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Research Paper

Adolescent Behaviour: A Thematic Inquiry into the Underlying Influences

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ABSTRACT

Adolescence is a period of heightened vulnerability marked by both internalizing and externalizing behavioural difficulties. While existing research in India has focused largely on prevalence rates, few studies have examined how unique educational environments shape adolescent behaviour. This study explored behavioural challenges among adolescents in Kota, Rajasthan—India's foremost coaching hub—where students experience prolonged study schedules, intense peer competition, and separation from families. Forty adolescents aged 15–19 years, identified through the Strengths and Difficulties Questionnaire, participated in semi-structured interviews. Data were transcribed verbatim and analysed using Braun and Clarke's thematic framework. Three overarching domains emerged: internalizing problems (academic stress, social withdrawal, low self-esteem), externalizing problems (aggression, attention-seeking, risky behaviours), and environmental influences (family dynamics, peer competition, monotony, lack of mental health support, extended family pressures). The findings reveal that behavioural difficulties are deeply embedded in Kota's high-pressure academic culture, reinforcing the interactionist view that adolescent behaviour arises from the interplay between personal vulnerabilities and environmental demands. Implications include the need for counselling services in coaching institutes, parental sensitization, and policy-level recognition of academic hubs as high-risk settings. The study highlights urgent directions for targeted, context-sensitive mental health interventions.

Keywords: *Adolescence, Behaviour Problems, India, Internalizing, Externalizing*

Adolescence is a period of heightened vulnerability in which behavioural problems often manifest in two broad domains: internalizing and externalizing difficulties. Internalizing problems include symptoms such as anxiety, depression, and social withdrawal, while externalizing problems are expressed through aggression, hyperactivity, and rule-breaking tendencies. Achenbach's foundational factor-analytic work in 1966 distinctly classified these dimensions, laying the groundwork for contemporary assessment and intervention (Achenbach, 1966). This dichotomy remains central to the study of adolescent mental health. At the same time, Lewin's interactionist formula, B = f (P, E), conceptualizes behaviour as the outcome of the interplay between personal predispositions

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(P) and environmental contexts (E), providing a useful theoretical lens for understanding adolescent behaviour in dynamic sociocultural settings (Lewin, 1951).

In India, behavioural and emotional difficulties among adolescents are increasingly recognized as a pressing public health concern. A systematic review reported that the prevalence of such problems ranges between 6% and 36.3%, with a pooled estimate of 14.85% among school-aged children and adolescents (Manohar et al., 2025). Studies conducted in different regions of India highlight the variability of these issues. For example, in Bengaluru, 19.66% of adolescents scored in the "very high" range on the Strengths and Difficulties Questionnaire (SDQ), while 5.33% were in the "high" range, with conduct problems ranging from 8.66% to 11% and peer problems from 18% to 19% (Royal National Journal of Public Health, 2023). Similarly, in southern India, 8.5% of adolescents showed abnormal scores in conduct-related externalizing behaviours, while total difficulties were reported in 5.1% of cases, with males exhibiting higher rates of externalizing and females showing higher levels of internalizing problems (Manuja et al., 2024). Broader epidemiological surveys further suggest that between 13.7% and 50% of adolescents in India struggle with behavioural and emotional problems (Sharma & Sagar, 2012).

Beyond prevalence estimates, contemporary concerns shed light on the evolving nature of adolescent behavioural issues in India. The 2025 Student Well-Being Pulse Report, which surveyed 8,515 high school students nationwide, revealed that nearly 20% rarely felt calm or motivated, and almost 75% reported sleeping fewer than seven hours per school night. Academic pressures, uncertainty regarding future careers, and limited access to mental health support were identified as major stressors. Alarmingly, India recorded over 13,000 student suicides in 2022, highlighting the severe consequences of unaddressed behavioural distress (IC3 Institute & CISCE, 2025).

The city of Kota in Rajasthan presents a unique environment for examining these challenges. Known as the country's coaching hub, Kota attracts thousands of adolescents who migrate from different states to prepare for highly competitive entrance examinations. These students are often exposed to prolonged study schedules, residential separation from families, intense peer competition, and elevated expectations from parents and institutions. Such environmental stressors interact with personal vulnerabilities in line with Lewin's formulation, giving rise to both internalizing outcomes such as anxiety and withdrawal, and externalizing manifestations such as irritability and defiance. While prior research in India has primarily focused on cross-sectional prevalence studies using tools such as the SDQ, there has been limited exploration of how such environmental contexts uniquely shape adolescent behaviours. This constitutes a significant gap in the literature.

