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A Study Of Mental Health Of Adolescents In Relation To Their Family Environment

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Abstract

Adolescence is a critical developmental stage marked by significant biological, psychological, and social changes, making it susceptible to various mental health challenges. During this time, adolescents rely heavily on their family for support, guidance, and a sense of security. The family environment serves as the primary context within which adolescents learn to navigate relationships, manage emotions, and develop coping mechanisms. The present study was conducted to find out the significant difference in family environment and mental health of adolescents of government and private schools of both rural and urban areas. A stratified random sampling technique was employed for selecting sample of 200 secondary students from 6 government and 6 private schools of both rural and urban area of Jammu city. Results revealed that urban adolescents perceived family environment as more cohesive, more expressive, more accepting and caring, and more independent as compared to rural adolescents. Family environment is significantly much better than those from rural areas. Adolescent boys perceive family environment significantly better than adolescence girls. Conclusions of the present study are useful for parents and caregivers of adolescents.

Key words: Mental health, adolescents, family environment

Introduction

Adolescence is taken into account as a transition from childhood to adulthood. It is very important aspect in human life because many developmental changes take place in this period such as physical growth, peer emotions, mental development etc. But it is true that today adolescents are facing mental health problems due to several reasons. Mental health problems are affecting academic performance of learner and are a big cause of poor academic achievement. Learners with poor mental health are facing influences all failure in academic pursuit and are major cause of suicide. Various studies have been carried out in different parts of the world to recognize what affects mental health of adolescents. Suicidal behaviour happens due to poor mental health, a sense of helplessness (Kay, Li, Xiao, Nokkaew& Park, 2009) and lower academic achievements (Puskar & Bernardo, 2007). The mental health of college students has attracted attention of researchers in recent years. Suicide is the second leading cause of death in college students (American

Psychiatric Association), and a recent survey indicated that 45.7% felt so depressed in the previous school year that it was difficult to function (American College Health Association,2005).

1.1 Family Environment

Home is an endless school of life. Each child is conceived in a family as a unit of society. It is family where a child takes in the main exercise of socialization and what the general public expects of him and what is his part as a person in the general public. Family environment is the nucleus of all other social institutions. The family significantly affects the youngster. It parts of his identity, his convictions, conduct, goals and so on.

Home gives not just the heredity transmission of essential possibilities for the development of the child but also the favorable environment in terms of interpersonal relationship and cultural pattern. A home is a place where one lives and feels welcome. It is always a place where one feels safe and comfortable(Bukkel, 2015).

Family with its physical, intellectual and emotional aspects moulds a youngster's life in his journey towards self-fulfilment. Individual differences owe their origin mostly to various factors made by home, which may thwart or help the dynamic development of the child (Sharma, 2011).

Family being the first and major agency of socialization has great impact and bearing on the development of the child. Most of the children who are great achievers and well adjusted come from the families where maintaining healthy relationships exist. Therefore, it is the home which sets the pattern for the child's attitude towards individual and society, helps intellectual development in the child and supports his goals and accomplishments (Kolappan& Bari, 2011). The families in general and parents in particular, are considered to be the most essential support system available to the child. The strongest factor in moulding a child's personality is his relationship with his parents (Mohanraj&Latha 2005).

The family environment can be a strong source of support for developing adolescents,providing close relationships, strong parenting skills, good communication, and modelingpositivebehaviors. It can also be a problematic environment when those supports are lacking,or when negative adult behaviors like smoking and heavy drinking are present. Whereadolescent health is concerned, clearly the family matters, and parents matter (Aufseeser, Jekielek&Brown,2006).

1.2 Mental Health

Mental Health is constituted by two words- Mental and Health. Mental means mind. It is cognitive or intellectual power of human. The word Health means different things to different people, depending on the situation and combination with other words. In specific, it is wellness or goodness or well-functioning of a system. In general, according to WHO (2001) ―health is a state of complete physical, mental, and social well-being, and not merely the absence of disease or infirmity. So, simple meaning of mental health is that it is good or proper functioning of mind. In previous stage, mental health was considered as free from mental

illness. But mental illness is not a guarantee of good mental health. It is totally negative aspect of mental health. Laterpositive aspects of mental health were considered and defined in differentway.

