

Attitude towards School, Conflict, Violence and Mental Health Status among School Going Adolescents: A Gender Comparison

B. Surchandra Sharma^{1*}, Dr Arif Ali²

ABSTRACT

In Manipur violence is very common in different forms. Its impact is significant. During the time of conflict and violence, Adolescents are restless and actively involved in such psycho-social conflict, which leads to disruptive in mental health and education. The aim of the study was to assess the gender difference in attitude towards school, conflict, violent and mental health status among the school going adolescents. The present study was a survey on school going adolescents aged 13-17 years, from class VIII to XII in Imphal, Manipur, India. For the study two private schools and two hundred students, both boys & girls were selected using simple random sampling technique. Semi Structured Socio demographic data sheet, Attitude towards School scale, Attitude towards Conflict scale, Attitude towards Violence scale and Strength and Difficulties Questionnaire were administered to the students. The result shows that there was no gender difference on attitude towards school and conflict. On attitude towards violence significant difference was found between boys and girls ($t=2.84, p \leq 0.05$). In mental health status, 9% of boys and 11% girls were having emotional symptoms; 33% of boys and 28% girls were having Conduct Problem, 16% of boys and 5 % of girl students were having hyperactivity. Further, attitude towards schools was positively correlated with emotional ($r=.096$) and it has negative correlation with conduct problem ($r=-.52$) and hyperactivity ($r=-.128$). Attitude towards conflict has positive correlation with emotional symptoms ($r=.164$), conduct problem ($r=.008$), hyperactivity ($r=.107$) and Attitude towards violence has positive correlation with emotional symptoms ($r=.014$), conduct problem ($r=.046$), hyperactive ($r=.133$). School-based mental health program are needed for adolescents who are at high risk for exposure to community violence is required.

Keywords: *Adolescents, Attitude, Schools, Conflict, Violence, Mental Health,*

¹ M.phil, Clinical Psychologist, Department of Clinical Psychology, LGB Regional Institute of Mental Health, Tezpur Assam, India

² P.hD, Assistant Professor, Department of Psychiatric Social Work, LGB Regional Institute of Mental Health, Tezpur Assam, India

*Responding Author

Attitude towards School, Conflict, Violence and Mental Health Status among School Going Adolescents: A Gender Comparison

Internal conflicts in India's Northeast are overwhelmingly conceptualized within the framework of unique ethnic identities that are threatened by, and in confrontation with, the nationalist state, which is often seen as a representative of an inchoate cultural 'mainstream'. While some of the conflicts in the region certainly fit into this general framework of interpretation, few, if any, are completely explained by it; others, moreover, are entirely unrelated to this reductionist scheme of 'freedom struggles' by ethnic minorities against the 'homogenizing state (Ajai Sahni ,2002). Further in a study titled as "Impact of Conflict on Children in Assam and Manipur States of India" reports that Bandhs (protest shut-downs) and blockades due to civil conflict are frequent phenomena in Manipur which have an adverse impact on children. Such a situation creates problems in the public service delivery system of food, water, medical and supplies of other essential commodities. As a result of curfews and boycotts, 80% of the schools with more than 300,000 school students across the state were severely affected (Narzary Kumar Raju, 2014).

As it has been stated in the literature that adolescence is a transitional stage that involves biological, cognitive, social and psychological change that occurs between childhood and adulthood. The transition into adolescence begins the move towards independence from parents and the need to establish one's own values, personal and sexual identity and skills and competencies needed to compete in adult society. Adapting to all of these changes in relationships, social contexts, status, and performance criteria can generate great stress, feeling of rejection, and anger at perceived or real failure. On the other hand some of the adolescents live more serious problem than other. One of these serious problems is violence.

As stated by Harris (2009) that youth violence is a harmful behavior that may start early childhood and continue in young adulthood. It has been reported that positive attitude towards violence involve perceiving violence as a useful way to deal with frustrations and to solve problems and willingness to use it under certain circumstance. On the contrary an individual perceiving violence as a counterproductive and destructive, something to be avoided has a negative attitude towards violence (Harris, 2009).

