https://doi.org/10.33472/AFJBS.6.14.2024.2392-2399



African Journal of Biological Sciences

Journal homepage: http://www.afjbs.com



ISSN: 2663-2187

Research Paper

Open Access

MENTAL HEALTH ISUESS AND ADJUSTMENT DIFFICULITES AMONG SCHOOL ADOLESCENTS

Ms. Parul Kaushik^{1*}, Ms. Rachana², Dr. Rani Srivastava³, Dr. Alka Agrwal⁴

^{1*}MSc. Clinical Psychology (2nd Year), Department of Clinical Psychology, Santosh (Deemed to be) University, Ghaziabad, Uttar Pradesh.

²PhD Scholar Department of Clinical Psychology, Santosh (Deemed to be) University, Ghaziabad, Uttar Pradesh.

³Professor & Head Clinical Psychology, Department of Clinical Psychology, Santosh (Deemed to be) University, Ghaziabad, Uttar Pradesh.

⁴Professor & Dean, Santosh (Deemed to be) University, Ghaziabad, Uttar Pradesh.

Article Info

Volume 6, Issue 14, August 2024

Received: 11 June 2024

Accepted: 14 July 2024

Published: 9 August 2024

doi: 10.33472/AFJBS.6.14.2024.2392-2399

ABSTRACT

BACKGROUND: Adolescence is a critical phase of human development, characterized by physical, emotional and psychological changes. Rapid cultural changes increase adolescent adjustment problems, which can lead to severe psychological issues like depression, anxiety and stress. Adjustment is a dynamic process influencing adolescent development.

MATERIALS AND METHODS: This study analysed 206 school-age adolescents, including both genders, using purposive sampling. Tools used were General Health Questionnaire, EPOCH Measures of Adolescent Well-Being, Depression Anxiety and Stress Scale for Youth and Adjustment Inventory for School Students.

RESULT: The results indicate girls have higher perseverance and connectivity, while boys show superior engagement, optimism and happiness. However, girls experience higher stress, anxiety and depression. Both genders show good emotional adjustment, with girls receiving more social support and boys receiving more academic assistance. Higher levels of psychological distress are linked to more severe symptoms of depression, anxiety and stress.

CONCLUSION: These results highlight the relation among mental health conditions and adjustment challenges among adolescents, highlighting the importance of addressing social and emotional aspects in fostering adolescent well-being and academic achievement.

Keywords: mental health issues, adjustments difficulties, school adolescents, depression, anxiety, stress.

© 2024 Ms. Parul Kaushik, This is an open access article under the CC BY license (https://creativecommons.org/licenses/by/4.0/), which permits unrestricted use, distribution, and reproduction in any medium, provided you give appropriate credit to the original author(s) and the source, provide a link to the Creative Commons license, and indicate if changes were made

1. INTRODUCTION

Mental health is a significant global issue. It has an equal effect on adults, children, men and women. In the present age of digitalization, excessive exposure to materialized system and excessive demands create havoc in every day juggling between social and personal needs. In India, one in seven Indian have psychological disorders, which are more than 197.3 million populations. This number has increased from 1990. The National Mental Health Survey 2015-16 estimates 7.3% prevalence for adolescents aged 13-17, with 9.8 million teenagers requiring active mental health care assistance (Laxmi, V. & Laxmi, V. 2021).

A person's social, emotional, and psychological well-being are all associated with mental health. It is the mental condition of a individual who is exhibiting adequate levels of passion and behavioural adjustment. Mental wellness refers to individuals achieving their full potential, managing daily life pressures effectively, working efficiently, productively and contributing positively to their communities (Walker, J. 2005).

This is transition stage of development that typically occurs between childhood and adulthood. The father of adolescence, Stanley Hall, describes adolescence as "the period of storm and stress of human life" (Shaban, N.,et al; 2021). Teenagers are defined by the World Health Organization as those who are 10 to 19 years old (World Health Organization ;2003). Adolescence is a crucial period of growth, characterized by rapid physical, intellectual, psychological, and social changes, as well as the development of a moral compass. It is a time when a child becomes more independent and wants to explore their identity. During the adolescent phase, adjustment is a major concern. It is a behavioural process for keeping one's needs and the barriers provided by the surroundings in balance. Adolescent adjustment issues are increase by the modern society's rapid changes. This stage presents a significant challenge in adjusting to ongoing changes in both their internal and external environment (Sulistiowati, N. M. D., et al;2019). Adjustment is one of the most important psychological functions that people perform (Kumar, C. A. 2021). Adolescent development depends heavily on adjustment. It is the process of keeping a balance between the conditions that affect how these needs are met—such as the physical, social, and psychological needs—and the needs themselves. Adjustment difficulties result in depression, anxiety, stress and many more serious psychological disturbances. About 12.8% of children in India (ages 1 to 16) have mental health issues, according to the Indian Council of Medical Research (Rajkumar, G., 2016). Worldwide, 10% to 20% of children and adolescents are affected by mental health disorders (Hossain, M. M., & Purohit, N., 2019).