Mental health refers to our cognitive, behavioral, and emotional wellbeing – it's about how we think, feel, and behave. The word 'mental health' is sometimes used to mean an absence of a mental disorder.

Mental health may affect our daily life, relationships, and even physical health. Mental health also includes a person's ability to enjoy his life - to attain a balance between his life activities and efforts to achieve psychological resilience.Mental health is compound sum of adjustment of individual with self, others and environment including home environment towards life. In the absence of these individual may lack his self-esteem, self-confidence, self-efficacy and social skills. In the absence of these qualities students cannot achieve properly. Due to these deficiencies, academic performance deficiency is enhancing in learners and raising problems of frustration. Frustration is creating situation of suicide.

Therefore, development of mental health at secondary, higher secondary and college level is very essential challenge in front of teachers, parents, teacher educators and Government; Particularly Secondary Stage (adolescence period) is very important and critical stage of life. It is period of physical and psychological transition. At this stage physical, emotional, social, religious, attitudinal changes develop vastly. This is a most important period in which the personality traits are developed and find expression in many directions. In conclusion, this is backbone of development of physical, social and psychological development of an individual, while mental health and home environment is essential element for these developments.

Adolescence is the period of great strain and strife. Adolescence (10–19 years) is a different and formative time. Whilst many adolescents have good mental health, multiple physical, emotional and social changes, including exposure to poverty, abuse, or violence, may make adolescents vulnerable to mental health problems. Promoting psychological well-being and protecting adolescents from adverse experiences and risk factors which may impact their potential to thrive are not only critical for their well-being during adolescence, but also for their physical and mental health in adulthood . Adolescence is a crucial period for developing and maintaining social and emotional habits important for mental well-being. These include adopting healthy sleep patterns; taking regular exercise; developing coping, problem-solving, and interpersonal skills; and learning to manage emotions. Supportive environments in the family, at school, and in the wider community are also important.Multiple factors determine the mental health of an adolescent at any one time. The more risk factors adolescents are exposed to, the greater the potential impact on their mental health. knowledge or awareness about mental health among health workers, or stigma preventing them from seeking help.(World health organization)

REVIEW OF LITERATURE

Kaur and Niwas (2016) studied to discover associations of mental health with personality factors-neuroticism and extroversion and also discovered the association between mental health with emotional intelligence. 600 students (300male and 300 female) of 10th class and theResults revealed positive

association between emotional intelligence and mental health. Results also show positive association between extroversion factor of personality and mental health and negative association between personality factors neuroticism and mental health.

Shankar, Wani and Indumathi(2017) conducted a study on Mental Health among adolescents. The main purpose of their research is to study the level of mental health among adolescents. The total sample consist of 40 subjects divided in 2 groups i.e. boys and girls, each group has 20 subjects. Further these 2 groups are equally subdivided into two more age wise groupsi.e 13-15 and 16-19. Mental health scale developed and standardised by Dr Jagdish used to collect and analyse the data further t test was applied and the results revealed that boys have high level of mental health than girls. Results also shows significant difference between mental health scores of boys and girls and insignificant difference between mental health scores of age groups 13- 15 and16-19 years. The conclusion of the studies shows gender and age as an influential factor in mental health.

Lalnunhlui (2018) investigated the study on mental health in relation to academic achievement and stream of study among private higher secondary school students in Aizawl. A sample of 300 science and commerce students in class 11 was selected randomly from Aizawl district, a capital of Mizoram. Mental Health Scale (MHS) developed by Dr.SushmaTalesara and Dr. Akhtar Bano were used as a tools for data collection and the academic performance of the samples were collected t- Test was used to determine the significance of difference. The study found that there was a significant difference between mental health and academic achievement of higher secondary school's students, and there was a significant difference between mental health of Science and Commerce students of higher Secondary School in Aizawl city.

