

## Mental Health in relation to Peer Pressure among Professional students of Kolkata, West Bengal

Dr. Himani Bhattacharya<sup>[1]</sup>

### **Abstract:**

*The most important topic of positive psychology is mental health. Bhatia (1982) considers mental health as the ability to balance feelings, desires, ambitions and ideals in daily living. It is seen that not only peer pressure can influence the sense of belonging, confidence and self-esteem of an individual but also can influence physical, emotional and mental distress. The aim of the present study was to examine the relationship between mental health and peer pressure among professional students. 100 professional students were randomly selected from different Medical college of Kolkata, Burdwan of West Bengal. Mental health was measured by mental health inventory and peer pressure inventory by Clasen and Brown (1985) was used in this study. Correlation, Independent t-test and Regression analysis were used for analysing the data. The result shows that there is a significant correlation between mental health and peer pressure of professional students. Hence early detection of mental health problems and peer pressures would promote better understanding about students mental health and peer pressures. Finally it is also suggested that further research would highlighted other factors of mental health.*

**Keywords :** Mental health, Peer pressure, Professional students.

Mental health is a crucial dimension of overall health and is an essential resource of living. The WHO ( World Health organisation ) states that “health is a state of complete physical, mental and social wellbeing and not merely the absence of disease or infirmity”. An important consequence of this definition is that mental health is described as more than the absence of mental disorders or disabilities. Mental health is a state of wellbeing in which an individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and is able to a contribution to his or her community. In this positive sense, mental health is the foundation for individual wellbeing and the effective functioning of the community. Wilkinson and O'Connor (1982) defined mental health as a congruent relationship between a person and his or her surrounding environments.

The mental health problem of students in higher education is a widely discussed topic in recent times. Higher education plays important role to cope with psychiatric problems and to help students in developing their personal, social and intellectual, potential and to make a productive contribution to society. But in this case a caution is needed, otherwise it may create distress and develop illness. Some study indicates that the financial restrains, growing competitiveness and excessive will to succeed acerbate the condition of psychiatric problems among the students in School, College and University in recent years.

The statistics of World Health Organisation (2003a) mentioned that 12% of global diseases (121 million people suffer from depression, 70 million from alcoholism, 24 million from schizophrenia, 37 million experiences dementia) were a result of mental health problems. By 2020 as indicated by the World Health Organisations (2003b) the burden will be increased by nearly 15%. This will result in the

loss of disability – adjusted life years to illness and young adults in developing countries seem to be the most prone.

In recent past the field of Global Mental Health has emerged and defined as the ‘area of study, research and practice that places a priority on improving mental health and achieving equity in mental health for all people worldwide (Patel & Prince, 2010).

Abdulghani (2008) revealed that there was a prevalence of stress among tertiary students and it was also found that there was a severe stress among medical students, 57% and 19.6% respectively. The medical students in this study are from the College of Medicine at the King Saud University.

Dahlin, Joneberg and Runeson (2005) indicated that there was a significant difference in pressures experienced among first year, third year and sixth year medical students in Karolinska Institute Medical University, Stockholm. The analysis of the study found that first year students reported a highest degree of pressure compared to third year and sixth year students. Besides that, the study also found that women experienced higher levels of stress than men.

So in recent years mental ill health is on the rise in many countries significantly among our youth population. Students are the cream of world population in every country. Studies have shown that about 50% students in India suffer from health problem. 15% of the students suffer from mental disorders like depression, anxiety, hysteria, adjustment reactions and alcohol and drug abuse etc. In addition , many more students may have emotional problems related to their family and college life (Chandrasekhar et al., 2007) Over 16000 school and college student in India committed suicide in the last three years (Nanda, 2008).

In this context we may indicate that mental health is also influenced by their peer pressure also. The peer pressure may

<sup>[1]</sup> Indian Statistical Institute, Kolkata- 108

be positive or negative. It is positive if it encourages positive attitude, healthy values, respect and hard work. It is negative if it encourages negative attitude. The positive pressure strengthens the potential of a person and the negative pressure reduces the person's strength. Many Researchers have pointed out that peer pressure do not only affect adolescent's mental health, decisions to drink, smoke, use drugs or engage in other delinquent behaviours but also influence adolescents' involvement in school (Clasen & Brown 1985). Actually students spend much of the day in School or College or University with their peers and such socialization may impact not only their mental health but also affect their academic development.

