

MENTAL HEALTH AMONG ADOLESCENCE

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ABSTRACT

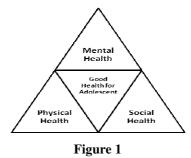
Adolescence considered as a period of transition from childhood to adulthood and Adolescence period is a more important things in human life because many developmental changes occurring in this period such as physical growth, new peer relationship with both sex, emotional independent of parent, intellectual skills and civil competence, socially responsible behavior pattern, and so on. Whereas sound mental health play a vital role in the period of adolescence and also mental maturity is very important in this period because mental health linked with physical health, social health, emotional and functioning at school and common places. According to UNICEF (2011) report it is estimate that around 20 percentage of the world's adolescence have a mental health or behavior problems. The Purpose of this study is to understand the mental health and related problem among adolescents using secondary data, in the light of the study findings the researcher had given the suggestions to the social workers, non-governmental and government settings.

KEYWORDS: Adolescence, Mental Health, Training Programs

INTRODUCTION

According to WHO (1986) define as adolescence age group 10-19 years. UNICEF (2011) report highlighted that today 1.2 billion adolescence stands at the crossroads between childhoods and the adult world and around 234 million of them live in India about one-quarter of India's population are adolescence. Hence, for this age group (10-19) considered as very important period because many more significant changes taking place in his/her life. It is characterized by rapid physical growth, significant physical, emotion, psychological and spiritual change and it's the wonder years in human life because they are the future source (power) of any development nation. Hence, one should need mental ability among adolescence because mental health is a component of the health and is a resource to help us deal with the stresses and challenges of everyday life and good mental health contribute to the quality of our lives, individual, as communities and as a society in general and this age group is vulnerable to other problem such as child marriage, trafficking, HIV/AIDS due to poverty, ignorance and others attraction.

NEED/IMPORTANCE OF MENTAL HEALTH AMONG ADOLESCENCE



Merki, M. B.(1990). Highlighted that there are three important part of **good health** from a triangle. Two sides of the triangle are **physical** and **social health**. Another side the triangle is **mental health**. Mental health is your ability to like yourself and to accept yourself as you are. When you have good mental health, you feel good about yourself and are comfortable around other people and you are also to take charge of your life and meet its demand. According to WHO (2007) Mental health is not just the absence of mental disorder. It is defined as a state of wellbeing in which every individual realizes his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully and is able to make a contribution to her or his community. Hence mentally healthy adolescence more need for our feature nation building work and their own needful family life because poor mental health is strongly related to other health and development concern in adolescence people for example low self-confident, less social responsible activities, committing illegal activities and so on. Most of the mental health problem and disorder take starts in this period of childhood, and adolescent, they are suffering from emotional or developmental problems. It is also linked with physical health, relationship with family members, and peers as well as with functioning at school and common places. Whereas addressing young people mental health need is crucial if they are to fulfill their potential and contribution fully to the development of their community.

GLOBAL SCENARIO FOR ADOLESCENCE MENTAL HEALTH PROBLEMS

It is estimated that around 20 percentage of the world's adolescents have a mental health or behavioral problem. Depression is the single largest contributor to the global burden of disease for people aged 15–19, and suicide is one of the three leading causes of mortality among people aged 15–35. About half of Lifetime mental disorders begin before age 14, the prevalence of mental disorders among adolescents has increased in the past 20–30 years; the increase is attributed to disrupted family structures, growing youth unemployment and families' unrealistic educational and vocational aspirations for their children.

Source

The state of worlds children 2011, adolescence an opportunity (UNICEF) report. www.unicef.org/publicationswww.childinfo.org

STUDIES RELATED TO MENTAL HEALTH AMONG ADOLESCENCE IN SCHOOLS AND COLLEGES

In the mid-19 century, William Sweetzer was the first to clear define the term "Mental Hygiene", which can be seen as the precursor to contemporary approaches to work on promotion positive mental health. And Indian Council of Medical Research, New Delhi, gave a big push to mental health research in the 1980s. This research has not only brought in to light the importance of understanding mental disorders such as schizophrenia in the cultural context, but has also shown the feasibility of developing models involving schools, primary healthcare and general practitioners, as well as working with families. There are many studies have been done in the field of mental health some of the study highlighted that in school, college student mental health among adolescents here Anithamary (2005) studied the mental health among Adolescence school student in Tiruchirappalli, Srividya V (2007) Studied the Mental health and adjustment problems of students of Navodhaya, Central and State schools. Bharathkumar Reddy K. R. et al (2011) studied the self-confidence and