The present study addresses this gap by adopting a thematic inquiry into the behavioural challenges faced by students in Kota. Grounded in Achenbach's classification of internalizing and externalizing problems and guided by Lewin's interactionist framework, the study seeks to examine the types of behavioural difficulties prevalent among adolescents in this environment and to identify the key environmental factors that contribute to their emergence. By situating behavioural outcomes within the high-pressure coaching culture of Kota, the research intends to move beyond descriptive prevalence and toward a context-sensitive understanding of adolescent mental health. In light of the significant prevalence of behavioural problems among Indian adolescents and the unique pressures of Kota's educational ecosystem, this study is both timely and necessary.

Objective

To explore internalizing and externalizing behavioural problems among students in Kota and to identify the environmental factors contributing to these challenges, thereby laying the foundation for contextually appropriate mental health interventions.

METHODOLOGY

Research Design

The study adopted an exploratory qualitative research design to investigate behavioural problems among adolescents in Kota, Rajasthan, and to identify the environmental factors influencing these behaviours.

Sample

The sample comprised **40 adolescents** aged 15–19 years who were identified as having behavioural problems based on SDQ. Participants were selected through purposive sampling to ensure relevance to the research objectives.

Inclusion and Exclusion Criteria

The inclusion criteria required participants to be within the age group of 15–19 years and to exhibit behavioural problems as identified through the **Strengths and Difficulties Questionnaire (SDQ; Goodman, 1999)**. Adolescents scoring 16–19 (borderline) and 20–40 (abnormal) on the SDQ were included in the study. Those with physical disabilities were excluded to maintain sample homogeneity.

Tools

The **Strengths and Difficulties Questionnaire (SDQ; Goodman, 1999)** served as the primary screening tool. Adolescents meeting borderline or abnormal cutoffs were recruited. Additionally, a **semi-structured interview schedule**, developed by the researcher, was used to elicit detailed insights into participants' experiences, perceptions of their behaviours, and the environmental influences shaping their mental health.

Procedure

Screening was first carried out using the SDQ to identify eligible participants. Following this, semi-structured individual interviews were conducted in a confidential setting. Each interview lasted approximately 30–45 minutes and was audio-recorded with participants' consent. Questions addressed the nature of behavioural difficulties, coping strategies, peer and family relationships, academic pressures, and experiences within the Kota coaching environment.

Ethical protocols were adhered to throughout the research process. Written informed consent was obtained from all participants. Participants were assured of confidentiality and anonymity, and were informed of their right to withdraw from the study at any stage without consequence.

Data Analysis

All the recordings were transcribed verbatim. To preserve meaning and nuance, pauses, emphases, and notable non-verbal expressions (e.g., laughter, sighs) were included in the transcripts where relevant. In cases where participants used colloquial Hindi expressions, these were first transcribed in the original language and subsequently translated into English, maintaining conceptual rather than literal equivalence. Transcripts were cross-checked

against the audio files to ensure fidelity, and random samples were reviewed by a second researcher to enhance reliability.

Data obtained were analysed using **thematic analysis**, guided by Braun and Clarke's (2006) six-phase framework: familiarization with data, generating initial codes, searching for themes, reviewing themes, defining and naming themes, and producing the final report. This systematic approach facilitated the identification of recurring patterns and the interpretation of underlying influences on adolescent behaviour.

RESULTS

Interview transcripts were read and re-read to ensure familiarity. Initial codes were generated inductively and then collated into potential themes, which were reviewed and refined through iterative comparison with the full dataset. Final themes were defined to capture meaningful and recurring patterns. Three overarching domains emerged: internalizing behaviour problems, externalizing behaviour problems, and environmental influences. Each domain comprised several sub-themes, supported by representative participant quotations.

