



MENTAL HEALTH OF ADOLESCENTS WITH REFERENCE TO GENDER, LOCALITY AND TYPE OF FAMILY

V.SEKHAR BABU¹, Dr.M.ESTHER SUNEELA²

¹Research Scholar, Department of Education, Acharya Nagarjuna University

²Research Supervisor, Department of Education, Acharya Nagarjuna University

Abstract:

This study investigates the mental health of adolescents and its relationship to academic achievement. The sample consisted of 1000 9th grade students in Guntur District, Andhra Pradesh, India. Data was collected through self-reported questionnaires on mental health and academic performance. The findings reveal that the majority of students (66.16%) have above-average mental health. There is a significant gender difference, with boys scoring higher than girls in mental health. Locality (rural vs urban) has no significant impact on mental health. Students from joint families report better mental health compared to those from nuclear families. The study highlights the importance of mental health for adolescents, and the potential influence of gender and family structure.

Mental health during adolescence is of crucial importance as it significantly impacts an individual's overall well-being and development. This period of life, typically spanning from the early teenage years to early adulthood, is marked by various physical, emotional, and social changes. Adolescence is also a time when many mental health conditions first emerge or become more apparent. The following are the some important reasons why mental health is important in adolescence period:

➤ **Emotional well-being:** Adolescents undergo intense emotional experiences and hormonal changes, which can lead to heightened vulnerability to mental health issues. Promoting positive mental health during this phase helps adolescents better manage stress, regulate emotions, and develop healthy coping mechanisms.

➤ **Academic performance:** Mental health directly influences an individual's ability to concentrate, learn, and perform academically. Adolescents facing mental health challenges often struggle with schoolwork, attendance, and overall academic achievement. Prioritizing mental well-being can enhance academic outcomes and support future success.

- **Healthy relationships:** Adolescence is a critical time for forming and maintaining relationships, both with peers and family members. Good mental health fosters healthy social interactions, communication skills, empathy, and the ability to build and sustain meaningful connections.
- **Long-term well-being:** Mental health issues in adolescence, if left unaddressed, can have long-lasting effects into adulthood. Early intervention and support for mental health concerns can reduce the risk of chronic mental health conditions and improve overall quality of life in the long run.
- **Resilience-building:** Adolescence is a stage where individuals develop resilience skills to navigate life's challenges. Promoting mental health during this period equips adolescents with coping strategies, problem-solving abilities, and a stronger sense of self, fostering resilience and adaptability.
- **Prevention of self-harm and suicide:** Adolescence is a vulnerable time for self-harm and suicidal ideation. Mental health awareness, access to support, and early intervention can play a crucial role in preventing self-harm, reducing suicidal tendencies, and promoting overall well-being.

To prioritize mental health in adolescence, it is essential to foster a supportive environment that includes access to mental health resources, education on emotional well-being, destigmatization of mental health issues, and open communication channels. It is equally important to involve parents, schools, healthcare professionals, and the broader community in creating a comprehensive support system for adolescents.

Mental Health and Academic Achievement:

Mental health and academic achievement are two interconnected aspects of an individual's life that significantly impact their overall well-being and success. Mental health plays a crucial role in academic achievement by influencing the cognitive processes necessary for learning, concentration, and memory retention. When students face mental health challenges such as anxiety, depression, or stress, their ability to focus and absorb information can be severely compromised. Consequently, their academic performance may suffer, impacting their grades and overall achievements. In a longitudinal study by Smith et al. (2016), it was revealed that students who reported better mental health in high school achieved higher levels of educational attainment in adulthood. Mental health affects students' motivation and drive to excel academically. A positive mental state promotes a sense of purpose and self-efficacy, encouraging individuals to set goals, work diligently, and persist through challenges. Conversely, poor mental health can lead to a lack of motivation, reduced productivity, and decreased engagement in academic activities.

Mental health issues can have profound social and emotional consequences, further impacting academic achievement. Students experiencing mental health difficulties may struggle with interpersonal relationships, feel isolated, or face bullying, all of which can negatively affect their emotional well-being and academic progress. A meta-analysis by Roberts and colleagues (2017) revealed a significant association between mental health problems and increased risk of school dropout. Eisenberg et al. (2009)

found that students with poor mental health, including depression and anxiety, experienced lower academic achievement. Creating a supportive and inclusive environment that values mental health is essential for fostering positive social interactions and enhancing academic performance.

Academic stress and pressure can contribute to the development or exacerbation of mental health issues, while poor mental health can impede academic success. This reciprocal relationship emphasizes the need for comprehensive support systems that cater to students' mental well-being alongside their academic needs. Recognizing the importance of mental health in academic achievement, educational institutions are increasingly implementing initiatives to support students' mental well-being. These include counseling services, mental health awareness campaigns, and stress management workshops. By addressing mental health concerns proactively, schools and universities can create an environment conducive to optimal academic performance.