Tope, O (2011) examined peer assessment between students in Colleges and Universities. Results revealed that peer assessment of writing and peer assessment using marks, grades and tests are positively related with students' achievements and attitudes. It was also concluded by the research that the effects of peers are better than the effects of teachers.

Lau, Quadrel & Hartman (1990) explored the sources of stability and change in young adults' health beliefs and mental health behaviour concerning drinking, diet, exercise and wearing seat belts. Researchers showed that there were considerable changes in health behaviour during first years and peers have strong impact on that change.

From the above mentioned discussion, it is revealed that past research findings have shown a relation between mental health and peer pressure. Hence the aim of the study is to explore peer influences on professional students of two medical college and to explore whether a relation exists between peer pressure and mental health among two medical college. The present paper therefore has attempted to concentrate on the following parameters of research objectives:

- (1) To study the pattern of peer pressure among professional adolescent boys and girls.
- (2) To study the relationship between mental health and peer pressure of professional adolescent boys and girls.
- (3) To find out if there is any difference in mental health of professional students of two medical college
- (4) To find if there is any difference in peer pressure of professional students of two medical college

The following hypotheses are set for the study:

- (1) There will be difference between professional boys and girls with respect to peer pressure of two medical college.
- (2) There will be significant correlation between mental health and peer pressure and its subscales.
- (3) There will be difference between professional boys and girls with respect to mental health of two medical college.

### I. METHOD

#### Sample:

The participants of the present investigation was consisting of (N- 100) professional respondents, 50 students from Burdwan Medical College (First semester, Burdwan) and 50

students from College of Medicine and Sagore Dutta Hospital (First semester, Kolkata) were randomly selected from two medical college of West Bengal.

#### Tools:

In the present study the following measures were used:

##### (1) Mental Health Inventory:

This scale was developed Jagdish and Srivastava (1983). This scale consists 60 items (adopted version) based on 6 dimensions: (1) positive self-evaluation, (2) realistic perception (3) integration of personality (4) autonomy (5) group-oriented attitude (6) environment mastery. The scale has four response categories viz. always, often, rarely and never. The split-half reliability of the scale was found to be .73 and the construct validity of the scale was found to be .54. Here high score obtained by subject is indicative of good mental health and score is indicative of poor mental health.

##### (2) Peer Pressure Inventory:

This scale was developed by B. Bradford Brown Donna Rae Clasen (1985) based on 5 dimensions: (1) peer conformity (2) family involvement (3) peer involvement (4) school involvement (5) misconduct. The scale consists of 53 items that measures the level of peer pressure in different areas. The scoring procedure is: Each is scored from -3 + 3, with the < no pressure > option scored as zero. Subscale scores are derived by the mean of the item scores. In the 'no pressure' box, in place of the zero score is a letter indicating the subscale with which the item is associated and a figure indicating the corrected item-to-scale correlation. Items with nothing in the box are not associated with any of the 5 subscales.

#### Results:

As stated earlier, the main purpose of the investigation was to study mental health in relation to peer pressure dimensions among professional students of two medical college. For this purpose correlation, independent samples t-test and were used. All the analysis has been done by SPSS.

**Table – 1:** This table represents the correlation of mental health and peer pressure and its subtypes of L-1( Burdwan Medical College) and L-2 (Sagore Dutta Medical College).

Variables	P. self.	R. Per.	Inte. Per.	Auto nomy	G. Attitude	E. Com.	P. Confer.	Family involve.	P. Involve	School involve	Miscon
Positive Self-evaluation	1										
Realistic Perception	.254*	1									
Integration of Personality	.414**	.257**	1								
Autonomy	-0.17	0.14	0.03	1							
Group oriented Attitude	.247*	.387**	.239*	0.14	1						
Environment Competency	0.06	.359**	0.12	.301**	.237*	1					
Peer Conformity	.298**	-0.1	-.286**	0.02	0.07	-.212*	1				
Family involvement	0.18	0.1	0.08	-0.11	-0.11	0.03	-.210*	1			
Peer involvement	-0.06	-0.08	0.02	0.08	-0.06	-0.08	.392**	.227*	1		
School Involvement	0.13	0.14	0.09	-0.1	-.210*	0.02	-0.18	.579**	0.09	1	
Misconduct	-0.09	-0.11	-0.07	0.06	-0.09	-.232*	.307**	-.400**	0.08	-.333**	1

The above table represents that there is a co-rrrelation of mental health and peer pressure and its sub-types of L-1(Burdwan Medical College) & L-2 ( Sagore Dutta Medical College).