Community violence is recognized as a major public health problem and it is the identified stressor used to predict maladaptive outcomes (WHO, World Report on Violence and Health, 2002). The World Health Organization (WHO) reported that being a victim of or witness to community violence affects young people in a very negative manner and can cause behavioral problems. The impact of violence on a child seems to depend on how normative, accepted, and endorsed that violence is at different levels of the child's social ecology as well as the kinds of attributions the child makes about the violence. Young people who do not assimilate and who remain connected with their own culture, traditions, and customs and maintain a sense of belonging to their ethnic group may have important psychosocial advantages.

Attitude towards School, Conflict, Violence and Mental Health Status among School Going Adolescents: A Gender Comparison

Furthermore, the degree to which adolescents are exposed to violence in their homes, neighborhoods, and schools and the extent to which they have been victims of violence are associated with their own use of violence (Durant, Pendergrast, & Cadenhead, 1994). Several studies have shown that post-traumatic stress is a risk factor for the development of depression and substance use (Bolton et al., 2000; Giaconia & Reinherz 1995; Kilpatrick et al., 2000). Moreover, behavior problems are associated with drug use initiation and the association between substance use, violence and poor school performance has been found by many researchers (Bryant et al., 2000; Epstein et al., 2000&Mulvey et al., 2006). The present attempts to see the attitude towards, school, violence and conflict and its relationship with mental health on school going adolescents in Manipur. As there is continuing violence in Manipur which has led to fear, anxiety, and terror for many people, human rights violations and greatly impacting their day to day life of many people especially the children.

Aim:

1. To see the gender difference in attitude towards school conflict, violence and mental health status among a school going adolescents.

Objectives:

1. To assess the gender difference in attitude towards school among a school going adolescents.
2. To assess the gender difference in attitude towards conflict, among a school going adolescents.
3. To assess the gender difference in attitude towards violence among a school going adolescents.
4. To assess the gender difference in mental health status among a school going adolescents.
5. To see the relationship between attitude towards school, conflict, violence and mental health status among a school going adolescents.

METHODOLOGY

This present study was a school based survey, carried out on school going adolescents aged 13-17 years, studying in classes VIII to XII in Imphal, Manipur, India. Two private schools were selected purposively. Permission was taken from the school authority to conduct the study. Once the permission was taken from the authority, two hundred students, both boys & girls studying in class VIII to XII and age range of 13-17 were selected by using simple random sampling technique. Informed Consent was taken from the students, they were explained about the nature of the study and assurance was given to maintain confidentiality. Semi Structured Socio demographic data sheet, Attitude towards school scale, Attitude towards Conflict scale, Attitude towards Violence scale and Strength and Difficulties Questionnaire were administered to the

Attitude towards School, Conflict, Violence and Mental Health Status among School Going Adolescents: A Gender Comparison

students. The entire tool was translated in Manipuri language and was validated by the field experts.

Tools for Data Collection:

1. **Semi structured socio demographic data sheet:** Semi-structured proforma that contained details of demographical information. Participants were asked to report their gender, age, the educational levels of their mother and father, their parents' occupations, the number of siblings in their family, individual monthly expenses, and their perceived accuracy levels in their mother tongue and in other spoken languages.
2. **Attitude towards school -Denver Youth Survey:** (Institute of Behavioral Science, 1990): it is 5 items scale which measures attitudes toward school (e.g., homework, teachers' opinions). Internal consistency is 0.38. Items 1 and 5 should be reverse coded. Point values are summed for each respondent and divided by the number of items. The intended range of scores is 1-4, with a higher score indicating a more positive attitude toward education.
3. **Attitude towards conflict: (Lam, 1989):** It is an 8 items scale which measures attitudes toward the use of violence in response to disagreements or conflicts. Can be administered in a classroom setting. Internal consistency is 0.66 to 0.72. A maximum obtainable score of 32 indicates a strong favorable attitude toward using violence to resolve disagreements or conflicts. A minimum score of 8 indicates a strong negative attitude toward using violence.
4. **Attitude towards violence's:** (Houston Community Demonstration Project, 1993 Adapted by Bosworth & Espelage, 1995): Measures attitudes toward violence and its acceptability, particularly in relation to fighting. Internal consistency is 0.67.
5. **Strengths and Difficulties Questionnaire [SDQ]:**(Goodman, 1997; Mullick & Goodman, 2001).: SDQ is a brief behavioral screening standardized questionnaire for measuring emotional and behavioral disorders in children and adolescents ranging from 11 to 17 years of age (Goodman, 1997). The strength and difficulties questionnaire (SDQ) is a structured questionnaire that is used for screening the child and adolescent psychiatric problems and contains 25 questions that consist 5 subscales including emotional, hyperactivity, relationship, and conduct problems and pro-social behaviors with 5 items in each. The sum of the first four subscales consist the total difficulty score (13). The questionnaire has 3 forms: parent-report, teacher-report and self-report. Self-reported questionnaire will be used for the present study.

Statistical plan:

An appropriate statistical measure was used for data analysis with the help of SPSS. Mean, SD, percentage, Pearson correlation test were used.

Ethical issues:

The respondents were assured of confidentiality; informed consent was taken from the respondents. The participants were clearly explained the purpose of the study and subjects were selected on voluntary basis.

Attitude towards School, Conflict, Violence and Mental Health Status among School Going Adolescents: A Gender Comparison

RESULTS

Table 1: Age Of The Subjects

N=200	Mean± S.D
Age (13 -17years)	15.04±1.59

The above table (1) shows the mean age of the subjects was 15.04±1.59 years in the present study.

Table 2: Socio Demographic Characteristics Of The Subjects:

N=200		Boys (n=100)	Girls (n=100)	df	χ^2	p
Level of Education	Class 8	41	32	4	.572	2.914
	Class 9	15	15			
	Class 10	14	22			
	Class 11	18	19			
	Class 12	12	12			
Religion	Hindu	83	81	3	.401	2.941
	Muslim	1	5			
	Christian	7	7			
	Others	9	7			
Family Type	Joint	64	58	2	.680	.771
	Nuclear	27	31			
	Extended	9	11			
Parents Type	Together	96	94	2	.440	1.640
	Separated	2	5			
	Divorce	2	1			

The above table (2) shows gender comparisons in the socio demographic characteristics of the subjects majority of the students in both groups were from class 8 standard, majority were from Hindu, were from joint family back grounds and majority of the students were staying together with their parents. When chi square was computed, no significant difference is found between boys & girls in terms of education, religion, parent's type of family and parents type.

Table 3: Symptoms response categories on all SDQ scales among boys and girls

Variables		normal	Borderline	Abnormal	df	χ^2	P
Emotional symptom	Boys	83	8	9	2	.026	9.24
	Girls	67	22	11			
Conduct problem	Boys	58	9	33	2	.493	1.41
	Girls	51	21	28			
Hyperactive	Boys	68	16	16	2	.003	11.84

Attitude towards School, Conflict, Violence and Mental Health Status among School Going Adolescents: A Gender Comparison

Variables		normal	Borderline	Abnormal	df	χ^2	P
	Girls	88	7	5			
Peer problem	Boys	92	7	1	2	.343	2.13
	Girls	91	5	4			
Pro-social behavior	Boys	85	12	3	2	.608	.995
	Girls	88	8	4			

The above table (3) shows the gender comparisons in the domain of Strength and Difficulty Questionnaire. In Emotional symptoms (67%) of were Girls found in normal range (22%) were in borderline and 11% were found abnormal, where as in boys 83% were found normal, (8%) were found in borderline and 9% were found in abnormal range. When chi square was computed there was no significant difference was found ($\chi^2=.026, p=9.24$).