Table 1 Domains, Themes, and Illustrative Quotations from Participants

Domain	Theme / Sub-theme	Illustrative Quote
Internalizing Problems	Academic Pressure & Stress	"I feel like I am never studying enough. Even when I am tired, I keep thinking I'll fall behind."
	Social Withdrawal & Isolation	"I don't go out with friends anymore. Everyone is studying, so if I take a break, I feel guilty. Slowly, I stopped talking to people."
	Low Self-Esteem & Self-Criticism	"Even if I get good marks, I compare with others. Someone is always better, and then I feel useless."
Externalizing Problems	Aggression & Irritability	"Sometimes I just lose it in class. If someone disturbs me, I shout… later I regret it."
	Attention-Seeking/ Hyperactive Behaviors	"I joke or talk loudly… it's the only way teachers notice me, otherwise I feel invisible."
	Risky Behaviors (e.g., substance use)	"Some of my friend's smoke to relax. I also tried it… at least for a while, I don't think about exams."
Environmental Influences	Family Dynamics & Expectations	"My parents only ask about marks. We hardly talk about anything else. It feels like I'm only valuable if I top."
	Peer Competition & Bullying	"Everyone wants to be the best. Sometimes classmates tease me if I ask doubts. I just keep quiet now."
	Limited Recreation & Social Support	"Every day is the same; class, study, test. There's no life outside this."
	Lack of Mental Health Support	"We don't have anyone to talk to. If you say you are stressed, people think you are weak."
	Extended Family Pressures	"My relatives keep asking my parents about my rank. I feel embarrassed if I don't do well."

Internalizing Problems: Academic stress emerged as a dominant sub-theme, with students reporting persistent worry about academic performance and fear of falling behind peers. This was often associated with sleep disturbances and feelings of exhaustion. Social withdrawal was another recurring theme, where adolescents described guilt about leisure and gradual detachment from peers. Low self-esteem was expressed through self-critical comparisons, where achievements were overshadowed by others' success.

Externalizing Problems: A subset of adolescents responded to stress outwardly, often through irritability and verbal aggression toward peers. Others engaged in attention-seeking behaviours in classrooms, which they perceived as the only way to be noticed by teachers. Risky behaviours, such as experimenting with smoking, were described as temporary coping strategies to manage exam-related anxiety.

Environmental Influences: Family expectations played a significant role in shaping distress, with students reporting limited emotional connection at home and communication restricted to academic outcomes. Peer relationships were described as highly competitive, sometimes extending to ridicule and bullying. Limited recreation and monotonous routines reinforced feelings of entrapment. Many participants emphasized the absence of accessible counselling services and the stigma surrounding help-seeking. Additionally, pressure from extended family networks exacerbated the stress already imposed by immediate caregivers and institutions.

Taken together, the findings reflect the complex interplay of personal vulnerabilities and environmental pressures. Internalizing and externalizing behaviours were not isolated, but deeply embedded in Kota's high-pressure coaching culture, which shaped adolescents' lived experiences in significant ways.

DISCUSSION

The findings reveal a complex interaction between personal vulnerabilities and environmental pressures in shaping adolescents' behavioural problems in Kota. The identified themes reflect Achenbach's (1966) classification of internalizing and externalizing problems and support Lewin's (1936) principle that behaviour is a function of both the person and their environment. Three overarching domains emerged: internalizing problems, externalizing problems, and environmental influences.

Internalizing Behavioural Problems

Findings revealed that students frequently internalized stress in the form of academic pressure, self-doubt, sleep disturbances, social withdrawal, and low self-esteem. These align with prior studies in India documenting the high psychological toll of competitive education. Malhotra and Patra (2014) emphasized that persistent academic stress among adolescents can lead to anxiety, depression, and psychosomatic complaints. Similarly, Gupta and Gupta (2019) found that students in high-pressure environments often displayed perfectionistic tendencies, which contributed to self-criticism and low self-worth.

International research also supports these findings. Arnett (2010) described adolescence as a period of "storm and stress," where identity struggles, heightened expectations, and lack of coping skills increase vulnerability to internalizing difficulties. Furthermore, studies highlight that inadequate sleep—a concern raised by many Kota students—predicts both depressive symptoms and impaired academic performance (Beattie et al., 2015).

Thus, Kota's coaching culture appears to intensify normative adolescent stressors. The findings suggest that prolonged exposure to pressure without adequate coping resources exacerbates internalizing difficulties, thereby validating Lewin's (1951) assertion that behaviour is a function of both personal predispositions and environmental contexts.

