

A comparative study on psychological distress between rural and urban youth of Assam

Samprity Bhuyan^{1*}, Dr. Sonia P. Deuri²

ABSTRACT

The changing world has thrown new challenges to youth in India. This has resulted in the rise of mental health issues among younger population. A possible factor that can have moderating effect on mental health issues is the urbanicity with its better opportunities, facilities and services. The present study was designed to examine the effect of urbanicity on the mental health of youth in Assam. **Participants:** Rural (N=200) and urban (N=200) youth were recruited through purposive sampling from the Dhemaji district of Assam. Participants were compared on Kessler Psychological Distress Scale (K10) to assess anxiety and depression. **Results:** Psychological distress was found to be significantly higher among the rural and the tribal participants. No significant difference was found among male and female participants on psychological distress. When univariate ANOVA was used to see the effect of group, gender, and ethnicity on psychological distress of youth, no significant effect was found. **Conclusion:** This study shows that demographic variables like rurality, urbanicity and ethnicity, clubbed with socio-economic and social upheavals, have been significantly playing a role on the psychological distress of youth.

Keywords: *Psychological Distress and Youth*

Psychological distress has become a major cause of concern now-a-days, as it is one of the health problems of today's youth as well as the general population. Globally, many studies have reported high rates of mental health problems among people of age group 15-24 years which falls under period of youth (Kessler et al., 2004). Some of the common forms of psychological distress encountered by today's youth are depression, anxiety, and stress. This period is a time of multiple challenges in their academic life due to high expectation from the parents, struggle for establishing a career or professional life, maintaining social relationships and having to face financial crises. All these psychosocial issues can contribute to psychological distress, and thereby placing him or her at a greater risk for drug abuse, alcohol abuse, suicidal ideation, in absence of adequate coping mechanisms and lack of social support. Research studies found that during this period there is a heightened risk of suicide (Vijayakumar et al.). According to The National Crime Records Bureau Report (2009), youth in the age group 15-29 years accounted for the largest proportion of suicides.

¹Research scholar, Dept. of Psychology, Gauhati University, Assam, India

²HOD, Psychiatric Social Work, LGBRIMH, Tezpur, Assam, India

*Responding Author

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A comparative study on psychological distress between rural and urban youth of Assam

There may be many factors associated with the suicidal behavior. However, negative life events or severity of depression is found to be one of the factors (Srivastava & Kulshreshtha, 2000). Psychological distress is found to be associated with suicidal ideation among 15-24 years old population (Robert et al., 1998). Some studies also found that social networking sites such as twitter and face book can also cause psychological distress among youth (Agarwal & Singh, 2005).

Psychological distress has become a growing concern in the present day society, as it has negative impact on an individual's growth and development, academic achievements, career, social relationships (Bhatia & Bhatia, 2007). It also negatively affects an individual's life such as difficulty in studies, disturbed relationships, physical health problems, sleep disturbance, substance use (Nyer et al, 2013). If psychological distress among youth is unnoticed and left untreated then it may have more profound effect on an individual mental as well as physical health, thereby leading to some serious mental and physical illness. Some research has found that psychological distress is associated with suicidal ideation (Robert et al., 1998) among youth and thereby making suicide as one of the second leading cause of death among both the genders in the age group of 15-29 years (Patel, Ramasubdarahettige, 2012). The NMHS Assam (2017) report showed 'a risk of suicide in the last one month to be 0.6% (moderate risk) and 0.75% (high risk). Suicidal risk was higher among persons aged 18-29 years, in rural residents and males'.

Psychological distress may also be influenced by certain socio-demographic variables. Some researchers have revealed that psychological distress is associated with geographical area of living (Hakami, 2018), gender (Shaheen, Jahan, Shaheen, 2014) and ethnicity (Khan & Lone, 2017). But NMHS Assam report also shows evidence of respondents from the lower income group was observed to have higher occurrence of mental disorders. 'Depression has been experienced in 3% of the survey population (above 18 years) at some point in their lifetime with both genders equally affected and higher prevalence in urban non-metro areas' (NMHS, 2017). But with better opportunities, facilities and services in urban areas, urban youth may often be better off than rural youth who lead a life that is bereft of all the privileges their counterparts have in towns. So, it can be said that demographic factors can also play a role in experiencing psychological distress.

Thus, in the present scenario with growing prevalence of youth related psychological issues, it is important to study about the prevalence of psychological distress among youth, as mental wellbeing of youth has become a global concern. Few studies have been conducted to assess psychological distress among students in different states. But there is dearth of such studies on psychological distress among youth in Assam, especially in a remote district like Dhemaji, in the state of Assam. It is important to assess the psychological distress of the youth population in Dhemaji district so that they can be helped to cope up effectively with the rapid change and development and can live an enhanced quality life.

