

## **An Audit of Mental Health: A Comparative Study of Adolescents**

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### **ABSTRACT**

Mental health is an integral and essential component of health. The WHO constitution states: "Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity." Today, it is recognized that good mental health is not just the absence of mental illness. Nor is it absolute – some people are more mentally healthy than others, whether you are mentally ill or not. In order to determine the mental health of adolescent school going children, government and private schools from the domain of Jaipur city were taken. A sample of total of 300 adolescents consisting of 150 government school adolescents and 150 private school adolescents were taken. The test used was Mental Health Battery (MHI) (Verma, J. and Srivastava, A.K. 1996). It was found that in all the dimensions of mental health, no significant difference was found for government and private school children. It is a matter of concern for all the parents, teachers and society as a whole that both the groups are poor on a mental health scale.

**Keywords:** *Audit, Mental Health, Adolescents*

**M**ental health means a sense of overall well being of a person. A mentally healthy person can strike a balance between the various facets of his/her life, can cope with stressful situations and is in a state of emotional well being. For this reason, mental health is crucial to a person's well being and health in general. The World Health Organization defines mental health as "a state of well-being in which the individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community". Mental health is an integral and essential component of health. The WHO constitution states: "Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity." An important corollary of this definition is that mental health is described as more than the absence of mental disorders or disabilities. Today, we recognize that good mental health is not just the absence of mental illness. Nor is it absolute – some people are more mentally healthy than others, whether you are mentally ill or not. These

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realizations are prompting a new kind of focus on mental health that identifies components of mental wellness and mental fitness and explores ways to encourage them. A group of psychologists, led by Martin E.P. Seligman, a psychology professor at the University of Pennsylvania and past-president of the American Psychological Association, wants to shift the emphasis in their discipline from a disease model to a health model, called “positive psychology.” Instead of looking at how society’s negative aspects affect us, their aim is to investigate the positive qualities that help people flourish. These include courage, optimism, hope, honesty, interpersonal skills, work ethic and perseverance. Taking the pulse of mental health brings different results for everyone; it’s unique to the individual. Providing behavioral health services in schools has been looked at as having both positive and negative sides to it (Evansa, 1999). On one hand it is argued that behavioral interventions yield positive outcomes if enmeshed with the school environment as compared to a clinical setting or a hospital. On the other hand, the concern for treating or providing a child with intervention without the parent’s consent or supervision is a cause for concern. The study also states behavioral health care is also forced upon students in some cases coming to the conclusion that utilization, consent and effectiveness are the three areas which need more attention and focus than what has been given till now.

By reflecting on these characteristics, the strengths can be recognised and also the areas of mental fitness can be identified. In the health care and public health arena, more emphasis and resources have been devoted to screening, diagnosis, and treatment of mental illness than mental health. Very little has been done to protect the mental health of those free of mental illness.

### **METHODOLOGY**

#### ***Objective:***

To explore mental health of adolescents in government and private school children.

#### ***Hypothesis:***

There would be a significant difference between government and private school children on mental health.

#### ***Variable of the study:***

Mental health, private and government schools.

#### ***Instrument used:***

Mental Health Inventory (MHI) (Verma, J. and Srivastava, A.K. 1996)

#### **Description of the dimensions of Mental Health Inventory**

► **Positive self evaluation (PSE).** It includes self confidence, self acceptance, self identity, feeling of worth-whileness, realization of one’s potentialities, etc.

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- ▶ **Perception of reality (PR).** It is related to perception free from need distortion, absence of excessive fantasy and a broad outlook on the world.
- ▶ **Integration of personality (IP).** It indicates balance of psychic forces in the individual and indicates the ability to understand and to share other people’s emotions, the ability to concentrate at work and interest in several activities.
- ▶ **Autonomy (AUTNY).** It includes stable set of internal standards for one’s action, dependence for own development upon potentialities rather than dependence on other people.
- ▶ **Group oriented attitudes (GOA).** It is associated with the ability to get along with others, work with others and to find recreation.
- ▶ **Environmental Competence (EM).** It includes efficiency in meeting situational requirements, the ability to work and play, the ability to take responsibilities and capacity for adjustment.

