

## The Effect of Locus of Control and Education on Mental Health

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### Abstract:

*The objective of the present study has been to assess the effect of locus of control and level of education on mental health status of respondents studying in different educational levels. Education brings a lot of changes in the psyche of the students and locus of control is said to influence the behavior particularly health behavior of individuals. Thus mental health is greatly influenced by psychosocial factors like anxiety, depression, locus of control, education and so on. Hence in this study an attempt has been made to study the effect of locus of control and education on mental health status of students. The sample consists of 360 students studying in Gulbarga city. For the collection of data Mental Health Inventory (Jagdish and Srivastava 1988) and Locus of Control Scale (Anandkumar and Srivastava 1985) were administered and the results were subjected to statistical analysis like t-test and correlation. Results revealed 1. There is a significant difference in mental health status of students studying in different level of education. 2. There is significant difference between internal and external locus of control on mental health status. 3. There is a significant correlation between locus of control and mental health.*

### I. INTRODUCTION

The evolution of the concept of mental health is linked to the larger developments in the understanding of human behaviour. Starting from explanations of supernatural causation, we have arrived at understanding the states of mind and mental health from a holistic point of view. Rapid advances in the understanding of the human brain and individual and group behaviour open up new possibilities for non-medical and wider psychosocial actions towards promotion of mental health.

The world health organization (WHO) constitution defines health as a state of complete physical, mental and social well-being not merely the absence of disease or infirmity. However, WHO, in the first thirty years (1948-1978), focused largely on specific illnesses not so much on health (William, 1988). The Alma Ata Conference in 1978 (WHO, 1978) is a landmark in the development of the concept of health. The conference viewed health as an individual's responsibility rather than a service to be delivered to individuals (William, 1988). The importance of mental health has been known to range from the care of the ill to the promotion of mental health by professionals.

Mental health implies freedom from internal conflict, no consistent tendency to condemn or pity one self, a good capacity to adjust to situation and people, sensitivity to the emotional needs of others, capacity to deal with other individuals with consideration and courtesy and good control over one's own emotions without constantly giving in to strong feelings of fear, jealousy, anger and guilt.

**Locus of control:** Locus of control refers to a set of beliefs about the relationship between behavior and the subsequent occurrence of rewards and punishments. The more precise phrase for these beliefs about locus of control is internal versus external control of reinforcement (I-E). Whenever reinforcement (either positive or negative) are perceived by

the individual as being the result of his or her own behavior, efforts, or relatively permanent characteristics etc. are example of an internal belief. External beliefs, in contrast, involve perceptions that reinforcements occur as the result of luck, chance, fate, or the interventions of powerful others, or else are simply unpredictable because of the complexity of events. Beliefs about locus of control or I-E are not either/or but may fall anywhere along a dimension marked by external belief at the one extreme and internal ones at the other.

The I-E concept was first outline by Rotter in 1996. He not only defined the concept but also described a social learning theory framework in which it could be incorporated. This theory, first articulated by Rotter in 'Social Learning and Clinical Psychology', described several variables which act in concert to produce a behavior in a given situation: (a) expectancies; (b) reinforcement values; and (c) the psychological situation. Any behavior occurs because of expectancies that it will achieve the goal toward which it is directed and because of the value of that goal. The specific situation influences both the magnitude of one's expectancies and the value of the goal. Internal locus of control, assessed as a personality characteristic, was positively associated with active problem solving behavior, awareness, resistance to attempts at coercion, and positive affects. A more external locus of control was more often found to be associated with passivity, "influence ability", conformity, dysphoria, and diminished ability to cope with stressful life events.

External locus of control is associated with negative personality characteristics while an internal orientation is related to positive personality characteristics. The consequences of an external locus of control appears to be detrimental for children and adolescents. An external locus of control has been associated with childhood anxiety and childhood depression (McCavley, Mithell, Burke and Moss 1988).

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**II. METHOD**

**Problem:** To study the effect of Locus of control and Education on mental health of adolescents.

**III. OBJECTIVES**

1. To study the impact of education on mental health status of students.
2. To assess the influence of locus of control on mental health status of adolescents.
3. There is a significant correlation between locus of control and mental health.
4. To assess the effect of locus of control and education on mental health of respondents.

**IV. HYPOTHESIS**

1. There is a significant difference in mental health status of respondents studying in different educational levels.
2. There is a significant influence of locus of control on mental health status of students.
3. There is a significant effect of locus of control on mental health status of sample group.
4. There is significant correlation between locus of control and health status.