The current study aims to enquire the psychological distress of youth in urban and rural areas and examines the effect of certain socio-demographic factors on it.

The findings of the study would be useful to understand the psychological distress of the youth and socio-demographic factors associated with it and thereby take necessary steps like counseling or intervention programs, mental health awareness programs etc.

METHODOLOGY

Participants (males and females) between the age range of 15-24 years, were recruited from rural (N=200) and urban (N=200) areas of Dhemaji district of Assam through purposive

A comparative study on psychological distress between rural and urban youth of Assam

sampling method. All the participants gave informed consent for the present study. Kessler Psychological Distress Scale (K10; Kessler RC et al, 2003) was used to assess psychological distress among the participants. The study was approved by Department Research Committee (DRC) of Dept of Psychology, Gauhati University, Guwahati. Scores on Psychological Distress were compared between the groups through t-test. Univariate ANOVA was used to see the effect of group (rural vs urban), gender (male vs female) and ethnicity on Psychological Distress.

Tools for the study: Tools used for the present study are,

1. Socio-demographic data sheet: A socio-demographic data sheet was used to collect the social and demographic details of the participants.
2. Kessler Psychological Distress Scale (K10) to assess the psychological distress.
3. K10 is a well-validated and a reliable scale to assess psychological distress across cross cultural settings. It is easy to use and takes very less time to respond. The statements in the K10 can be easily understood by the participant, thereby reducing the chances of misinterpretation.

Procedure

The researcher directly met the subjects in their residents and explained the purpose, objectives and relevance of the study and solicited their wholehearted cooperation for the study. After receiving written consent from each participant, the socio-demographic data sheet and Psychological Distress Scale were handed over to them and requested to complete as per the direction printed on the scale. Even then the researcher gave oral instructions to the participants so that the responses would be better. After completion of both instruments, it was collected back and checked for omission. Then both the scales were scored and coded as per the scoring key and entered into a spread sheet for further statistical analysis.

RESULTS

Table 1 : Socio-demographic characteristics of Rural and Urban Youth

Variables		Rural	Urban	(X ² /FE)	P-value
Age	18-20	101(50.5%)	98 (49%)	.09(df=1)	.76
	21-24	99 (49.5%)	102 (51%)		
Language	Assamese	97 (48.5%)	94 (47%)	.34 (df=4)	.99
	Nepali	16 (8%)	16 (8%)		
	Bengali	21(10.5%)	21(10.5%)		
	Mishing	52 (26%)	52 (26%)		
	Others	14 (7%)	17 (8.5%)		
Ethnicity	Tribal	63(31.5%)	62(31%)	.01(df=1)	.91
	Non-tribal	137(68.5%)	138(69%)		
Educational status	Arts	136(68%)	102(51%)	15.4(df=2)	.001
	Science	33(16.5%)	65(32.5%)		
	commerce	31(15.5%)	33(16.5%)		
Marital status	Married	18(9%)	10(5%)	3.31	.18
	Unmarried	182(91%)	189(94.5%)		
	Divorced	0(0%)	1(.5%)		
Type of family	Nuclear	115(57.5%)	139(69.5%)	9.69	.02
	Joint	77(38.5%)	49(24.5%)		
	Extended	3(1.5%)	3(1.5%)		
	Blended	5(2.5%)	9(4.5%)		
Socio-economic	Lower	48(24%)	11(5.5%)	55.44(df=4)	.001
	Upper-lower	75(37.5%)	54(27%)		

A comparative study on psychological distress between rural and urban youth of Assam

Variables		Rural	Urban	(X ² /FE)	P-value
status	Lower middle	38(19%)	63(31.5%)		
	Upper-middle	34(17%)	37(18.5%)		
	Upper	5(2.5%)	35(17.5%)		

Table 1 represents the socio-demographic characteristics of rural and urban participants. In rural area 50.5 % of the participants fall in the age group of 18-20 and 49.5% in the age group of 21-24. And in urban area 49% of the participants fall in the age group of 18-20 and 51% in the age group of 21-24. Statistically the finding in the table is not significant ($\chi^2 = .76$) ($p > .001$).

It is seen that nearly half of the participants (48.5%) in rural and (47%) in urban speaks Assamese language in both rural and urban area. Other languages spoken by the participants were Nepali, Bengali, Mishing, in both rural and urban area.