Roach, 2018 In the past few years, there has been a growing body of research exploring the relationship between adolescent mental health and family environment. One study found that supportive peer relationships can play a significant role in promoting positive mental health outcomes among adolescents.

Mannarini et al., 2018 The findings suggest that strength-based parenting can promote higher levels of life satisfaction, positive affect, and lower negative affect in pre-teens and teenagers over time. Additionally, a study on the relationship between emotion regulation and parental bonding in families of adolescents with internalizing and externalizing disorders found that a parent-child relationship characterized by high levels of care and warmth is associated with fewer mental health problems in adolescents.

Balda, Sangwan, and Kumari(2019) study was conducted in Hisar city and two villages of Hisar district. Two Government Senior Secondary Schools (one for boys and one for girls) from rural area and two Government Senior Secondary Schools (one for boys and one for girls) from Hisar city were selected at random. The study was conducted with 16-18 years old adolescents. These adolescents were selected from randomly selected four Government Senior Secondary Schools. Total sample constituted of 240 adolescents, 120 from rural area and 120 from urban area. These 240 adolescents included 120 boys and 120 girls. Family environment was assessed with the help of Family Environment Scale (FES) by Bhatia and Chadha (2004).

. Z-test was used to determine the results. Results revealed that urban adolescents perceived family environment as more cohesive, more expressive, more accepting and caring, and more independent as compared to rural adolescents. While, rural adolescents perceived family environment more organized than urban adolescents. Urban adolescents perceived family environment significantly much better than those from rural area. Adolescent boys perceived family environment as more expressive, more accepting and caring, more independent, while, adolescents girls perceived family environment as more organized and controlling. Adolescent boys perceived family environment significantly much better than adolescent girls. Findings of the present study are useful for parents and caregivers of adolescents.

Waters et al., 2019 Research suggests that non-cognitive competencies, such as emotional regulation, social awareness, and problem-solving skills, can also contribute to academic success. Another study examined the impact of family factors, such as parental mental health, family structure, and socioeconomic status, on adolescent mental health. The findings indicate nurturing family environment tend to exhibit better mental health outcomes compared to those who come from more dysfunctional family settings, where factors such as strained parent-child relationships and high levels of conflict are more prevalent.

Y Du., 2021 Adolescent mental health is one of the major public health issues, and depression among contemporary adolescents is increasing year by year. According to data released by the World Health Organization in 2019, the total number of depression cases worldwide exceeds 350 million, and about 200,000 people commit suicide each year due to depression. Family life occupies a large part of the life of adolescents, so family factors have a great influence on adolescent depression.

Yang, Z., Cui, Y., Yang, Y., Wang, Y., Zhang, H., Liang, Y., Zhang, Y., & Shang, L. 2021 More educated parents in white-collar employment and higher family income were associated with better mental health and better family dynamic scores. The total score of family dynamics was positively correlated with mental health scores. The generalized linear mixed model found that poorer mental health was associated with increased age, being in senior high school, having a father in a blue-collar profession, and SSFD square. The structural equation modelling suggested that this is largely a mediated effect via those characteristics impacting family dynamics, which in turn affect mental health. Family dynamics may be an important contributor to adolescent mental health.

Trumello C, Vismara L, Sechi C, Ricciardi P, Marino V, Babore 2021 The findings, collected through structural equation model analyses, showed that perceived care from both father and mother had significant indirect effects on Internet addiction problems through adolescents' mental health problems. Furthermore, Internet addiction problems were demonstrated to be negatively associated with maternal care but not with paternal care. The study provides empirical support to the need of family-based prevention and intervention programs to take care of Internet addiction.