**Sample Design:** The sample of the present study consists of 360 adolescents studying in various colleges of Gulbarga city. The sample was selected from adolescents studying in different levels of education.

**V. TOOLS**

**Mental Health Inventory:** his inventory is developed by Jagdish and Srivastava (1988) which is consisting of 56 item distributed along 6 dimensions of mental health, they are positive self-evaluation, perception of reality, integration of personality, autonomy, group oriented attitudes, environmental mastery. There are 24 positive and 32 negative items and the scoring is of likert type. The reliability of the inventory has been found to be 0.73 and the validity is quite satisfactory (0.54).

**Locus of control scale:** This scale is standardized by Anandkumar and Srivastava (1985) which consist of 29 pairs of items. Out of which 23 items are scored while other 6 filter items are not scored. The scoring is done according to scoring key and maximum score is 23 and minimum is zero. The higher sores indicate higher externality (external LOC) and lower score reveals internality (internal LOC). The reliability of scale is 0.88 which is significant.

**VI. RESULTS AND DISCUSSION**

**Table-1:** Means, SD and t-value of Mental Health of Students in Three Levels of Education (N=360)

Educational level		PS	PR	IP	AU	GOA	EM	TMH
P.U.C.(120)	M	30.38	20.62	30.30	15.45	27.61	27.35	151.65
	SD	4.1	2.950	5.05	2.95	3.48	3.94	12.73
t-value		0.956	1.915	0.349	3.52**	0.210	0.453	1.450
Graduate (120)	M	30.94	21.42	30.55	16.78	27.51	27.13	154.35
	SD	4.89	3.49	5.65	2.91	3.87	3.75	15.84
t-value		2.29*	1.12	1.77	0.883	0.424	2.14*	2.07*
Post-Graduate (120)	M	32.39	21.93	31.97	17.12	27.30	28.27	159.0
	SD	4.90	3.52	6.76	3.08	4.04	4.47	18.82
t-value		3.43**	3.11**	2.16**	4.30**	0.650	1.68	3.53**

\* Significant at 0.05 level, and \*\* Significant at 0.01 level.

Table-1 shows mean, SD and t-value of health status of students belonging to different educational levels. It is observed that the post-graduate students have scored higher mean (159.0) followed by graduate (154.35) and intermediates (151.65). The t-value on total health status are significant which clearly indicate that there are significant differences in the overall mental health of students belonging to different levels of education. Thus the higher health status is promoted by the higher educational level on individual is exposed to. It is believed that the higher education provides variety of knowledge, information and exposure to health awareness, as a result of which the health practices, health attitude and lifestyle is shaped in desirable way. Therefore higher education is always a potential factor in the increment of health status.

In the dimension of positive self-evaluation the mean score of the post-graduate students is higher (32.39) followed by graduate (30.94) and intermediates (30.38). The mean score of PUC and graduate students is more or less same. This clearly indicates that there is no much difference between PUC and graduate students in evaluating oneself. The t-value of UG and PG students is (2.29) which is significant at 0.05 level indicate the significant difference between graduate and post-graduate in evaluating oneself positively. The post-graduates evaluate oneself more positively than the graduates because higher education helps the individuals to know one's ability and capabilities, interests and aspirations. The t-value of PUC and post-graduate students is 3.43 which is significant at 0.01 level which denotes that there is a significant difference between PUC and PG students in positive self-evaluation.

In the dimension of perception of reality the mean score of post-graduate is higher (21.93) followed by graduate (21.42) and PUC (20.62) students. There is a significant difference (t = 3.11, significant at 0.05 level) between PUC and PG student which clearly indicates that as educational level increases the ability to perceive the reality also increases.

In the dimension of integration of personality the PG students have scored higher mean (31.97) followed by graduate (30.55) and PUC (30.30) students. Higher level of education helps the individual in integration of personality because higher education promotes in the development of healthy personality which balance the psychic forces in the individual. The t-value of 2.16 is significant at 0.05 level which reveals significant differences between PUC and PG students. However, there is no significant difference between PUC and UG students.

In the dimension of Autonomy, the mean score of PUC, UG and PG students is 15.45, 16.78 and 17.12 respectively. The PG students are more autonomous than the UG and PUC students. Higher education makes them become more autonomous by cultivating the necessary skills in becoming self-reliant and self-independent. There is a significant difference (t = 3.52 significant at 0.01 level) between PUC and UG students. UG students are more autonomous than the PUC students. There is a significant difference (t = 4.30 significant at 0.01 level) between PUC and PG student in the autonomy.