**Table-2:** Mean, SD and p-value of students of L-1 ( Burdwan Medical College) and L-2 ( Sagore Dutta Medical College).

	Location-1 (Burdwan Medical College)		Location-2 (Sagore Dutta Medical College)				
Variables	Mean	Std.	Mean	Std	df	F- Value	P-Value
MH-Positive Self-evaluation	35.06	4.76	36	4.89	1	0.2	0.89
Realistic Perception	19.44	2.59	19.41	3.05	1	0.51	0.48
Integration of Personality	23.4	3.23	25.08	3.12	1	1.11	0.74
Autonomy	13.32	2.58	12.55	2.77	1	2.02	0.16
Group oriented Attitude	28.02	3.68	28.29	3.62	1	0.53	0.43
Environment Competency	23.98	3.68	24.37	3.92	1	1.68	0.19
PP -Peer Conformity	.028	0.54	1.22	0.54	1	8.64	.00*
Family involvement	0.62	0.71	0.83	0.98	1	0.14	0.71
Peer involvement	0.69	0.71	0.32	0.67	1	2.78	0.41
School Involvement	0.7	0.77	0.78	0.99	1	0.25	0.62
Misconduct	4.96	0.72	6.23	0.79	1	0.11	0.75

\*p<0.05 level

The above table represents Mean, SD. and p-value of two medical college. Peer conformity assesses whether or not an individuals adopt a certain course of action sanctioned by their peer groups. The above table shows that mean score of mental health is higher than peer pressure diemensions. The above table also shows that there is a significant difference among L-1( Burdwan Medical College) and L-2 ( Bankura Medical College) regarding peer conformity. It is significant at 0.05 level. It corroborates that peer conformity is related to involvement in peer activities, antisocial activities and misconduct ( Brown et al,1986).

**Table-3:** Gender wise p-value of students of L-1 ( Burdwan Medical College) and L-2 (Sagore Dutta Medical College).

Variables	df	F-value	p-value
MH-Positive Self-evaluation	1	0.87	0.35
Realistic Perception	1	2.3	0.13
Integration of Personality	1	6.48	.01*
Autonomy	1	0.01	0.91
Group oriented Attitude	1	1.97	0.16
Environment Competency	1	0.41	0.53
Peerpressure-Peer Conformity	1	0.01	0.95
Family involvement	1	0.43	0.51
Peer involvement	1	4.67	0.03*
School Involvement	1	3.02	0.09
Misconduct	1	2.68	0.11

\*p<0.05 level

The above table represents that there is a gender wise difference among students of L-1 (Burdwan Medical College) & L-2 ( Sagore Dutta Medical College). There is a significant difference among two college on Integration of Personality diemension.It is significant at 0.05 level. It proves that students of L-1 (Burdwan Medical College) would have better mental health as compared to students of L-2 (Sagore Dutta Medical College) on Integration of Personality. There is also another significant difference among two college on Peer involvement diemension. This finding also supports to a variety of risk behaviours and psycho- social difficulties including substance use, risk taking behaviours, delinquency,dating attitudes,sexual behaviour which is consistant with what other studies have found (Brown et al,1986).

## II. RESULTS & DISCUSSION

As stated earlier, the main purpose of the investigation was to study mental health in relation to peer pressure dimensions among professional students of two medical college. For this purpose correlation, independent samples t-test were used. All the analysis has been done by SPSS.

- (1) In Table-1. indicates that mental health and peer pressure and its sub-types are more or less correlated.
- (2) In Table-2 mean score of mental health is high than peer pressure score of two medical college. There is also a significant difference on Peer conformity diemension among two medical college.
- (3) In Table-3 shows that there is a significant difference on Integration of personality and Peer conformity of two medical college regarding gender.

### Implication of the Study :

Both Mental health and peer pressure are a strong indicator which indicate all round development of man not only professional students but also non -professional students. This peer pressure may lead to much risky behaviours like substance abuse, drinking alcohol, delinquent behaviour etc. Mental health is also important because past research found that poor mental health could result in negative effects such as feeling hopeless, suicidal behaviour ( Kay, Li, Xiao, Nokkaew and Park, 2009), and lower GPA (Puskar and Bernardo, 2007).

Furthermore, policy makers in the field of mental health i.e. Ministry of Health should ensure that there is an adequate and proper mental health services for the mentally ill people. Finally it is suggested that future researchers would examine other factors of mental health and could improve mental health status of students.

This study is not free from limitation. Due to limited time period sample size was small.Future study will be done on a more detailed sample selected from other Medical college of West Bengal.

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