In Conduct problem (58%) of boys students were found normal and (9%) were found in borderline and (33%) were found in abnormal, where as in Girls (51%) were found normal, (21%) were found in borderline and (28%) were found in abnormal range. When chi square was computed there was no significant difference was found ($\chi^2=.493, p=1.41$).

In Hyperactivity 68% of boys students were found normal, (16%) were found in borderline and (16%) were found in abnormal, where as in students Girls (88%) were found in normal, 7% were found in borderline and (5%) were found in abnormal range. When chi square was computed there was no significant difference was found ($\chi^2=.003, p=11.84$).

In Peer problem (92%) of the boys students were found normal (7%) were found slightly borderline and (1%) were found abnormal, where as in (91%) of the Girls students were found normal, (5%) were found borderline and (4%) were found in abnormal. When chi square was computed there was no significant difference in both the group ($\chi^2=.343, p=2.13$).

In Pro-social behavior 85 % of the boys students were found normal, (12%) were found borderline and (3%) were found abnormal range, where as in Girls (88 %) of the Girls students were found normal, (8%) were found borderline and (4%) were found abnormal. When chi square was computed there was no significant difference in both the group ($\chi^2=.608, p=.995$).

Attitude towards School, Conflict, Violence and Mental Health Status among School Going Adolescents: A Gender Comparison

Table4: Mean scale scores of Attitude towards School, Attitude towards Conflict, and Attitude towards Violence among Boys and Girls.

Variables	Boys	Girls	df	t-value
	Mean \pm S .D	Mean \pm S.D		
Attitude towards school	15.64 \pm 3.04	16.40 \pm 2.68	198	1.87
Attitude towards conflict	14.27 \pm 3.60	14.51 \pm 3.48	198	.47
Attitude towards violence	16.46	14.87	198	2.84*

* $p \leq 0.05$

Table (4) shows the gender difference of attitude towards school, Independent t-test is applied to find out the gender difference, no significant difference was found in both the group in attitude towards school, however the mean score shows that girls are having more positive attitude towards school than the boys student. In attitude towards conflict significant difference was not found between boys and girls. While in attitude towards violence significant difference was found between boys and girls student ($t=2.84$, $p \leq 0.05$). However, the mean score suggest that boys students are having more positive attitude towards violence as compare to girls students.

Table 5: Mean scale scores of the SDQ self report, among boys and girls

Variable	N=200			
	Boys	Girls		
	Mean \pm S.D	Mean \pm S.D	df	t-value
Emotional symptom	4.89 \pm 1.58	5.85 \pm 1.96	198	.3804**
Conduct problem	2.95 \pm 1.58	2.81 \pm 1.11	198	.722
Hyperactive	4.64 \pm 1.63	3.81 \pm 1.63	198	3.71**
peer problem	5.02 \pm 1.22	5.34 \pm 1.40	198	1.71

** $p \leq 0.01$

Table (5) shows the gender difference between boys and Girls adolescents on the domain of strength and difficulties questionnaire, independent t-test was applied to find out the significant difference between two groups. Significant difference was found in domain of emotional symptoms and hyperactivity. Mean score was high in Girls in emotion symptoms, while mean score was high in hyperactivity in Boys students. In domain of conduct problem and peer problem significant difference was not found.