Externalizing Behavioural Problems

Students in the present study also reported irritability, aggression, attention-seeking behaviours, and risky coping mechanisms such as substance use. These findings are consistent with Indian studies indicating that competitive academic contexts often trigger externalizing outcomes. Sharma and Singh (2017) documented heightened aggression and oppositional behaviours in adolescents who perceived limited emotional support from families. Likewise, Rani and Thomas (2021) reported that adolescents under sustained academic stress exhibited increased irritability, sometimes manifesting in classroom disruptions.

Externalizing behaviours can also be viewed through the lens of coping. Instead of withdrawing, some adolescents externalize their distress through outward expressions, often as attempts to seek recognition, autonomy, or temporary relief. International evidence echoes this interpretation. Eisenberg et al. (2005) observed that adolescents with poor emotional regulation often resort to anger and risk-taking as maladaptive strategies. Additionally, the World Health Organization (2020) has warned of rising substance use among youth in high-stress educational contexts, highlighting a concerning overlap with the risky behaviours reported by Kota students.

The current findings thus underscore that externalizing symptoms, though less studied in the Indian academic context, require urgent attention as they can escalate into long-term behavioural and psychosocial difficulties.

Environmental Influences

The most striking aspect of the Kota data is the role of environmental factors. Students consistently cited strained family relationships, peer competition, lack of recreation, and absence of mental health support as major contributors to distress. These findings resonate with Steinberg's (2014) work, which emphasized that adolescent development is critically shaped by the social ecology of family, peers, and institutions.

In the Indian context, Chadda and Deb (2013) found that rigid parental expectations, combined with minimal emotional communication, often intensified adolescents' stress levels. Similarly, Rane and Nadkarni (2020) documented how stigma and lack of accessible counselling prevent Indian adolescents from seeking psychological support, mirroring the Kota students' experiences.

Kota's unique environment—characterized by migration away from families, intense academic schedules, and a culture of constant evaluation—appears to magnify these stressors. International comparisons add weight to this argument. For instance, studies from South Korea and China, where similar "exam-centric" educational systems dominate, have reported parallel trends of social isolation, academic burnout, and heightened suicide risk among adolescents (Lee et al., 2018; Sun et al., 2013).

These findings highlight the importance of considering sociocultural and systemic influences on adolescent well-being. Without targeted interventions, the Kota ecosystem risks perpetuating cycles of psychological distress that extend into adulthood.

Implications

The findings of this study underscore the urgent need for a multi-layered approach to adolescent mental health within competitive academic ecosystems such as Kota. At the institutional level, coaching centres should integrate structured mental health services, including access to trained counsellors, peer-support initiatives, and stress-management workshops.

At the family level, the findings call for sensitization programs aimed at parents, encouraging them to balance academic expectations with emotional support. Establishing open communication and reducing pressure from extended family networks may mitigate some of the psychosocial burden adolescents face. Furthermore, public health policies must recognize high-pressure academic hubs as contexts of elevated mental health risk, necessitating targeted prevention campaigns, stigma reduction strategies, and capacity-building in adolescent mental health care.

From a theoretical perspective, the study reinforces Lewin's interactionist framework by demonstrating that adolescent behaviour is best understood through the dynamic interplay of personal vulnerabilities and environmental demands. The nuanced evidence from Kota highlights how cultural and educational ecosystems can amplify stress, offering fertile ground for refining context-sensitive models of adolescent behaviour.

Limitations

While the study provides valuable insights, certain limitations warrant consideration. First, the sample size, though appropriate for qualitative research, was limited to 40 adolescents, potentially constraining the transferability of findings to all coaching environments in India. Second, participants were selected through purposive sampling, which may have introduced selection bias by over-representing those already identified as having behavioural difficulties. Third, although interviews were transcribed verbatim, the possibility of interpretive bias remains inherent in qualitative research, despite measures such as peer debriefing and reflexivity. Fourth, the study does not explore gender-based behavioural variations. Finally, the study's focus on a single city restricts its generalizability; the unique pressures of Kota may not fully mirror those in other educational ecosystems.

Suggestions for Future Research

Future research should aim to build upon the current findings by adopting larger, multi-site qualitative and mixed-methods designs that capture the diversity of adolescent experiences across India's educational landscapes. Comparative studies between students in coaching hubs and those in traditional schooling systems could illuminate how different academic environments shape behavioural outcomes. Longitudinal research would also be valuable in tracing the trajectory of internalizing and externalizing problems over time, thereby identifying critical periods for intervention.

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Conflict of Interest

The author(s) declared no conflict of interest.

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