In terms of ethnicity 31.5 % of the participants in the rural area belong to tribal ethnic background and 68.5 % of the participants are not. In urban 69% of the participants belong to non-tribal ethnic background, followed by 31 % belongs to tribal ethnic background. Table indicates that majority of the participants belongs to non-tribal ethnic background.

In terms of educational background of the respondents, the majority in the study belong to arts stream in both rural and urban settings. The rest of the respondents are from science and commerce background. Significant differences were found on the educational status of the rural and urban participants, $\chi^2(2, N=400) = 15.4, p < .001$

It is evident from the table that maximum percentage of the respondents was unmarried in both the settings while very few were married and divorced. When chi-square was performed no significant difference was found between the two group's. FE value 3.31 and p value .18

The number of the participants who lives in nuclear family is comparatively higher in both rural and urban area. Statistically significant differences were found in the type of family in both rural and urban area. When socio-economic status is compared it is seen that in rural area maximum number of participants belongs to upper-lower socio-economic status followed by lower, lower-middle and upper. Whereas in urban 31.5% of the respondent belongs to lower-middle followed by 27% in upper-lower, 18.5% in upper-middle, 17.5% in upper and only 5.5% in lower socio-economic status. Statistically significant differences were found on the socio-economic status of the participants.

Table 2: Comparison of rural and urban participants on Psychological Distress

Variable	Rural (Mean±SD) N=200	Urban (Mean±SD) N=200	t-test (df=398)	p-value	Confidence interval (95%)	
					Lower Limit	Upper Limit
Psychological Distress	21.15±5.25	18.64±4.38	5.19	.001	1.56	3.46

Table 2 shows the comparison of rural and urban youth in psychological distress. T test was computed to compare the means of psychological distress of rural and urban participants. An independent t-test indicated that scores on psychological distress were significantly higher

A comparative study on psychological distress between rural and urban youth of Assam

among rural (M=21.15, SD=5.25) as compared to the urban (M=18.64, SD=4.38), $t(398) = 5.19$, $N=400$, $p < 0.001$, 95% CI of mean differences 1.56 to 3.46. It shows that rural participants have more psychological distress as compared to urban participants.

Table 3: Comparison of male and female participants on Psychological Distress

Variable	Male (Mean±SD) N=174	Female (Mean±SD) N=226	t-test (df=398)	p-value	Confidence interval (95%)	
					Lower Limit	Upper Limit
Psychological Distress	19.37±5.16	20.29±4.82	-1.81	0.07	-1.89	0.07

The psychological distress of male and female participants was compared in table 3. On average the scores of psychological distress of male participants (M=19.37, SD=5.16) is similar to those of female participants (M=20.29, SD=4.82). The results of an independent t-test showed that there is no statistically significant difference on scores of psychological distress among male and female participants, $t(398) = -1.81$, $p > 0.05$.

Table 4: Comparison of tribal and non-tribal participants on Psychological Distress

Variable	Tribal (Mean±SD) N=125	Non-tribal (Mean±SD) N=275	t-test (df=398)	p-value	Confidence interval (95%)	
					Lower Limit	Upper Limit
Psychological Distress	20.77±4.87	19.49±4.99	2.39	0.02	0.22	2.33

An independent sample t test reported in table 4, shows a significant differences in psychological distress by tribal and non-tribal participants, $t(398) = 2.39$, $p < 0.05$, 95% C.I.[0.22-2.33]. On average the tribal participants (M=20.77, SD=4.87) had higher psychological distress than the non-tribal participants (M=19.49, SD=4.99).

Table 5: Effect of group (Rural vs Urban), Gender (Male vs Female) and Ethnicity on Psychological Distress

Source	df	Mean square	F	Sig.	Partial eta square
Group	1	463.03	20.18	0.001	0.05
Gender	1	45.01	1.96	0.16	0.01
Ethnicity	1	161.99	7.06	0.01	0.02
Group* gender	1	2.52	0.11	0.74	0.00
Group*ethnicity	1	11.70	0.51	0.47	0.00
Gender*ethnicity	1	39.31	1.71	0.19	0.00
Group*gender*ethnicity	1	22.77	0.99	0.32	0.00
Error	392	22.94			

Univariate ANOVA was used to assess the effect of group, gender and ethnicity on psychological distress. It was found that ethnicity and group as an independent factor had significant effect on psychological distress. As shown in Table 2, it is relatively more in rural youth then the urban and also higher in tribal youth then the non-tribal as shown in

A comparative study on psychological distress between rural and urban youth of Assam

table 4. However, effect of ethnicity was adjusted when it interacted with factors such as group and gender.

