

A Study to Assess the Mental Health Status of Adolescents Studying in a Selected College of Nursing in New Delhi

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Abstract

Background: The foundation for good mental health is laid in the early years. The term adolescence is derived from the Latin word "adolescere" meaning to grow, to mature. It is considered as a period of transition from childhood to adulthood. They are no longer children yet not adults. The student population is in some ways more vulnerable than other young people. First-year college students have to adapt to new environment and ways of learning. Academic demands and workload increase and university courses require much more self-directed learning and the capacity to manage time and prioritise work. **Objectives:** To assess the mental health status of adolescents studying in a Selected College of Nursing in New Delhi. **Methodology:** To attain the objectives of the study, a quantitative, non-experimental approach was adopted. The samples for the present study comprised of 40 adolescents (DGNM 1st year students) in the age group of 18-21 years studying in a selected College of Nursing. A structured knowledge questionnaire was prepared to assess the mental health status of adolescents. **Results:** The data obtained were analyzed by using the descriptive statistics. The findings revealed that all subjects (100%) had average mental health status. The subjects ranked first in their mental health status for the category. Relationship with family, followed by Academics, then Clinical, then Relationship with Friends, followed by Hostel Living and ranked last

for the category Personality. **Conclusion:** Mental health status score of DGNM 1st year students was moderate and no one was found with the high and low mental health status and subjects scored highest in the domain "relationship with family", "academics" and "clinical posting" followed by "relationship with friends", "hostel living" and "personality".

Keywords: Adolescent; Mental Health; Assessment.

Introduction

Adolescents constitute roughly around 22.8% of population of India[1]. Adolescents – young people between the ages of 18 and 21 years are often thought as a healthy group[2]. Adolescents are not only in large numbers but also they are the citizens and workers of tomorrow. The problems of adolescents are multi-dimensional in nature and require holistic approach. The following changes take place during adolescent period: biological changes i.e. onset of puberty, cognitive changes – emergence of more advanced cognitive abilities, emotional changes – self-image, intimacy, relation with adults and peers group and social changes – transition into new roles in the society. Many mental health problems emerge in late childhood and early adolescence. Recent studies have identified mental health problems - in particular depression, as the largest cause of the burden of disease among young people [3]. Adolescence is regarded as a unique phase of development. It is the period between childhood and adulthood in which certain psycho-social tasks must be accomplished in order to help an individual to have a transition more successfully into the next stage of development.

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W.H.O. reports that mental health problems are common in adolescents than in early childhood and more frequent among adolescents living in urban areas than in small town or rural areas. Many of the problems affecting the adolescents today are characterized by lack of meaningfulness in their lives rather than something that can be labelled as illness [4].

The student population is in some ways more vulnerable than other young people. First-year college students have to adapt to new environment and ways of learning. Academic demands and workload increase and university courses require much more self-directed learning and the capacity to manage time and prioritise work. Both of these can be easily disrupted by mental disorder and misuse of drugs and alcohol. As a result students can face academic decline that can result in the need to repeat academic years or even to withdraw from university or college. Early adult life is a crucial stage in the transition from adolescence to independence as an adult. Underachievement or failure at this stage can have long-term effects on self-esteem and the progress of someone's life [5]. The investigators came across limited studies conducted in India and felt the need to conduct the present study with the aim to assess the mental health status of adolescents in a selected College of Nursing in New Delhi.

Methodology

The study was conducted in a selected college of nursing in Delhi. 40 adolescents (DGNM 1st year students) in the age group of 18-21 years studying in a selected College of Nursing, were selected through convenience sampling technique. A structured knowledge questionnaire with three point rating, "always", "sometimes", "never" was prepared to assess the mental health status of adolescents. The tool was designed in two

sections: section A consisted of total seven items to elicit information regarding demographic data. Section B consisted of 60 items to elicit information regarding the mental health status of DGNM 1st year students. There were 29 positive statements and 31 negative statements. Mental health status was measured by adding the scores of each item to get the total score. The total score obtained by a student was interpreted as High Mental Health Status: 81 -120, Average Mental Health Status: 41 -80, Low Mental Health Status: 0 - 40. Data were analyzed employing descriptive statistics.