Fauzi, Rahmi Yawmil, Alfiasari, and Riany, Yulina Eva 2022 This research analyzes the influence of parenting practices and character traits on the subjective well-being of adolescents, revealing that both factors significantly affect their happiness and quality of life. The study, conducted with 213 11th-grade students in Bekasi, found that while parenting practices and subjective well-being were low, character traits were moderate, with female adolescents receiving better parenting.

Shiyue Hu, Dan Cai, 2023 The Latent Growth Curve Modeling indicated that adolescents' resilience and general self-efficacy showed a curve upward trend, which increased first and then decreased. The development rate decreased each year. The cross-lagged panel model and a random intercept cross-lagged panel model concluded that perceived family support was strongly associated with positive mental health of junior high school students. Family support was important for developing positive mental health in early adolescence. Therefore, attention and interventions targeting positive mental health changes in early adolescence are particularly effective. And, it is important to encourage parents of adolescents to continue to provide support and guidance.

Sangraula, A., De Los Reyes, 2024 The findings support use of a short, clinically feasible measure (Q-LES-Q-SF) to assess quality of life among parents seeking mental health services for their adolescents. As such, the study informs future work that tests the ability of the Q-LES-Q-SF to screen for or identify parents whose quality of life may impact their involvement in the delivery of anxiety-related services to their adolescent.

Rational of the study

Adolescent stage is the most crucial stage in the life of an individual. It is a period characterized by intensive growth and development in almost all aspects: Physical, Mental, Social,Moral,linguistic,Emotional. Every child is born in a family which is a unit of society. It is through the family that the child learns the first lesson of socialization and what the society expect from him and what is his role as an individual in the society. This has always been very painful experience that few students in the class would not do as much as they could do.They had the potential but lack motivation. Individual attention paid at school sometimesbut with the burden of routine work it is never possible to deal those students individually for each subject. During conversations with the child an important fact was revealed that they were missing home and had developed a sort of disinterest in their studies and hence never aspired to go very high. They were feeling maladjusted. The present study is a step in this direction of understanding the effect of family environment on mental health of adolescents.

Conclusion

6.1 Objectives

1. To explore the relationship between family environment and mental health inadolescents.
2. To study the significant gender differences in family environment and mental health of adolescents.
3. To study the significant difference in family environment and mental health of adolescents of government and private schools.
4. To find out the significant difference in family environment and mental health of adolescents of urban and rural schools.

6.2 Hypotheses

1. There will be no correlation between family environment and mental health in adolescents.
2. There will be no significant gender differences in family environment and mental health of adolescents.
3. There will be no significant difference in family environment and mental health of adolescents of government and private schools.
4. There will be no significant difference in family environment and mental health of adolescents of urban and rural schools.

6.3Sample

In the present study the population will be comprised of all the secondary schools of Jammu city. Stratified random sampling technique will be employed for selecting sample of 200 secondary students from 6 government and 6 private schools of both rural and urban area of Jammu city

6.4 Variables studied

The following variables were studied in the present investigation

A) Independent variable: Gender: Male and Female

Type of school: Govt. and Private

Type of residence: Urban and Rural

B) Dependent variable: i) Family environment

iii)Mental health

6.5 Tools

For the purpose of accomplishment of objectives, the tools of research be used by the researcher:

1. Family Environment Scale (FES) scale has been developed by Dr.Harpreet Bhatia and Dr.N.K. Chadha (1993) has been employed by the researcher. In this scale there are eight areas namely: Cohesion, Expressiveness, Conflict, Acceptance and Caring, Independence, Active Recreational Orientation, Organisation and Control. The scale consist of total 69 items where 4 items are positive and 28 are negative items.

3. Mental Health Continuum- Short Form (MHC-SF): The MHC-SF consists of 14 items (Keyes 2005).It measures positive mental health and has 14 items, representing various feelings of well-being. Test takers rate the frequency of every feeling in the past month on a 6-point Likert scale. The MHC-SF contains three items of emotional well-being, six items of psychological well-being, and five items of social well-being, with each psychological and social well-being item representing one dimension.