Figure 1:

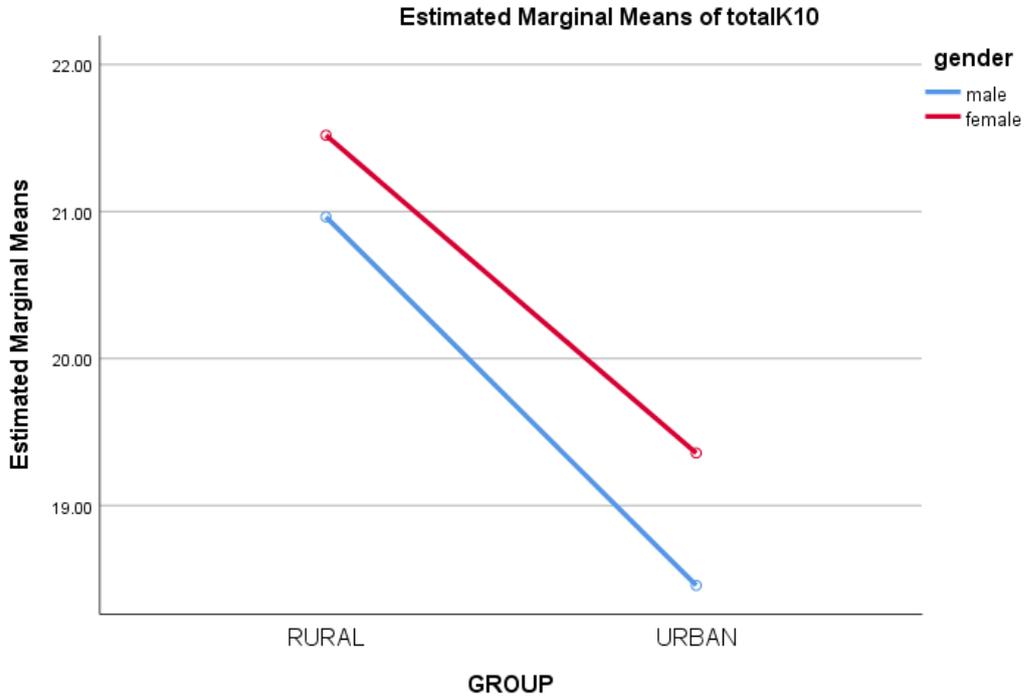
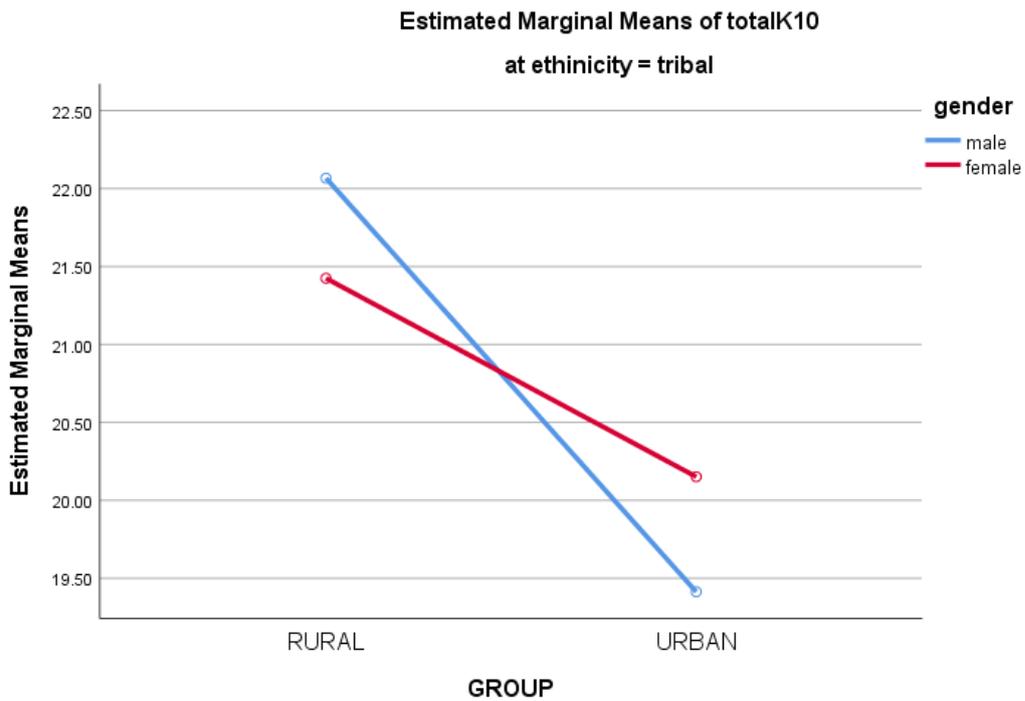