In the dimension of group oriented attitude the mean score of PUC, UG and PG students is 27.61, 27.51 and 27.30 respectively. The PG students have more group oriented attitude than UG and PUC students. Students in higher education set more goals and for the fulfillment of those goals they have to work with and to belong to groups. This makes them to develop group oriented attitudes. However, no significant differences are found in any level of education, as all the t-values are insignificant.

In the dimension of environmental mastery the mean score of PUC, UG and PG students is 27.35, 27.13 and 28.27 respectively. The PG students mean score is higher than the UG and PUC students which indicates that PG students have good mastery over the environment in comparison with PUC and UG students. Thus higher education develops certain qualities in the individuals which helps in mastering the environment and makes it suitable for the accomplishment of goals.

**Table-2** : Means, SD and t-value of Mental Health of Students with Internal and External LOC (N=360)

LOC		PS	PR	IP	AU	GOA	EM	TMH
Internal (180)	M	32.09	21.66	32.50	16.49	27.87	28.09	158.75
	SD	4.55	3.66	5.63	3.19	3.72	3.82	15.06
External (180)	M	30.36	20.98	29.36	16.40	27.07	27.07	151.21
	SD	4.73	3.01	5.74	2.92	3.84	4.28	16.54
t-value		3.53**	1.90	5.22**	0.277	2.02*	2.37*	4.52**

\* Significant at 0.05 level. and \*\* Significant at 0.01 level.

Table-2 shows mean, SD and t-value of health of students who have internal and external locus of control. In total mental health the mean score of students with internal LOC is higher (158.75) than the external LOC (151.21) which

indicates that students with internal LOC have high mental health status than students who have external LOC. This may be because a person with internal LOC locates the causes of success or failure in himself and is capable of maintaining a balanced personality. These traits / belief make them to have a better mental health status. On the other person with external LOC believes that his success or failure is being controlled by the external sources like, God, fate or chance. The t-value is significant (4.52) at 0.01 level to indicate the significant difference between internal and external locus of control group in their total mental health status. Thus internal LOC is associated with higher mental health status of the individuals.

In the dimension of positive self-evaluation the mean score of students with internal LOC is higher (32.09) than the external LOC. Students who have internal locus of control evaluate oneself more positively than those who have external LOC. The t-value (3.53) is significant at 0.01 level indicate the significant difference between internal and external LOC students in evaluating oneself more positively.

In the dimension of perception of reality, the mean score of students with internal LOC is more (21.66) than the students with external LOC (20.98). The students who have internal LOC have high perception of reality than the external LOC students. They believe in their actions for the outcome. On the other, persons with external LOC think that the external forces are responsible for the overcome of any behavior. However, there is no significance difference between them as t-value speaks.

In the dimension of Integration of personality. The mean score of students who have Internal LOC is 32.50 and external LOC is 29.36. The students with Internal LOC have high Integration of personality than the external LOC students. The t-value (5.22) is LOC significant at 0.01 level indicate the significant difference between internal and external LOC oriented respondents in integration of personality.

In the dimension of autonomy the mean score of students who have internal LOC is 16.49 and students with external LOC is 16.40. The mean scores of both the group are more or less same. This clearly explains that LOC makes no difference in the students in the development of autonomy.

In the dimension of group oriented attitude the mean score of internal LOC group is more (27.87) than the external LOC (27.07). Person with internal LOC works with the group for the fulfillment of his goals. There is a significant difference (2.02) between students with internal and external LOC in their group oriented attitude.

In the dimension of environmental mastery, the mean score of internal LOC students is higher (28.09) than the external LOC students (27.07). This indicates that students who have internal LOC have good mastery over the environment than those of external LOC students. The t-value (2.37) is significant at 0.05 level which denotes that there is a significant difference between internal and external LOC individual in mastering the environment. A person with an internal LOC can exert sufficient control over events to master the environment (Seligman, 1975).

**Table-3:** Influence of LOC and Education on Mental Health : F- Ratio (ANOVA) (N=360)

Source	PS	PR	IP	AU	GOA	EM	TMH
LOC	6.932**	4.960*	6.910**	6.942**	6.132**	6.326**	6.129**
EDUCATION	4.161*	6.845**	6.140**	6.164**	3.990*	3.910*	3.951*

\*Significant at 0.05 level and \*\*Significant at 0.01 level

Table 3 presents the influence of LOC and education on mental health of the respondents. The F-ratio for LOC in the area of positive self evaluation is 6.932 which is significant at 0.01 level which indicates the influence of LOC on the positive self evaluation. The F-ratio for LOC in the area of perception of reality is 4.960 which is significant at 0.05 level, denotes the influence of LOC on perception of reality. Person with internal LOC perceive the world in a positive way, free from negative things. On the contrary external LOC person perceives the world in a negative way. Thus LOC as psychological factor present in the individuals, determines the perception of the world. The F-ratio for LOC in the area of integration of personality is significant at 0.01 level indicates that LOC influence significantly on integration of personality.