Review of related Literature:

Pascoe, M. C., Hetrick, S. E. and Parker, A. G. (2020) carried out a narrative review of research studies based on the impact of academic stress on both secondary and tertiary level students. The findings of the review highlighted a range of negative effects of academic stress on students' learning capacity, academic performance, physical health as well as overall mental health. It was suggested in the study that intervention programmes should be initiated in educational institutions to enhance good stress management skills and abilities in young people.

Dar and Deb, (2021) made an attempt to study the impact of armed conflict on mental health among young adults in Kashmir. Findings unveiled that 99.7% of participants reported exposure to conflict, 95.4 % experienced psychological distress, 60.3% mentioned physical sickness, and 91.2% found others mental health being affected and 99.3% expressed that their education was severely affected as a result of the conflict in Kashmir.

Pandia et al., (2021) have taken up a study to determine the association between mental health problems and socio-demographic variables among adolescents. Results revealed that mental health problems were more prevalent amongst adolescents in junior high school and residence in district area. Mental health problems in adolescents were associated with education level and residence area.

War and Ramanathan, (2021) assessed the mental health of college students in Kashmir, India. A cross-sectional study was conducted on 480 students in the 18-24 years old age group. Further the findings unveiled that self-efficacy had a positive correlation with mental health. Moreover the role of self-efficacy in enhancing mental health was validated in the present study. Therefore findings suggest the need for enhancement of self-efficacy for promotion of mental health among college students.

Thapliyal (2022) studied the relationship between mental health and academic achievement in senior secondary school students and measured the mental health of students with the help of the Mental Health

Scale (MHS) developed by Dr. Talesara and Dr. Bano. The findings of the research reflected that the mental health of students has a significant positive relationship with academic achievement of the students.

Ranjit Kumar Singh and Sarita Goswami (2022) conducted research the mental health of Schedule Tribe secondary school students in relation to their academic achievement. The Mental Health of students was assessed by Mental Health Battery (MHB) developed and standardized by Kumar and Gupta. The MHB contains 130 items and measures the mental health of the 13 to 22 years age group. The academic achievement of students was assessed by the marks obtained by the students in their last annual exams. The findings indicated that there exists a statistically significant positive relationship between Mental Health and academic achievement of Schedule Tribe secondary school students.

Ravi Babu M (2023) conducted a study on Mental Health among secondary school students with respect to gender and social status. The present study was conducted on 600 secondary school students from Medchal Malkajgiri district of Telangana State. The result reveals that there was a significant difference in mental health behaviour aspects with respect to gender and social status among secondary school students.

Objectives of the Study:

1. To find out the level of Mental Health of Adolescents and to classify them.
2. To find out the influence of the following variables on Mental Health and of Adolescents: a)
Gender b) Locality c) Type of Family

Hypotheses of the study:

1. There is no significant difference between male and female adolescents in their Mental Health.
2. There is no significant difference between rural and urban adolescents in their Mental Health.
3. There is no significant difference between the Joint and Nuclear family of adolescents in their Mental Health.

Delimitations of the study:

1. The present study was confined to Guntur District of Andhra Pradesh.
2. The study was restricted to 9th class students only.
3. The sample was restricted to 1000 students only.
4. The study was limited to the variables of Gender, Locality and Type of Family.
5. The present study was confined to the schools that follow state syllabus only.

Method of the study:

The survey method gathers data from cases at a particular time on what is happening and what is available at present time. It is not concerned with the characteristics of individuals as individual. It is concerned with general statistic that when data are abstracted from a number of individual cases. It is essentially cross sectional. The researcher thought that normative survey method is suitable to collect data through

questionnaires and tests to students on Self-Efficacy of Adolescence in relation to Stress, Mental Health and Academic achievement. The scores were compared variable wise to find out if there are any significant variations. The survey is an important type of study. It requires expert and imaginative planning, careful analysis and interpretation of data gathered and logical and skill full reporting of the findings.

Population of the Study:

The population for the study consisted of adolescent students studying in government and private secondary schools in rural and urban areas of the Guntur district of Andhra Pradesh. As per the information received by the Andhra Pradesh government the secondary school student's population is 52436. From the total population only 1000 (1.90%) 9th class secondary school students had taken for the present study. A Stratified random sample 1000 of 9th class secondary school students in the Guntur district of Andhra Pradesh was selected for the present study.

Data Analysis and Interpretation:

Objective-1: To find out the level of Mental Health of Adolescents and to classify them.