6.6 Statistical techniques

- Mean, Standard Deviation, t-test and Pearson product Moment correlation method were used to analyze the data

Hypothesis 1 There will be no correlation between familyenvironment and mental health in adolescents. It was tested using product moment correlation and the results are presented in 5.1

Table 5.1 Relationship between family environment and mental health

Pearson correlation(r)	Mental health
Family environment	0.22*

*significant at 0.05 level

Table 5.5 reveals that there is significant positive relationship (r=0.22) between family environment and mental health among adolescents.

Therefore, the hypothesis 1 which states that there will be no correlation between family environment and mental health in adolescents is rejected.

Hypothesis 3 There will be no gender differences in family environment and mental health of adolescents. It was tested using independent sample t-test and the result are presented in table 5.3

Table 5.3Difference in the level of in family environment and mental health in males and females

Variables	Group	N	Mean	Sd.	t	Significance
Family environment	Males	100	226.74	44.23	2.56	Significant at 0.05 level.
	Females	100	223.49	43.45		
	Females	100				
Mental health	Males	100	42.41	10.71	1.14	Insignificant
	Females	100	40.73	10.10		

Table 5.3 shows that the mean, sd and t values of family environment, and mental health in males and females. Difference in the level of family environment were found to be statistically significant

Therefore, the hypothesis 3 which states that there will be no gender differences in family environment and mental health of adolescents is accepted

Hypothesis 4 There will be no significant difference in family environment and mental health of adolescents of government and private schools.It was tested using independent sample t-test and the result are presented in table 5.4

Table 5.4Difference in the level of in family environment and mental health in adolescents of government and private schools

Variables	Group	N	Mean	Sd.	t	Significance
Family environment	Govt.	100	224.45	43.84	1.52	Insignificant
	Private	100	225.31	44.06		
Mental health	Govt.	100	41.65	10.23	1.03	Insignificant
	Private	100	40.17	10.01		

Table 5.4 shows that the mean, sd and t values of family environment and mental health in adolescents of govt. and private schools. Difference in the level of family environment and mental health difference is insignificant for adolescents of govt. and private schools.

Therefore, the hypothesis 4 which states that there will be no significant difference in family environment and mental health of adolescents of government and private schools is accepted.

Hypothesis 5 There will be no significant difference in family environment and mental health of adolescents of urban and rural schools.It was tested using independent sample t-test and the result are presented in table 5.5

Table 5.5Difference in the level of in family environment and mental health in adolescents of urban and rural schools

Variables	Group	N	Mean	Sd.	t	Significance
Family environment	Rural	100	223.57	42.79	1.39	Insignificant
	Urban	100	222.18	41.07		
Mental health	Rural	100	40.32	10.12	1.26	Insignificant
	Urban	100	41.17	10.43		

Table 5.5 shows that the mean, sd and t values of family environment and mental health in adolescents living in urban and rural areas. Difference in the level of family environment and mental health difference is insignificant for adolescents living in urban and rural areas.

Therefore, the hypothesis 5 which states that there will be no significant difference in family environment and mental health of adolescents of urban and rural schools is accepted.

6.7 Conclusion

In the present study, the results revealed that were significant positive relationship between family environment and mental health. Significant gender differences were found in family environment. No significant differences were found in adolescents of govt and private schools with respect to family environment and mental health.

No significant differences were found in adolescents of urban and rural areas with respect to family environment and mental health.

LIMITATIONS AND SUGGESTIONS

7.1 Limitations of the study

The study has certain limitations :

1. The study was limited to the sample of 200adolescents only.
2. The research was confined to Jammu city only
3. The study was limited to two variables only.

7.2 Suggestions

The following suggestions may be incorporated for further research:

1. The present study was confined to only 200adolescents. Therefore, it is suggested that the same type of research can be made on large sample.

2. Similar study can also be undertaken in other regions of Jammu district.
3. The present study studied only two variables. Other variables can also be taken in future studies.

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