mental health in relation to emotional intelligence of college students. Prasanth Kumar, J (2011) Studied the mental health analysis of intermediate students in relation to their hardiness and academic achievement. Dilip Shivane (2011) studied the family environment and mental health of the tribal and urban student. Singh, Arjinder (2011) studied the mental health in relation to spiritual intelligence altruism school environment and academic achievement of senior secondary students. P. LavanyaKumari (2012) studied the Influencing factors of Mental Health of Adolescents at School Level, Narmadha. U et al (2013) studied the mental health and academic achievement among student at the secondary level. Mahesh Pallor et al (2013) conducted the case study on life skills education in school mental health program in karala. Singh, Rashee (2013) studied the Emotional maturity among senior secondary school students in relation to their self-esteem, home environment and mental health, Sathiya. S and D. Sellam (2013) studied the mental health of visually impaired children at Thantai Hans Rover high school in perambalur; Nancy R Premkumar (2013) studied the Spiritual in well-being mental health: а study of adolescents in colleges Tiruchirappalli and City. BharathSrikala, Kishore Kumar K. V. (2014) studies the empowering adolescents with life skills education in schools – School mental health program.

HERE SOME OF THE STUDIES HIGHLIGHT THE MENTAL HEALTH AND MENTAL HEALTH RELATED PROBLEMS AMONG ADOLESCENTS STUDIED IN COMMUNITY SETTING

Joel wong Y. et al (2006) a system reviews of recent research on adolescent religious/spiritual and mental health, Vikram Patel et al (2007) studied the mental health of young people: a global public-health challenge, Dinesh R. S. et al (2012) studied the mental health among adolescence. Archna (2013) conducted study on mental health of adolescents in relation to moral judgment, intelligence and personality, Seyed Younes, Mohammadi Yousef Nejad (2013) studied the impact of life skills training on self-esteem, mental health and assertiveness, Sowndaram C. S. (2013) studied the Effectiveness of psycho-social intervention in enhancing the mental health of the adolescents.

Findings

Here above studies finding are given bellow.

- There is more influence of good peer relation and healthy school environment on mental health of adolescents.
- Parent Child Relation, Peer Relation and School Environment towards Mental Health is more in girls than boys.
- Mental health has not any relationship with psychotics and neuroticism dimensions of personalities.
- There is no significant relationship of mental health with moral judgment, intelligence and different dimensions of personality for the groups of adolescents having low mental health.
- There is a negative relationship between the education and mental health of the participant.
- Psycho-social intervention had helped to enhance the mental health of the adolescents and consequently their improvement in academic.
- Supports that Life Skills Training increase students' Self –esteem, mental health and Assertiveness.
- Mental health programs are wide pared among Indian student.

- Strength and difficulties questionnaire could also be used in a primary care setting to screen adolescence for mental health.
- Relationships between Religious/Spiritual and mental health were generally stronger or more unique for males and older adolescents than for females and younger adolescents.
- Mental health education promotes the school adolescence mental health.
- There is more adolescent boys had poor 44.6 percent or average 41.3 percent mental health. About half of adolescent girls had average mental health.
- There is a highly significant positive correlation among self-confidence, mental health and emotional intelligence among adolescence.
- School life skill education program had significantly better self-esteem perceived adequate, coping better adjustment generally specifically with teachers in school, and pro-social behavior.
- Majority of the respondents scored low on anxiety and scored high on depression, stress.
- Among the tribes adolescence found to be that student were shy and withdrawn. Whereas urban student were much open and warm.

Suggestion

Based on the above reviews findings the researcher given bellows the suggestion to government, non-government and social worker.

To Government

- Above some studies have found that life skill education and life skill training programs to promotes the mental health among adolescence so the government can add life skill education method and training program in current education system.
- Some studies found to be that mental health education promotes the school adolescence mental health. So government can conduct micro level research in each school regarding mental health and mental ability among adolescence that will show current status of mental health and ability based on that the government can frame the training programmes and can give to them.
- Few of the studies have found that student are very shy, withdrawn and warm so government can start self-motivation training institution in each district especially for adolescence.

To Non-Government Organization

- The non-government organization can initiate one specific project on enhancement of mental health of adolescence in community level
- Ngo's can conduct the community level camp about how to identify mental health and related problem and can teach how enhance their mental health status.

To the Social Worker

- The social worker can conducted case study research in community based that will show in-depth outcome of the mental health status of adolescence.
- The social worker can apply social work intervention like psycho education, group counseling and motivation enhancement therapy among school student and community adolescence.

CONCLUSIONS

Adolescence mental health play a vital role in every place and without adolescent's mental strength cannot do any performance in his/her life. Therefore, Every adolescence should need for social and emotional learning skill such as awareness of self and others, positive attitude and value, responsible decision making and social interaction skill this kind of things may improve their mental health status also prevention programming requires further development of research-based, comprehensive school reform models that improve social, health, and academic outcomes; educational policies that demand accountability for fostering children's and adolescence full development when adolescence academic performance increase, their mental health also increases.

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