2. MATERIAL AND METHOD

The aim and objectives of the study is to evaluate and correlate the mental health issues and adjustment difficulties among school adolescents. The ethics committee of Santosh (Deemed to be University,) Ghaziabad, Uttar Pradesh, approved this work. A comprehensive analysis of 206 school-age teenagers was completed for the research including both the genders equally. The selection process involved purposive sampling. Adolescents ranging from age group 14-18, gave consent and those who are free from psychological disturbance were part of this study. Each student was assessed using standardized tests namely General Health Questionnaire (GHQ), EPOCH Measures Of Adolescents Well-Being, Depression Anxiety and Stress Scale for Youth (DASS-Y) and Adjustment Inventory For School Students (AISS). Hard copies were distributed to students of the psychological test, along with clear instructions. After the completion of the data collection process, the collected data was evaluated by systematically using SPSS, 23 versions.

3. RESULTS

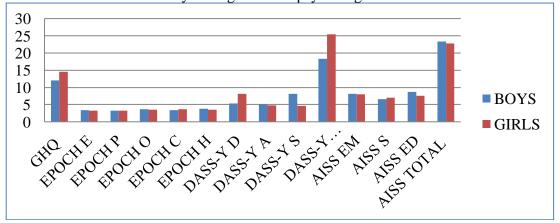
The data evaluated using mean, sd, Pearson correlation & t-test in the current research shows in following tables and figures.

Table no. 1 displays the result of independent t-test illustrating mean & sd difference between boys and girls of all psychological variables.

MEASURES	GEN	N	MEAN	SD	T-TEST
GHQ	В	103	12.01	±5.53	3.268

	G	103	14.5	±5.37		
EDOCH E	В	103	3.32	±0.78	1 202	
EPOCH Engagement	G	103	3.17	±0.82	1.303	
EDOCH Dansanana	В	103	3.22	±0.71	0.587	
EPOCH Perseverance	G	103	3.28	±0.79		
EDOCH O Ontimism	В	103	3.65	±0.67	0.805	
EPOCH O Optimism	G	103	3.56	±0.98	0.003	
EPOCH C Connectedness	В	103	3.38	±1.63	1.004	
EFOCII C Connectedness	G	103	3.67	±1.03	1.004	
EDOCH II Hannings	В	103	3.83	±0.82	0.254	
EPOCH H Happiness	G	103	3.53	±0.92	0.234	
DACC V Dangagion	В	103	5.3	±4.24	3.377	
DASS-Y Depression	G	103	7.75	±6.03	3.377	
DASS-Y Anxiety	В	103	5.01	±4.74	3.175	
DASS-1 Allxlety	G	103	8.56	±10.3		
DASS-Y Stress	В	103	8.1	±4.46	2.345	
DASS-1 Suess	G	103	9.75	±5.04	2.343	
DASS-Y TOTAL	В	103	18.35	±11.4	3.981	
DASS-1 TOTAL	G	103	25.43	±13.9	3.901	
AISS Emotional	В	103	8.17	±2.93	0.591	
AISS Ellionollai	G	103	7.95	±2.45	0.391	
AISS Social	В	103	6.58	±3.01	1.124	
AISS SUCIAI	G	103	7.01	±3.81		
AISS Educational	В	103	8.69	±3.81	2.287	
AISS Educational	G	103	7.59	±3.09		
AISS TOTAL	В	103	23.32	±7.04	0.508	
AISS TOTAL	G	103	22.84	±6.38		

Figure no. 1 displays the result of independent t-test illustrating mean & sd difference between boys and girls of all psychological variables.



Variable	СНО	EPOCH	EPOCH P	ЕРОСН О	ЕРОСН С	ЕРОСН Н	DASS-Y D	DASS-Y A	DASS-Y S	DASS-Y TOTAL	AISS EM	AISS S	AISS ED	AISS TOTAL
GHQ	1	- .0 8	.21 **	.24 **	.26 **	.39 **	.40 **	.33	.36 **	.48 **	.14	.21 **	.11	.19 **
EPOCH E		1	.03	.16	.02	.27 **	10	12	01	09	0.1	06	0	.07
EPOCH P			1	.39	.15	.05	09	05	09	09	.03	- .14 *	- .14 *	.12
EPOCH O				1	0.0 87	.26 **	12	12	.03	10	.06	.10	- .11	.01
ЕРОСН					1	.35 **	- .23 **	- .21 **	- .17 *	- .23 **	.10	- .19 **	.12	.15 *
EPOCH H						1	- .45 **	- .29 **	- .34 **	- .49 **	.10	- .22 **	.07	.17 *
DASS D							1	.46 **	.56 **	.87 **	.16	.15	.12	.24
DASS A								1	.39	.58 **	.15	.14	.03	.16
DASS S									1	.82 **	0.1 1	.23	.02	.15
DASS TOTAL										1	.17 4*	.20 **	.08	.25 **
AISS EM											1	.35	.48	.77 **
AISS S P												1	.22	.61 **
AISS ED													1	.76 **
AISS TOTAL														1