### ▶ **Instructions**

The following statements were carefully read to the children and they were asked to write their answers in the given Answer key-1. “There are four alternatives for answering each item; if your answer is “always” then write 4, if your answer is “often” then write 3, if your answer is “sometimes” then write 2 and if your answer is “never” then write 1. Please indicate your behavior by giving scores in the attached Answer key-1 at the right place that is most appropriate for you. There are no right or wrong responses and your responses would be kept completely confidential”.

### ▶ **Scoring**

In the present scale, 4 alternative responses have been given to each statement i.e Always, often, sometimes and never. 4 scores to ‘always’, 3 scores to ‘often’, 2 scores to ‘sometimes’ and 1 score to ‘never’ marked responses as to be assigned for true keyed (positive) statements whereas 1,2,3 and 4 scores for ‘always’, ‘often’, ‘rarely’, and ‘never’ respectively in case of false keyed (negative) statements. The starred items are negative while remaining positive.

### *Statistics used:*

Mean, SD and t-ratio were calculated.

## RESULTS AND DISCUSSION

*Means , SDs and ‘t’-ratios on different dimensions of mental Health of adolescents of private schools (N=150) and government schools (N=150)*

Variable	Group	Mean	Sds	T-Value	Sig
1: Positive self evaluation (PSE)	Private Schools	29.30	4.619	-.505	.614
	Government Schools	29.57	4.755		
2: Perception of reality (PR).	Private Schools	21.59	2.954	-.922	.357
	Government Schools	21.91	2.929		

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Variable	Group	Mean	Sds	T-Value	Sig
3: Integration of personality (IP).	Private Schools	29.93	3.456	-2.486	.013
	Government Schools	30.91	3.324		
4: Autonomy (AUTNY).	Private Schools	15.45	2.412	.565	.573
	Government Schools	15.27	2.882		
5: Group oriented attitudes (GOA).	Private Schools	28.31	3.623	1.486	.138
	Government Schools	27.69	3.527		
6: Environmental Competence (EM).	Private Schools	26.36	3.428	-.256	.798
	Government Schools	26.47	4.212		
Tot Mental Health	Private Schools	150.94	11.438	-.651	.516
	Government Schools	151.83	12.140		

The above table depicts the Means, Sds, t-ratios and significance level of different dimensions of mental health of adolescent school going children in government (N=150) and private (N=150) schools. It was found that the various dimensions of mental health were not significantly different in the Private and government school groups. All the dimensions of Mental Health, viz., Positive Self Evaluation (t= -.505), Perception of Reality (t = -.922), Integration of Personality (t= -2.486), Autonomy (t = .565), Group oriented attitudes (t= 1.486), Environmental Competence (t= -.256) and total Mental Health ( t= -.651) had no significance difference between the two groups.

### **DISCUSSION**

On administering the Mental Health Inventory on government and private school adolescents, it was found that that no significant difference was present between the mental health of adolescents of private schools and mental health of adolescents of government schools. The various dimensions of mental health i.e, Positive Self Evaluation, Perception of reality, Integration of Personality, Autonomy, Group Oriented attitudes, Environmental Competence along with the total score of mental health of both the groups showed no significant difference. Another aspect uncovered was, except for the dimension of Positive Self Evaluation, all other dimensions i.e, perception of reality, integration of personality, autonomy, group oriented attitudes, environmental competence along with the total score of all the dimensions, children of both private and the government schools scored 'poor' in all the dimensions.

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The absence of a significant difference between the mental health of government and private school children can be looked in a appositive light but on deeper probe the absence of good or even average scores in all the dimensions are a cause for concern and the reasons should be explored. Hence, the Hypothesis that “there would be a significant difference between government and private school children on mental health has been disproved.

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### ***Conflict of Interests***

The author declared no conflict of interests.

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