Results

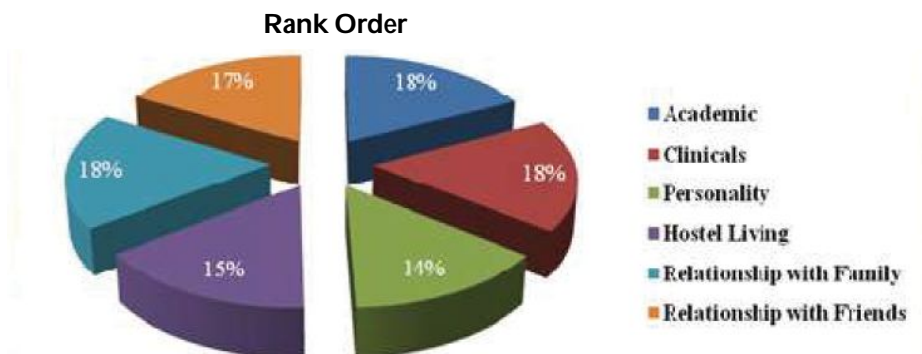
I. Findings related to demographic characteristics of the subjects

92.5% of the subjects belonged to the age group of 18-19 years. 57.5% were from Arts Stream. Most of the subjects (55%) stayed with both parents and siblings, 42.5% of the subjects' fathers were educated upto high school education, 37.5% of the subjects' mothers were educated upto high school. Most of the subjects' fathers (57.5%) were engaged in private jobs, majority of the subjects' mothers (82.5%) were self-employed.

II. Findings related to the assessment of mental health status of adolescents

Findings revealed that all subjects (100%) had average mental health status. The subjects' mental health status assessment clearly indicated that they had variation in different domains of mental health status. Figure 1 shows that they scored highest in the domain "relationship with family", "academics" and "clinical posting" followed by "relationship with friends", "hostel living" and "personality". This depicts that they had least issues with relationship

Fig. 1: A Scattered Pie Diagram representing the distribution of subjects according to the Rank Order of their Mental Health Status Score



with family and had maximum problems with their personality.

Discussion

A meta-analysis conducted by Ravens-Sieberer U et al showed that the prevalence of mental health problems among adolescents ranges from 14.5% to 25% globally [6]. In the present study also all the participants had average mental health status and they had least issues with relationship with family and had maximum problems with their personality.

Findings of the present study revealed that subjects scored highest in the domain "relationship with family", "academics" and "clinical posting" followed by "relationship with friends", "hostel living" and "personality". However another study done by Seenivasan P and Caroline Priya Kumar highlighted that Conduct problems were the highest (22.6%), followed by peer problems (12.8%), pro-social behaviour (12.4%), emotional problems (12.2%) in urban Indian adolescents. 23.4% of the students felt that these problems interfered with their home life, friendships, classroom life, leisure activities. Mental problems were significantly higher among those children whose both parents were employed, across all categories [7].

Conclusion

Conclusions drawn on the basis of the finding of the study were: Mental health status score of DGNM 1st year students was moderate. Mental health status score ranked first in their mental health status for the category relationship with family, followed by academics, then clinical, then relationship with friends, followed by hostel living and ranked last for

the category personality. Educational institutions have far too long concerned themselves only with the intellectual development of nursing students. Nursing students as a human being, functions in an integrated personality system. Therefore an isolated approach to their intellectual development should be supplemented with development of non-intellectual personality factors. Nursing students' health issues should adequately be addressed related to the social and emotional aspects besides physical health. Guidance and counselling should be available to the nursing students in the university campus. Counsellors should be appointed in nursing college for them.

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