

Adolescent Mental Health is Endangered Due to Changing Family Patterns Among Different Social Groups in India

Dr. Vikas S. Kamble^[1]

Prof. L. A. Kumaje^[2]

Abstract:

India has an approximately threepercent adolescent population compare to thewhole population. They are not in large numbers but also they are a future of India. But day by day their mental health problems are arising due to changing child-rearing practices and family patterns. There is a growing consensus in scholars that Indian adolescent group becomes passive and unhealthy. Keeping this fact in mind researcher has designed a study to investigate the effects of avoidance family relationships on themental health of high school students among different social groups. For this study 540 high school students have been selected and deeply interviewed with family relationship inventory. The obtained data analyzed through Two-way ANOVA and Scheffe's posthocmultiple comparison statistical technique. The result reveals that family avoidance relations strongly affect the mental health problems of adolescents. Some interventions are suggested in this paper which is seen quite beneficial.

Key words: Avoidance Family Relationship, Mental Health, and Adolescent.

I. INTRODUCTION

A human who is auniversal creature is born grows up and imbibes within the family, which is a global institution. A human who is not only universal but also social has some physical needs such as feeding, sheltering, protection, some mental needs such as love, respect, confidence and some social needs such as language, culture, and education. Human meets all his needs within the family, which is the structure of the society. While thehuman is meeting these needs, he is together with nature. He benefits fromnature, develops the existing one in nature, obtains new products, changes the natural structure and forms it. Being distinctive from the other creatures, he is intelligent and wise and also has the power and opportunity to think, plan, realize what he has planned, partly dominate on the nature and change it for his benefits. He even shows this tendency (Hernandez, 1993).

The World Health Organization defines mental health as “a state of well-being in which the individual realizes his or her abilities, can cope with the normal stresses of life, can work productively and fruitfully, and can make a contribution to his or her community.” Mental health describes a level of psychological well-being or an absence of a mental disorder. From the perspective of positive psychology or holism,mental health may include an individual's ability to enjoy life and create a balance between life activities and efforts to achieve psychological resilience. Mental health can also be defined as an expression of emotions and as signifying a successful adaptation to a range of demands.

There is no health without mental health (Prince, M. et.al. 2007). Mental health is an inseparable part of public health and significantly affects countries and their human, social and economic capital. Mental health is not merely the absence of mental disorders or symptoms but also a resource supporting overall well-being and productivity. Positive

mental health is a state of well-being in which the individual realizes his or her abilities, can cope with the normal stresses of life, can work productively and fruitfully and can contribute to his or her community (Herrman, H. et.al. 2005). Emotional and social status and mental health have positively correlated (NIMH, 1998).

Arumugam, Rajendran, and Nagalingam (2013) conducted the study ofadolescents of 10 to 17 years of age with the objectives of eliciting the burden of the mental health problems and the risk factors associated with it. The study was conducted in Royapet area during June and July 2012 using PSC-Y questionnaire. A total of 478 students included in the study and the results showed the prevalence of 67 (14%) of the study population. The mental health problem in this study associated with female sex, less age, higher socioeconomic status, unhealthy home environment (parents fighting, parental abuse), sibling rivalry, unhealthy school environment (fight with friends) and the type of family, single parent were not associated with the mental problems.

Sharma(2013) investigate the correlations that exist betweenfamily relationships and mental health status among adolescents. This study was carried out on 100 randomly sampled adolescents of Dibrugarh, Assam.Results indicate that adolescents whose parents viewed as accepting, especially the mother, had a better mental health status. Above average to theaverage level of parental acceptance was found for adolescents belonging to high socio-economic status whereas average to abelow-average level of parental acceptance accounted for those belonging to low socio-economic status. Parental acceptance also differed significantly for boys and girls. High to anabove-average level of parental avoidance seen among adolescents from thehighsocio - economic background.

^[1]Dept. of Psychology, Smt. Kasturbai Walchand College, Sangli., MS, India

^[2]Head, Dept. of Psychology, Padmabhushan Vasantraodada Patil Mahavidyalaya, Kavathe Mahankal, Maharashtra.

Sathyabama and Eljo (2014) studied family environment and mental health of adolescent girls. For this study 90 adolescent girls were chosen through disproportionate sampling procedure in Government Higher Secondary School, Ammapalayam, Perambalur District of Tamilnadu. They found that there was a significant relationship between the family interactions and mental health of adolescent girls.

A parent is anybody who has a long-term primary caregiving responsibility towards a child. A 'significant other' would be anyone who is uniquely associated emotionally with the child and who cannot be substituted by anyone else. Children and adults use a common meaning structure to assess the extent to which they are loved (or accepted) or not (are rejected). This has major consequences for the future of each child, especially on his/her psychological correlates. The quality of the affection bond between children and parents from the warmth dimension to parenting. This dimension is expressed through verbal and physical behaviour towards the children. At one end of the continuum is a parental acceptance that refers to care, comfort, nurturance, security or simply the love that a parent bestows unconditionally on the child. The other end of the continuum comprises of parental rejection that refers to a withdrawal of these affectionate qualities and expressions of physically and emotionally hurtful behaviour. Parental rejection can be expressed through either neglectful, aggressive, unaffectionate or by the child's perception of rejection in the absence of any behavioural indicators on the part of the parents. Concentration refers to attitudes of parents who devote a disproportionate amount of their time and energy to the direction and control of their children. Rejected children feel anxious and insecure and increase their positive responses with an increasing need for approval, attention, praise, etc. Apart from this excessive dependence on approval, rejected children suffer from issues like aggression, passive-aggression, difficulties in controlling emotional outbursts and aggression, emotional unresponsiveness, etc. Unlike healthy independence, rejected children develop defensive independence in adolescence that poses a further threat to the mental health of adolescents as well as to the well-being of society.