Table-1: Mental Health - Whole sample Analysis

Total Sample	Mean	SD	% of Mean
1000	145.56	17.85	66.16

From the above table (1), the following observations have been made. The total numbers of adolescent students are 1000. The mean value is 145.56, the standard deviation value is 17.85 and the percentage of mean is 66.16. The level of Mental Health is above average.

The result shows that the adolescent students are fall at above average level in their Mental Health.

The above finding is that the adolescent students are fall at above average level in their Mental Health. It is concluded that most of the students having not good in Mental Health, they should have proper guidance needed. The secondary school stage is the most important phase of life where students face physical, social, mental, family, educational, and personal problems. At this stage, mental health plays a very important role and helps to deal with these types of problems in a very effective way. Mental Health comprises positive behavior, mind activities, feelings, emotions, etc. which is difficult for people to always keep on the right track. Secondary school students can easily way off because, at this age, their mind gets disturbed by the stress and storm of external and internal dilemmas. Students are facing many problems due to mental health issues in India. The last few years have been very challenging for developing countries like India. Recent pandemics, natural and unnatural disasters, and differences in personal and professional relationships have deeply affected mankind. These events have had a very profound effect like depression, stress, anxiety, fatigue, etc., among people. So, in the contemporary era, students are facing various problems like sleeplessness, social disorder, emotional instability, suicidal attitude, fear of deteriorating

social status, etc. Bhatia (2020) highlighted that “The proportion of the contribution of mental disorders in India has almost doubled since 1990 and it leads one out of every seven Indians in 2017 with a variety of mental disorders”. Therefore, the present paper is a genuine effort to study the issues and challenges in the mental health of secondary school students.

Objective – 2: To find out the influence of the following variables on Mental Health and of Adolescents:

a) Gender b) Locality c) Type of Family

Hypothesis-1: There is no significant difference between male and female adolescents in their Mental Health.

Table-2: Mental Health – Gender wise analysis

Gender	Sample size	Mean	SD	‘t’ Value
Male	500	145.03	17.44	2.77*
Female	500	141.78	17.08	

*Significant at 0.05 level

The following observations have been made from the above table (2). The number of students is 1000, the numbers of boys are 500 and the number girls are 500. The mean of the boys is 145.03 and the SD value of the boys is 17.44 and the recent of mean value is 65.69. The mean of the girls is 141.78, and the standard deviation is 17.08 and the recent of mean value is 64.44. The SED value is 0.45, and the "t" value is 2.77 significant at the 0.05 level.

The result shows that the obtained ‘t’ value is 2.77 greater than the table value of 1.96 at 0.05 level. Therefore it is a significant. Hence the null hypothesis is rejected for the variable is “gender” at the 0.05 level. The result shows that boys and girls students are different levels in their Mental Health. There is significant difference between boys and girls of the secondary school students in their Mental Health. Boys are having better Mental Health than girls.

The above finding is that there is significant difference between boys and girls of the secondary school students in their Mental Health. Girls have a significantly higher frequency of depression and anxiety in adolescence, while boys have a larger prevalence of substance use disorders and antisocial behaviors. Girls also have a higher prevalence of depression and anxiety disorders due to genetic and biological factors. Adolescent girls have a substantially higher prevalence of depression and eating disorders during adolescence, as well as suicidal ideas and attempts than boys. Adolescent boys are more likely than girls to have anger issues, engage in high-risk behaviors, and commit suicide. Teenage girls are more likely to have inward-directed symptoms, whereas juvenile boys are more likely to act out. Emotional expression, health care, and asking for help are all framed as feminine traits. Boys are expected to be emotionally stable and have a strong, independent, and self-reliant demeanor. As a result, men are encouraged to define themselves in opposition to girls by concealing their own health needs and refusing to seek care to conform

to the socially prescribed male role. Boys may be hesitant to seek professional help because of this gendered role conflict, and they may fear increased stigma if they do. Boys are more likely than girls to prefer to deal with mental illness on their own when it comes to treatment. If they do choose to seek professional help, men tend to prefer a speedy and easy solution.

Hypothesis-2: There is no significant difference between rural and urban adolescents in their Mental Health.

Table-3: Mental Health – Locality wise analysis

Locality	Sample size	Mean	SD	't' Value
Rural	500	144.46	17.04	0.33@
Urban	500	143.94	17.80	

@Not Significant at 0.05 level

From the above table (3), the following observations have been made: The total number of students is 1000; the number of urban secondary school students is 500, and the number of rural secondary school students is 500. The mean of urban pupils is 144.46 and the SD value is 17.04, the percentage of the mean in urban students is 65.42. The mean of urban pupils is 143.94 and the percentage of mean value in rural students is 65.66. The standard deviation value in urban students' is 17.80. The S.Ed value is 0.77. The t-value is 0.33 which is not significant in both areas.