Table 2: Showing correlation between all psychological test

4. DISCUSSION

The result shown in table 1 indicates that girls generally experience slightly higher levels of psychological discomfort compared to boys when comparing their GHQ scores. The findings validate with other studies, that shows girls often experience higher levels of psychological distress compared to boys (Twenge, J. M., & Nolen-Hoeksema, S; 2002). The tests on EPOCH variables exhibited significant difference between adolescents engagement and perseverance levels. Adolescent boys scored better in meaningful activities and optimism, while girls showed better perseverance and connectedness in previous researchers have

^{**} Significant correlation at the 0.01 level

^{*} Significant correlation at the 0.05 level

discovered gender inequalities in adolescents health outcomes are influenced by various factors including socialization processes, hormonal changes, and cultural expectations (Hankin, B. L., et al; 1998 ; Eisenberg, M. E., et al, 2006;). The t-value of DASS-Y indicates that girls experiences higher depression anxiety and stress than boys. The t-test showed major difference among both genders. Research shows that teenage girls frequently experience depression symptoms at higher rates than teenage boys (McLean, C. P., et al; 2011). Several research found that girls have greater prevalence of anxiety disorders(Hamilton, J. L., et al; 2015), another study proves that adolescent girls can be under more stress as a result of different social and academic demand (Essau, C. A., Conradt, J., & Petermann, F. 2000). Another study suggest that during adolescence, girls have higher levels of total psychological discomfort, including feelings of stress, anxiety, and depression (Davila, J., Steinberg, S. J., Kachadourian, L., Cobb, R., & Fincham, F. 2004).. Results for AISS have been discussed area wise, girls scored higher in social adjustment than boys but there is no significant difference .Boys scored higher in educational adjustment than girls and there was a major difference between both the genders. Boys and girls scored similarly in all three categories indicating a similar general adjustment level. Research is showing that girls frequently turn to their friends and social networks for increased social support (. Storch, E. A., Brassard, M. R., & Masia-Warner, C. L. 2003). According to research adolescents academic achievement and adjustment are positively correlated with their perceptions of social support, particularly educational assistance (Crosnoe, R., & Johnson, M. K. 2011). Furthermore, studies have emphasized the value of interpersonal support throughout this developmental stage by highlighting the role that family and peer support have in influencing adolescents educational experiences and outcomes(Fergusson, D. M., Boden, J. M., & Horwood, L. J. 2007). From table 2 GHQ scores shows positively correlation with EPOCH H (Engagement, Perseverance, Optimism, Connectedness, and Happiness in Adolescent Well-Being). This suggests that higher level of psychological distress, as evaluated by the GHQ, are connected with lower levels of well-being among teenagers. This is validate with previous research that indicates that psychological distress might impair general well-being (Brown, T. A., Chorpita, B. F., & Barlow, D. H. 1998). There are positive correlations between DASS-Y subscales (DASS-Y D, DASS-Y A, DASS-YS) and DASS-Y Total, showing that greater scores in one area of depression, anxiety, or stress are connected with higher scores in others. This conclusion is consistent with the concept of comorbidity between various psychological dimensions (Wood, A. M., & Joseph, S. (2010). GHQ scores show negative associations with several EPOCH subscales (EPOCH E, EPOCH P, EPOCH O, and EPOCH C), implying that increased psychological distress is related with poorer levels of emotional processing, control, and well-being. This negative connection emphasizes the influence of psychological discomfort on emotional functioning. Furthermore, EPOCH H and DASS subscales show negative associations, showing that higher levels of well-being are connected with lower levels of depression, anxiety, and stress. This emphasizes the protective function of good psychological characteristics in reducing unfavorable mental health outcomes.

5. CONCLUSION

The study explores the psychological well-being and adjustment of adolescents, focusing on gender differences and the interaction of psychological categories. Girls experience higher levels of psychological distress including stress, worry and hopelessness as compared to boys. Gender variations affect areas of psychological functioning, such as involvement, persistence, optimism, and closeness. Boys tend to score higher in meaningful activities and optimism, while girls excel in perseverance and connectivity.

The study also highlights the role of social support in teenagers' adjustment and well-being, with perceptions of educational help positively influencing academic achievement. The correlation analysis reveals

Limitations

This study sheds light on the mental health issues and adjustment difficulties among school adolescents. First, there's a chance that the results' generalizability will be constrained by the sample size and representativeness. While using self-reported data may introduce bias. Lastly, the validity of the study may be compromised by low response rates and biases in selection.