II. METHOD

Sample

The study conducted on the sample of 54 students from various high schools in Sangli city (Maharashtra, India). Random sampling method used for selecting the sample. The age range of the subject was 12 to 16 years, and educational level was 5th to 10th standard.

Psychological tools used for data collection

1. Family Relationship Inventory:

Prepared by Sherry and Sinha (1987) by Brunken and Crites's Family Relationship Inventory in the Indian situations. The inventory is intended to identify the individuals who feel emotionally accepted, over protected or rejected by their parents. In other words, it measures the acceptance, concentration and avoidance tendency of parents. However in the present study, only acceptance tendency is considered. FRI includes 150 items with true false alternatives.

Inventory has high reliability and validity. A high score in each area shows a high degree of one's feeling of his being accepted, concentrated and avoided by his or her parents.

2. Socio-Economic Status Scale:

This scale is constructed by Dr. D. S. Janbandhu. It consisted twelve questions with different alternatives. This scale is widely used in the field of research conducted by Western Maharashtrian Psychologists. The SESS has high reliability and validity. The test-retest reliability of the test is 0.83 and validity is 0.73.

III. RESULTS AND DISCUSSION

Table No. 1: Effect of Different Social Groups and Avoidance Family Relationship on Mental Health of Adolescents

Source of Variance	Sum of Squares	df	Mean Square	F	Sig.
Different Social Groups	5472.233	2	2736.117	2.624	.073
Avoidance Family Relationships	19391.233	2	9695.617	9.299	.000
Different Social Groups X Avoidance Family Relationships	73808.267	4	18452.067	17.697	.000
Error	553660.000	531	1042.674		
Total	652331.733	539			

Table 1 reveals the effect of different social groups and family avoidance relationship on the mental health of adolescents. The effect of different social groups is not significant. It means that the adolescents belonging upper, middle and lower societies are equally affected by the burning issue of mental health. However, the effect of family relationship on the mental health of adolescent is significant on .00 level. It means that those who highly avoided in their family is disturbed by the mental health rather than those who are not avoided in their family. It is also seen from Table 1 that, F values for main effects of different social groups and their two-way interactions are entirely significant .000 level. It means that mental health of adolescents is affected significantly due to these variables. The hypothesis, 'The different social groups and avoidance family relationships and their interaction will not significantly influence the mental health of adolescents' is firmly rejected in this study. How so far, in this study researcher has shown that avoidance family relationships influence the mental health of Indian youth.

Table No. 2: Scheffe's Post-Hoc Multiple Comparison between High, Average and Low Avoidance Family Relationship on Mental Health of Adolescents.

(I) Avoidance Family Relationship	(J) Avoidance Family Relationship	Mean Difference (I-J)	Std. Error	Sig.
High Avoidance (Mean= 62.88)	Average Avoidance (Mean= 68.36)	-5.48	3.404	.274
	Low Avoidance (Mean= 53.83)	9.05*	3.404	.030
Average Avoidance (Mean= 68.36)	High Avoidance (Mean= 62.88)	5.48	3.404	.274
	Low Avoidance (Mean= 53.83)	14.53*	3.404	.000
Low Avoidance (Mean= 53.83)	High Avoidance (Mean= 62.88)	-9.05*	3.404	.030
	Average Avoidance (Mean= 68.36)	-14.53*	3.404	.000

*. The mean difference is significant at the 0.05 level.

The F value for family avoidance relationship in Table 1 is significant, hence the posthoc multiple comparison is performed. Table 2 showing the difference between high, average and low avoidance family relationship groups and seen that the difference between high and low avoidance family relationship groups is significant. Moreover, the difference between average and low avoidance family relationship groups is also significant. The difference between high and average avoidance family relationship groups is not significant.

Figure-1: Effect of Different Social Groups and Avoidance Family Relationship on Mental Health of Adolescents

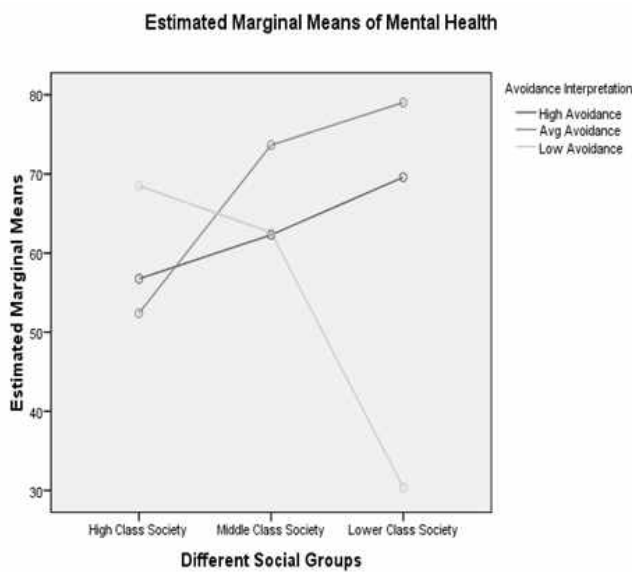


Figure 1 indicates the effect of different social groups and avoidance family relationship on the mental health of adolescents. It is clearly seen that all plots are scared at a different location. Hence, the main effect is significant. As well as it is seen that all lines are crossing each other, hence, the interactions are also significant.

IV. CONCLUSION

- 1) The avoidance family relationship significantly affect the mental health of adolescents in India.
- 2) The interaction between avoidance family relationship and different social groups significantly affect the mental health of adolescents in India.
- 3) The average avoidance family relationship group have most significant impact on the mental health of adolescents in India.

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