Attitude towards School, Conflict, Violence and Mental Health Status among School Going Adolescents: A Gender Comparison

Table 6: Pearson correlation coefficient results based on Domain of Strength and Difficulties Questionnaire and Attitude towards School, Attitude towards Conflict and Attitude towards Violence

Variables	Emotional symptoms	Conduct problems	Hyperactivity	Peer problem	Pro- social behavior
Attitude towards school	.096	-.052	-.128	-.032	.062
Attitude towards conflict	.164	.008	.107	.065	-.026
Attitude towards violence	.014	.046	.133	.134	-.161

* $p \leq 0.05$, ** $p \leq 0.01$

The above table shows that attitude towards school is positive correlation with emotional symptoms ($r=.096$) and pro-social behavior ($r=.062$) and it has negative correlation with conduct problems ($r=-.52$) and hyperactivity ($r=-.128$) and peer problem ($r=-.032$). Attitude towards conflict has positive correlation with emotional symptom ($r=.164$), conduct problem ($r=.008$), hyperactivity ($r=.107$) peer problem ($r=0.65$) and pro-social behavior has negative correlation ($r=-.026$) and attitude towards violence has a positive correlation with emotional symptoms ($r=.014$), conduct problems ($r=.046$), hyperactive ($r=.134$) and negative correlation with pro social behavior ($r=-.161$).

DISCUSSION

In the present study no gender difference was found in attitude towards school, but the mean score suggest that girls were having more positive attitude towards school as compared to boys. In a study it was found that girls seems to have more positive attitudes, while boys are less motivated and have more negative attitude towards school, results show that girls do not require more time to study, engage less in cases of misconduct and behaviour, have less absenteeism, and also have more expectations about future and are more enthusiastic about further studies (M. Van Houtte, 2004).

In the present study no gender difference was found in the attitude towards conflict, but significant difference was found between boy and girl student ($t=2.84$, $p \leq 0.05$) in attitude towards violence. Mean score suggest that boy students were having positive attitude towards violence. Consistent with previous research (Vernberg, Jacobs, & Hershberger, 1999; Balk Ōs et al.; Harris, 2009) findings, this study demonstrate that attitudes toward violence scores differentiate according to gender. Boys report higher levels of attitudes toward violence

Attitude towards School, Conflict, Violence and Mental Health Status among School Going Adolescents: A Gender Comparison

than girls. At the same time this is consistent with findings that boys as a group are more aggressive and violent than girls (Harris, 2009). Yonas et al. (2005) stated that many of the reasons identified for violence are similar among boys and girls, select gender differences do exist. Digdem M. Siyez (2010) also reported that there was gender difference in attitude towards violence among school going adolescents, girls scores range from 11-41 with a mean score of 18.67 (SD=6.20) also boys scores range from 11 to 44 with mean score of 22.43 (SD=7.29). A t-test was found that there were significant difference between girls and boys ($t=6.65$, $p \leq .0010$) boys were more accepting attitude towards violence than girls.

In the present study the prevalence of conduct problem, hyperactive and peer problem was high in boy students. Girl were having high emotional symptoms. Significant gender difference was found in the domain of emotional symptoms and hyperactivity. Isaac Ann, Ahmer Syed, Iqbal Saman, (2008) reported that more girls were classified as having an 'abnormal' score (4.7% vs 4.1%, $p = 0.04$) on emotional problems subscale while more boys were classified as having an 'abnormal' score on conduct problems (5.5% vs 3.6%), hyperactivity problems (4.5% vs 2.9%) and peer problems subscales. Van Roy (2006) explored strength and difficulties in large Norwegian population Aged 10-19 years, using self report version strength and difficulties in large version of SDQ girls mostly reported emotional problems and boys showed conduct and peer problems. In a recent Indian another study done by Sharma B. Surchandra and Ali A. (2015) reported that there was significant gender difference reported by the two groups in the domain of emotional symptoms ($t=2.413$, $p \leq 0.05$). The present study shows that attitude towards school has positive correlation with emotional symptoms ($r=.096$) and pro-social behavior ($r=.062$) and it has negative correlation with conduct problems ($r=-.052$) and hyperactivity ($r=-.128$) and peer problem ($r=-.032$). According to Hirsch (1969) adolescents with strong attachment and commitment to school are less likely to engage in deviant activities than those with weak bonds. Various longitudinal studies carried out with youths from different cultures have supported, showing that these two factors (attachment and commitment) are negatively associated with antisocial behavior (Leblanc, 1994; Torstensson, 1990). Further studies have shown that quality relationships with teachers buffers against development of misbehaviors at school, while negative teacher-student interactions adversely affect students' psychosocial and behavioural adjustment in schools (Blankemeyer, Flannery, & Vazsonyi, 2002; Reinke & Herman, 2002).