6. REFERENCES

- 1. Brown, T. A., Chorpita, B. F., & Barlow, D. H. (1998). Structural relationships among dimensions of the DSM-IV anxiety and mood disorders and dimensions of negative affect, positive affect, and autonomic arousal. Journal of abnormal psychology, 107(2), 179.
- 2. Crosnoe, R., & Johnson, M. K. (2011). Research on adolescence in the twenty-first century. Annual review of sociology, 37, 439-460.
- 3. Davila, J., Steinberg, S. J., Kachadourian, L., Cobb, R., & Fincham, F. (2004). Romantic involvement and depressive symptoms in early and late adolescence: The role of a preoccupied relational style. Personal Relationships, 11(2), 161-178.
- 4. Eisenberg, M. E., Neumark-Sztainer, D., & Paxton, S. J. (2006). Five-year change in body satisfaction among adolescents. Journal of psychosomatic research, 61(4), 521-527.
- 5. Essau, C. A., Conradt, J., & Petermann, F. (2000). Frequency, comorbidity, and psychosocial impairment of anxiety disorders in German adolescents. Journal of anxiety disorders, 14(3), 263-279.
- 6. Fergusson, D. M., Boden, J. M., & Horwood, L. J. (2007). Recurrence of major depression in adolescence and early adulthood, and later mental health, educational and economic outcomes. The British Journal of Psychiatry, 191(4), 335-342.
- 7. Hamilton, J. L., Stange, J. P., Abramson, L. Y., & Alloy, L. B. (2015). Stress and the development of cognitive vulnerabilities to depression explain sex differences in depressive symptoms during adolescence. Clinical Psychological Science, 3(5), 702-714.
- 8. Hankin, B. L., Abramson, L. Y., Moffitt, T. E., Silva, P. A., McGee, R., & Angell, K. E. (1998). Development of depression from preadolescence to young adulthood: emerging gender differences in a 10-year longitudinal study. Journal of abnormal psychology, 107(1), 128.
- 9. Hossain, M. M., & Purohit, N. (2019). Improving child and adolescent mental health in India: Status, services, policies, and way forward. Indian journal of psychiatry, 61(4), 415–419. https://doi.org/10.4103/psychiatry.IndianJPsychiatry_217_18
- 10. Kumar, C. A. (2021). Mental Health and Adjustment Problems of Higher Secondary Students. Turkish Online Journal of Qualitative Inquiry, 12(8).
- 11. Laxmi, V., & Laxmi, V. (2021, January 14). The Kids Aren't All Right: Mental Health AndIndian Youth. Youth Ki Awaaz. https://www.youthkiawaaz.com/2021/01/mental-health-needs-of-children-and-young-people-in-india/
- 12. McLean, C. P., Asnaani, A., Litz, B. T., & Hofmann, S. G. (2011). Gender differences in anxiety disorders: prevalence, course of illness, comorbidity and burden of illness. Journal of psychiatric research, 45(8), 1027-1035.

- 13. Rajkumar, G., Saravanan, M., & Anbarasi, M. (2016). Effect of academic-related factors on adjustment problems in adolescents. Pediatr Rev Int J Pediatr Res, 3, 683-8.
- 14. Shaban, N., Kour, P., Dar, M. A., & Majeed, M. (2021). A Comparative Study to Assess Adjustment Problems among Adolescents on the basis of Gender. Indian Journal of Holistic Nursing (ISSN: 2348-2133), 12(1), 1-7.
- 15. Storch, E. A., Brassard, M. R., & Masia-Warner, C. L. (2003). The relationship of peer victimization to social anxiety and loneliness in adolescence. Child Study Journal, 33(1), 1-19.
- 16. Sulistiowati, N. M. D., Keliat, B. A., Wardani, I. Y., Aldam, S. F. S., Triana, R., & Florensa, M. V. A. (2019). Comprehending mental health in Indonesian's adolescents through mental, emotional, and social well-being. Comprehensive child and adolescent nursing, 42(sup1), 277-283.
- 17. Twenge, J. M., & Nolen-Hoeksema, S. (2002). Age, gender, race, socioeconomic status, and birth cohort difference on the children's depression inventory: A meta-analysis. Journal of abnormal psychology, 111(4), 578.
- 18. Walker, J. (2005). Adolescent stress and depression.
- 19. Wood, A. M., & Joseph, S. (2010). The absence of positive psychological (eudemonic) well-being as a risk factor for depression: A ten year cohort study. Journal of affective disorders, 122(3), 213-217.
- 20. World Health Organization. (2003). Creating an environment for emotional and social well-being: an important responsibility of a health promoting and child-friendly school. World Health Organization.