equal. There was significantly higher anxiety among the students who perceived their parents as authoritarian. Conclusions were that prevalence of high anxiety was 11% in class VIII students. High anxiety in students was significantly associated with female gender and authoritarian parenting pattern as perceived by the children.

Sao Paulo (2013) Aim of this study to assess the prevalence of anxiety disorders and associated factors in young adults. Cross-sectional population-based study of individuals between the ages of 18 and 24 years selection within the sectors was performed according to a systematic sampling process. Anxiety disorders were assessed using the Mini International Neuropsychiatric Interview . The final sample comprised 1,560 young adults. Results of this study was participants who were diagnosed with anxiety disorders, 12.3% had agoraphobia, 9.7% had generalised anxiety disorder, 4.0% had social phobia, 3.3% had obsessive-compulsive disorder, 2.5% had panic disorder, and 2.1% had post-traumatic stress disorder; only 23.8% had received any previous treatment. Anxiety disorders were associated with sex, socioeconomic status, psychiatric problems in parents, alcohol abuse, and tobacco use. Conclusions was the identification of factors associated with anxiety disorders in young people enables us to develop intervention strategies. Anxiety disorders are not only highly prevalent but are also associated with significant functional impairment, significant reductions in quality of life, lower productivity, and higher rates of co morbidities.

Carmen P. McLean & et.all (2011) Studied on gender affects age of onset, chronicity, comorbidity, and burden of illness. Gender differences in DSM-IV anxiety disorders were examined in a large sample of adults (N = 20,013) in the United States using data from the Collaborative Psychiatric Epidemiology Studies (CPES). The lifetime and 12-month male:female spread ratios of any anxiety disorder were 1:1.7 and 1:1.79, serially. Woman had higher rate of anxiety. These results suggest that anxiety disorders are not only more prevalent but also more disabling in women than in men.

Gustavo Kinrys & Lisa Wygant (2005) Studied on anxiety disorder in women :does gender matter to treatment? Women have a higher risk of developing lifetime anxiety disorders compared with men. Genetic factors and female reproductive hormones may play important roles in the expression of these gender differences.

M.Pilar Matud(2004) Aim of this study to examine gender differences found in stress sample were taken of 2816 people (1566 women and 1250 men) between 18 and 65 years old, with different sociodemographic characteristics. The results of MANCOVA, after adjusting for sociodemographic variables, indicated that the women scored significantly higher than the men in chronic stress and minor daily stressors. the women rated their life events as more negative and less controllable than the men. Furthermore, we found gender differences in 14 of the 31 items listed, with the women listing family and health-related events more frequently than the men, whereas the men listed relationship, finance and work-related events. The women scored significantly higher than the men on the emotional and avoidance coping styles and lower on rational and detachment coping. The men were found to have more emotional inhibition than the women. And the women scored significantly higher than the men on somatic symptoms and psychological distress. Although the effect sizes are low, the results of this study suggest that women suffer more stress than men and their coping style is more emotion-focused than that of men.

OBJECTIVE

- To see the effect of Mental Health Issues on Youth (Male and female).

HYPOTHESIS:

There is no significant difference in the mental health issues of youth both male and female.

SAMPLE: The local of the study was confined to the state of Rajasthan. The total sample for the present study consisted of 50 respondents. Respondents were divided on the basis of gender i.e. Male and Female.

DESIGN OF THE STUDY: Ex post factorial design was formulated for the present study.

TOOL: Mental health check list (*Dr. Pramod Kumar ,2005*) was used to collect data in this study.

PROCEDURE

Mental health check list was administered individually upon the Subjects. Brief instructions were given to them. The answered questionnaires were collected and scored according to the manual.

The scores obtained were analyzed statistically. Measures of central tendency and variability and t-value were calculated to see the effect of independent variables on youth.

RESULT AND DISCUSSION

Table 1: Means, Standard deviation and t-value scores of youth i.e. Male and Female on Mental Health.

Gender	Mean	Standard Deviation	t-value
Male	7.8	4.36	
Female	9.2	3.8	

Table 1 shows: The above table we can see that the Mean for man is 7.8 and for female 9.2 for variable Mental Health. It can be concluded that males have better mental health as compared to females.

Our results get support that mental health issues affect both females and males and gender difference will be found for mental health. Females reporting significantly higher scores than males. Females have more anxiety than males. Females live more stress than males. Females find common signs of poor mental health such as feeling of hopelessness, Restless, fainting, singleness, headache, insomnia. Mental health problems affecting more women than men.

Young people's mental health is one of the most challenging health issues of our times. It is estimated that half of all mental health problems emerge before the age of 14, with three quarters having appeared by the age of 24 (Kessler and others 2005). The serious consequences of emotional and behavioral problems for young people's life outcomes in many domains, and even their life expectancy, are well-documented (Goodman and others 2011; Richards and others 2009).

Mental health problems affect both men and women, but not in equal measure. In England, women are more likely than men to have a common mental health problem and are almost twice as likely to be diagnosed with anxiety disorders.

In 2013, were recorded in the UK for people aged 15 and older. Of these, 78% were males and 22% were females. 10% of mothers and 6% of fathers in the UK have mental health problems at any given time. One in five (19.1%) women had CMD symptoms, compared with one in eight men (12.2%) (Mental Health Foundation). Women are more likely to report physical and emotional symptoms of stress than men, such as having had a headache (41 percent vs. 30 percent), having felt as though they could cry (44 percent vs. 15 percent), or having had an upset stomach or indigestion (32 percent vs. 21 percent) in the past month.

CONCLUSIONS

Mental health issues are found in both females and males but it affects females more than males and gender difference will be found for mental health.

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