Osofsk (1999) reported that school children who live in violent community, they can be more prone to be frightened, anxious, depressed, and aggressive. They may have problem in attention and concentration.

In the present study attitude towards conflict has positive correlation with emotional symptom ($r=.164$), conduct problem ($r=.008$), hyperactivity (.107) and attitude towards violence has

Attitude towards School, Conflict, Violence and Mental Health Status among School Going Adolescents: A Gender Comparison

positive correlation with emotional symptoms ($r=.014$), conduct problems [$r=.046$], hyperactive [$r=.133$]. Chronic exposure to community violence is believed to have a negative impact on various aspects of youth's development, adaptive functioning and a wide range of maladaptive outcomes including internalizing symptoms, anxiety, post-traumatic stress symptoms, depression, substance abuse academic failure, and school disengagement and disrupt cognitive development (Attar & Guerra, 1994; Fitzpatrick & Boldizar, 1993; Jenkins & Bell, 1994; Martinez & Richters, 1993; Gibbs, 1984; Lorion et al., 1999; Myers et al., 1992; Osofsky et al., 1993; Singer et al., 1995; Freeman et al., 1993; Jenkins, 1993; Bowen & Bowen, 1999; Overstreet & Braun, 1999; Schwab-Stone et al., 1995; Schwartz & Gorman, 2003; Horn & Trickett, 1998).

There are certain limitation in the present study .The findings of the present study cannot be generalized to the entire population; it is specific to school adolescence, Sample size was small, All the scale were self reporting ,Family variable like e.g. family home environments ,family functioning & parenting style etc were not included. A major drawback of the study is the use of screening tools as a measure to determine occurrence of mental health problems as opposed to a diagnostic interview.

CONCLUSION

In the study no gender difference was found in attitude towards school, and attitude towards conflict. However girl were having more positive attitude towards school, while boy were having more positive attitude towards violence as compared to girls. The findings indicate that the prevalence of emotional and behavioral problems is present in school going adolescent population. In every country and culture children and adolescents are suffering with mental health problems. There is need to develop psycho social care programmes for adolescent to promote of positive social, physical, psychological and emotional wellbeing appropriate to their cultural context. School based mental health programme, psycho social treatment and preventive interventions are needed for adolescents who are at high risk for exposure in any form of violence.

Acknowledgments

The author appreciates all those who participated in the study and helped to facilitate the research process.

Conflict of Interests

The author declared no conflict of interests.

Attitude towards School, Conflict, Violence and Mental Health Status among School Going Adolescents: A Gender Comparison