In the area of autonomy the F-ratio for LOC is 6.942 which is significant at 0.01 level, denotes the significant influence of LOC on autonomy of the individual. Individuals with internal LOC believe in their own action for the outcome of behavior and dependent on their own potentiality for the development of their personality. The F-ratio for LOC in group oriented attitude is 6.132 which is significant at 0.01 level indicates the influence of LOC on the group oriented attitude of the individual. The F-ratio for loc in the area of mastering the environment is 6.326 significant at 0.01 level reveals the influence of LOC in mastering the environment.

Persons with internal LOC has the good capability in mastering the environment. The F-ratio for LOC on total mental health is 6.129 which is significant to suggest the fact that LOC has independently and significantly influenced the mental health status of the sample subgroup. LOC is a belief system of attributing the causes of ones outcome or behavior. A person who explains his behavior as being produced by the external sources like, God, fate or chance is categorised as having external LOC. On the contrary, a person with internal LOC locates the cause of his access or failure to himself and therefore is capable of mastering the environment. Thus there is a relationship between LOC and mental health: The Internal LOC promotes higher mental health.

The F-ratio for education in the area of positive self reality is 4.161 which is significant at 0.05 level indicates the influence of education on mental health status, the F-ratio in the area of perception of reality is 6.845, in the area of integration of personality the F-ratio is 6.140 and 6.104 the area of autonomy, which are significant at 0.01 level indicates the influence education in perceiving the reality, integrating ones personality and developing autonomy. In the area of group oriented attitude and in the area of environmental mastery the F-ratio is 3.990, 3.910 respectively, which are significant at

0.05 level reveals the influence of level of education group oriented attitude and mastering the environment.

The F-ratio of total mental health is 3.951 which is significant at 0.05 level to suggest that the level of education has significantly influenced the mental health status of the students. Education plays an important role in the development of positive mental health status. Individual with high level of education have a good mental health in comparison with low level of education. Education makes the individual, self-confident, self-accepted, to feel worthwhileness and develops autonomy that are components of mental health. Education makes them self-efficient in handling the responsibilities and capacity for better adjustment. All these factors are necessary for a psychological health of the individuals. On the other hand low level of education does not provide all the knowledge and capabilities for self-development.

**Table-4:** Showing the Correlation (r-values) between Psychological Variable - LOC and Mental Health

Variables	r-values
LOC × Positive self-evaluation	0.214**
LOC × Perception of reality	0.110**
LOC × Integration of personality	0.271**
LOC × Autonomy	0.038
LOC × Group oriented attitude	0.108*
LOC × Environmental Mastery	0.130*
LOC × Total mental health	0.251**

\*\*Correlation is significant at the 0.01 level. and \*Correlation is significant at the 0.05 level.

The above Table reveals that, the correlation values between Locus of Control and dimensions of mental health. The r-values between LOC, positive self-evaluation, integration of personality and total mental health are significant at 0.01 level and the r-values between LOC and perception of reality, group oriented attitude and environmental mastery are significant at 0.05 level. In order to control whatever the situation the individual is dealing with, he must be optimistic about how he can control the outcome of the situation. People who possess this optimism believe that they are in control of their fate. People who have internal LOC evaluate oneself positively and right perception of reality and has a balance in their psychic forces. They want to affiliate with the group and has a mastery over their environment. However, people who lack this optimism tend to believe that their fate is controlled by other entities such as luck, people or spiritual leaders. An external LOC has been associated with anxiety (Nunn, 1988). Individual who possess a internal locus of control has a high mental health status. Research reviews indicated that internal often exhibited less emotional reactions to stressful events than externals. Thus there is a significant correlation between LOC and mental health.

## VII. CONCLUSIONS

The following are the major findings of the study:

1. The mental health status of post-graduate significantly higher than those of graduates and intermediate in overall mental health and also in the dimensions of mental health.
2. The mental health status of graduate students is significantly higher than the intermediate students in overall mental health status.
3. There is a significant difference between internal and external LOC in overall mental health status and in the dimension of PS, IP, GO, EM.
4. Locus of control and education significantly influences the mental health status of respondents.
5. There is a significant correlation between lows of control and overall mental health and also in dimensions i.e., positive self-evaluation, perception of reality, Integration of Personality, group oriented attitude and environmental Mastery.

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