Figure 2:



DISCUSSION

The objective of the present study was to assess the psychological distress among youth in urban and rural areas and examine the impact of some socio-demographic factors on psychological distress. The important finding of the present study is that psychological distress is significantly higher among youth of rural Dhemaji compared to urban areas (see table 2). It is evident from the result that, rural youths are more psychologically distressed. This finding is supported by earlier study conducted by Hakami (2018) in which it was stated that psychological distress is higher among the rural students (32.6%) as compared to the urban students (29.5%). Another similar type of study conducted by Hoyt, et al., (1997), found that adults living in small towns and rural areas have more psychological distress than adults living in cities or urban areas. These findings are in contrast to the NMHS (2017) study that evidenced more depression in non-metro towns and the study included youth population.

In the present study psychological distress is higher among the rural youth probably because they are the disadvantaged group who are frequently exposed to stressors such as financial crises, fewer access to resources, deprived from modern technology, whereas youth living in urban area face these problems less frequently. Urban youth have better opportunities, facilities and services and thereby have a perception of wellbeing and comfort compared to rural youth who are always struggling and are from lower socio-economic strata.

Another important finding of the study was that the mean score of female participants on psychological distress were higher than male participants, but no significant differences have been found. This finding is supported by the research conducted by Islam (2019) in which it is evident that there was no significant differences in overall prevalence of any psychological distress between males and females, severity of psychological distress was found to be significantly higher among female after the age of 60 years. Another study conducted by Joseph & Abraham (2018) reported that there were no significant differences in psychological distress among gender but the mean score of females is comparatively higher than those of male. Similarly, Shaheen et al., (2014) projected that female students experienced more psychological distress as compared to male students. And a significant difference was found between the genders on psychological distress. In contrast to the current study, the NMHS (2017) in Assam evidenced that females (0.93%) have slightly higher prevalence of neurotic and stress related disorders than the males (0.60%).

When ethnic differences were investigated on above sample, significant differences was found between tribal and non-tribal youth on psychological distress. The tribal participants showed higher psychological distress as compared to non-tribal. Similar type of study was conducted by Khan & Lone (2017) in which it was seen that mental health of non-tribal students was found better than tribal students. Tribal students were emotionally less stable and insecure as compared to non-tribal students.

It was also apparent from the results of the present study that interaction between group and gender has no significant effect on the psychological distress. However, group was significantly associated with the psychological distress. Another important finding of the study is that, when group, gender and ethnicity interacts with each other no significant effect was found on psychological distress of the participants. But ethnicity as an independent factor has a significant effect on psychological distress of youth. This finding was supported by the study conducted by Singh & Dewan (2018) which showed that tribal sample have shown high level of depression and stress as compared to those of non-tribal sample.

A comparative study on psychological distress between rural and urban youth of Assam

Similarly, Bhugra & Ayonrinde (2004) revealed that tribal group has high level of depression than non-tribal population.

In the present study the psychological distress is found higher among the tribal youths, probably because they are socio-economically and educationally backward and their language and living standards are different from that of the mainstream communities. They may also harbor perceptions of not being given adequate opportunities and facilities and thereby may have lower self-esteem. Most often, tribal youth hail from farming background and repeated flood situation and disaster like calamities may have impacted the rural tribal youth in Dhemaji, Assam.

CONCLUSION

The results of the present study revealed that demographic variables like rurality, urbanicity and ethnicity, clubbed with socio-economic and social upheavals, have been significantly playing a role on the psychological distress of youth.

Even though India has a tribal population of 8.6 %, the present study had 31.5 % of the study respondents hailing from tribal ethnic background. As per the Mental Health of Scheduled Tribal Population in India, (2018) it is reported that ‘tribal populations have greater vulnerability to mental health issues. The impact of rapid social changes alters their lifestyles, beliefs and community living. The strain of acculturation to moving to urban spaces and use of alcohol and other substances predisposes them to a number of mental health issues’.

On the basis of above results and discussion it can be concluded that psychological distress is higher among the rural participants as compared to the urban. Ethnic groups like the tribal youth population are more psychologically distressed than those of non-tribal youth participants. The findings of this study can be used in dealing with the psychological distress of the youth population in rural areas. Mental health of ethnic youth could be the focus of counsellors and teachers in colleges. Steps like counseling, intervention programs and awareness programs to promote mental health can be initiated by school and college authorities.

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A comparative study on psychological distress between rural and urban youth of Assam

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Conflict of Interest

The author declared no conflict of interest.

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