The above finding is that the obtained "t" value is 0.33 less than the table value of 1.96 at 0.05 level. Therefore it is not significant. Hence the null hypothesis is accepted for the variable is "Locality" at the 0.05 level. The result shows that rural and urban students are same levels in their Mental Health. There is no significant difference between rural and urban of the secondary school students in their Mental Health. The result shows that locality has no impact on their Mental Health.

The above finding is that there is no significant difference between rural and urban of the secondary school students in their Mental Health. Mental health awareness refers to recognizing, knowing, and understanding mental health. It is also known as mental health literacy. Wei et al. divided mental health literacy skills into three key areas, i.e., knowledge of mental health problems, development of good mental health, and knowledge of help-seeking behaviours. Meanwhile, Jorm et al. defined mental health literacy skills under the six attributes of i. able to distinguish the symptoms of various mental disorders, able to determine the factors of diseases, having positive attitudes towards mental health problems and help-seeking behavior, and practicing self-care, searching for mental health information, and they are seeking help from professionals. From these concepts of mental health literacy, it is understood that improving people's knowledge of mental health and mental disorders is essential for early recognition and the proper treatment of the disease.

Hypothesis-3: There is no significant difference between the Joint and Nuclear family of adolescents in their Mental Health.

Table-4: Mental Health – Type of Family wise analysis

Type of Family	Sample size	Mean	SD	't' Value
Joint	250	145.97	17.65	4.25*
Nuclear	750	142.06	17.34	

*Significant at 0.05 level

The following observations have been made from the above table (4). The number of students is 1000, the students belong to Joint family are 250 and the students belongs to nuclear family are 750. The mean value from students belong to Joint family is 145.97, the standard deviation is 17.65 and percentage of mean value is 66.35. The mean value from students belongs to nuclear family is 32.06, and the standard deviation is 17.34 and percentage of mean value is 64.57. The SED value is 0.92, and the “t” value is 4.25, which is significant at the 0.05 level.

The above table indicates that the obtained “t” value is 4.25 greater than the table value of 1.96 at 0.05 level. Therefore it is significant. Hence the null hypothesis is rejected for the variable is “Type of family” at the 0.05 level. The result shows that students belong to Joint family and Nuclear families are different levels in their Mental Health. There is significant difference between students belong to Joint family and Nuclear families in their Mental Health. According to the results students belong to joint families are better in their Mental Health.

The above finding is that there is significant difference between students belong to Joint family and Nuclear families in their Mental Health. The types of activities that families engage in together are important. Number of people living together than there must be a bunch of gatherings and the ones you truly love and admire will make you feel super comfortable and some of the members like small brother's and sister's and little kids are just for the sake of having fun do many things that they like and they want others to join them as it feels good to make everyday a special experience that turns out to be the happiness source of each member in the family. Considering the circumstances of living in a large family makes it easier to think about not having any kind of sadness will disappear as you always be in a busy and peaceful environment where the time spend on everything makes sense after all it's the loved ones that can double happiness. When feeling low everyone comes upto you and cheer up like as if you have achieved something great and that feeling comes to u by looking back and thinking about old days where you were alone and now when u have them you can feel blessed. Loneliness doesn't have any form of communication in dealing with the day to day operations in a large family and it's impossible to not care about the discussions that take place which at times get interesting. Asking for something gets really hard sometimes but actually it's fun not to be alone and by seeing others some new thoughts will emerge and Every time when a new day starts it's like a happiness therapy and it easily feels better to see kids of and young age children, the noises they make, playing with neighbors, friends and family will always be

Lovely and we as an adult Try to avoid but surely we cannot. Effects of living in a joint family will make different changes and the person will not be the same again. The least bothering about life and if the seriousness gets off the mind it often gives a careless attitude which gives a mental relief. People who love you will not leave you in a place of where you feel would feel lonely and face struggles in any situation this might be the reason why any person who lives with joint family can't be lonely everything will be fulfilled, everyone's needs gets Fulfilled. Difficulties will not stay for longer as everyone contributes in finding solutions for the problems just because having unity among each other will make them feel safe and for them running out of things is not the better alternative.

Finding of the study:

1. The result shows that the adolescent students are fall at above average level in their Mental Health.
2. There is significant difference between boys and girls of the secondary school students in their Mental Health. Boys are having better Mental Health than girls.
3. There is no significant difference between rural and urban of the secondary school students in their Mental Health.
4. There is significant difference between students belong to Joint family and Nuclear families in their Mental Health. According to the results students belong to joint families are better in their Mental Health.

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