REFERENCE

- Ajai S, K.P.S. Gill. "Survey of Conflicts & Resolution in India's Northeast," Faultlines Writing on conflict and resolution, The Institute for Conflict Management, New Delhi, 2002;12:p.109.
- Attar BK, Guerra NG. The effects of cumulative violence exposure on children living in urban neighborhoods. Paper presented at the meeting of the American Psychological Society Convention, Washington, D.C.:1994
- Bolton D, O'Ryan D, Udwin O, Boyle S, Yule W. The long-term psychological effects of a disaster experienced in adolescence: II: General psychopathology. *Journal of Child Psychology and Psychiatry, and Allied Disciplines* 2000;41:513–23.
- Bosworth & Espelge(1995) Attitude towards violence's Houston Community Demonstration Project 1993.
- Bowen NK, Bowen GL. Effects of crime and violence in neighborhoods and schools on the school behavior and performance of adolescents. *Journal of Adolescent Research* 1999; 14: 319–2.
- Bryant A, Schulenberg J, Bachman J, O'Malley P, Johnston L. Understanding the links among school misbehavior, academic achievement, and cigarette use: A national panel study of adolescents. *Prevention Science* 2000;1:71–87.
- Centers for Disease Control and Prevention, (2008). Understanding school violence.
- Denver (1990) attitude towards school, youth survey Institute of Behavioral Science. Youth Interview Schedule: Denver Youth Survey. Boulder, CO: University of Colorado, 1990. (Unpublished)
- Digdem M.Siyez, Alim Kaya(2010) the influence of some psychological problems and socio-demographic variables upon attitude towards violence in adolescents. *Procedia Social and Behavioral Sciences* 5 (2010) 304–08.
- DuRant R, Cadenhead C, Pendergrast R, Slavens G, Linder C. Factors associated with the use of violence among Black adolescents. *American Journal of Public Health* 1994;84:612–17.
- Epstein J, Botvin G, Diaz T, Williams C, Griffin K. Aggression, victimization and problem behavior among inner city minority adolescents. *Journal of Child & Adolescent Substance Abuse* 2000;9:51–66.
- Fitzpatrick KM, Boldizar JP. The prevalence of depression among low-income African American youth. *Journal of Consulting and Clinical Psychology* 1993;61:528–31.
- FreemanL, Mokro H, Poznanski E (1993). Violent events reported by normal urban school-aged children: Characteristics and. doi:10.1097
- Giaconia R, Reinherz H. Traumas and posttraumatic stress disorder in a community population of older adolescents. *Journal of the American Academy of Child and Adolescent Psychiatry* 1995;34:1369.
- Gibbs JT. Black adolescents and youth: An endangered species. *The American Journal of Orthopsychiatry*, 1984;54:6–21.

**Attitude towards School, Conflict, Violence and Mental Health Status among School Going
Adolescents: A Gender Comparison**

- Goodman R. The Strengths and Difficulties Questionnaire: a research note. *J Child Psychol Psychiatry* 1997; 38: 581-86.
- Harris, J.O (2009). Relationship of factors pertaining to youth attitudes toward school, self-esteem, and violence. Unpublished Doctoral dissertation, Tennessee State University, Tennessee.
- Hirschi, T. (1969). Causes of delinquency. Transaction publisher 2002 edition 1969 social science page 47 of campus Berkeley: University of California Press.
- Horn JL, Trickett PK. Community violence and child development: A review of research. In P. Trickett & C. Schellenbach (Eds.), *Violence against children in the family and the community* 1998;pp. 103–13
- Isaac A, Ahmer S, Iqbal S. Self-Reported Strengths And Difficulties In Schoolchildren Of Indian Origin In UAE. *JPPS* 2008; 5(1): 8-12.
- Jenkins, E. (1993). Post-traumatic stress disorder symptoms of African-American youth exposed to violence. Paper presented at the meeting of the American Association of Behavior Therapy, Atlanta, GA.
- Kilpatrick DG, Acierno R, Saunders B, Resnick HS, Best CL, Schnurr PP.
- Lam JA. School mediation program evaluation kit. Amherst, MA: University of Massachusetts, Student Affairs Research and Evaluation Office, 1989. (Unpublished)
- Leblanc M. (1994). Family, school, delinquency and criminality, the predictive power of an elaborated social control theory for males. *Criminal Behaviour and Mental Health*, 4:101-17.
- Lorion RL, Brodsky A, Cooley-Quille MR. (1999). Exposure to urban violence: A framework for conceptualizing risky settings. In D. E. Biegel, & A. Blum (Eds.), *Innovations in practice and service delivery across the lifespan* (pp. 124–143).
- M. Van Houtte. Why boys achieve less at school than girls: the difference between boys' and girls' academic culture. *Educational Studies* 2004; 30, 2: 159-73.
- Martinez P, Richters JE. The NIMH community violence project: II. Children's distress symptoms associated with violence exposure. *Psychiatry: Interpersonal and Biological Processes* 1993;56:22–35.
- Mulvey E, Odgers C, Skeem J, Gardner W, Schubert C, Lidz C. Substance use and community violence: A test of the relation at the daily level. *Journal of Consulting and Clinical Psychology* 2006;74:743–75.
- Myers H F, Taylor S, Alvy KT, Arrington A, Richardson MA. Parental and family predictors of behavior problems in inner-city Black children. *American Journal of Community Psychology* 1992;20: 557–7576.
- Narzary Kumar Raju. (2014). Impact of Conflict on Children in Assam and Manipur States of India NERSWN: The Northeast Research & Social Work Networking, Kokrajhar
- Osofsky JD, Werers S, Hann DM, Fick AC. Chronic community violence: What is happening to our children? *Psychiatry* 1993;56: 36–45.

Attitude towards School, Conflict, Violence and Mental Health Status among School Going Adolescents: A Gender Comparison

- Overstreet S, Braun S. A preliminary examination of the relationship between exposure to community violence and academic functioning. *School Psychology Quarterly* 1999;14: 380–96.
- R. Goodman,. The Strengths and Difficulties Questionnaire: A research note, *Journal of Child Psychology Psychiatry, and Allied Disciplines* 1997;38:pp. 581–86.
- Risk factors for adolescent substance abuse and dependence: Data from a national sample. *Journal of Consulting and Clinical Psychology* 2000; 68:19–30.
- Schwab-Stone ME, Ayers T S, KasproW W, Voyce C, Barone C, Shriver T., et al. A study of violence exposure in an urban community. *Journal of the American Academy of Child and Adolescent Psychiatry* 1995;34:1343–52.
- Schwartz D, Gorman A. Community violence exposure and children's academic functioning. *Journal of Educational Psychology* 2003;95:163–73.
- Scott.,&Tezelepis,(1993)African adolescents male living in violent community.p-231
- Sharma BS, Ali A. Spiritual intelligence, self esteem and mental status among the school going adolescents: *Indian Journal of positive psychology* 2015;6(3):233-37.
- Singer M, Anglin T, Song L, Lunghofer L. Adolescents' exposure to violence and associated symptoms of psychological trauma. *Journal of the American Medical Association* 1995;273: 477–82.
- Torstensson M. Female delinquents in a birth cohort: Test of some aspects of control theory. *Journal of Quantitative Criminology*1990; 6: 101-15.
- Trickett, C Schellenbach (Eds.)Violence against children in the family and the community (pp. 103–38). Washington, DC: American Psychological Association.
- Tsering D, Pal R, Dasgupta, A. Substance use among adolescent high school students in India: A survey of knowledge, attitude, and opinion.*Journal of Pharmacy and Bioallied Sciences* 2010; 2(2):137–40.
- Van Roy B, Groholt, Heyerdahl S, Clench-Aas J. Self reported strength and difficulties in a large Norwegian population 10-19 years; age and gender specific results of the extended SDQ-Questionnaire, *European child and Adolescents Psychiatry* 2006;15:189-98.
- World Health Organization. (2002). *World Report on Violence and Health*. Brussels, Belgium: WHO.
- Yonas MA, O'Campo P, Burke JG, Peak G, Gielen, AC. Urban youth violence: Do definitions and reasons for violence vary by gender? *Journal of Urban Health : Bulletin of the New York Academy of Medicine* 2005;82(4), 543–51.

How to cite this article: Sharma S, Ali A (2016), Attitude towards School, Conflict, Violence and Mental Health Status among School Going Adolescents: A Gender Comparison, *International Journal of Indian Psychology*, Volume 4, Issue 1, No. 80, ISSN:2348-5396 (e), ISSN:2349-3429 (p), DIP:18.01.101/20160401, ISBN:978-1-365-57867-0