

A study on mental health status of the adolescent from teacher's report and self report

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ABSTRACT

Mental health status plays an important aspect in one's life. It needs the same attention as the physical health. Mental Health refers to those behaviours, perceptions and feelings that determine a person's overall level of personal effectiveness, success, happiness and excellence of functioning as a person. Adolescence is a period where they faced with a wide range of experiences and overwhelming emotions. As described by many authors adolescence as a problem period the present study attempt to examine the mental health status of the adolescent. The study was conducted in Jorhat district, Assam. The sample consists of 420 adolescents of the age group 14-16 years from 10 schools and the class teachers. The mental health of the adolescents was assessed by using Strengths and Difficulties Questionnaire (SDQ) teacher report and self-report. The questionnaire consisted of five subscales namely emotional symptoms, conduct problem, hyperactivity, peer problem and prosocial behaviour. Total difficulties score which signifies the potential mental health problems was determined by combining the scores of four sub components namely emotional symptoms, conduct problem, hyperactivity and peer problem and prosocial behaviour was used to determine the strength. Results showed that adolescents under abnormal category of Total difficulty score were found to be 15.9 and 13.8 percent as per teacher report and self-report respectively. Among the different sub-components of mental health, the percentage of adolescents under abnormal category was highest in Conduct problem both in teacher's (29%) report as well as in self-report of adolescents (41.2%). It was found that in Prosocial behaviour the percentage of adolescents under abnormal category were 13.3 percent as per the teacher report and 3.8 percent in self-report. It was further revealed that significant positive correlation between teacher report and self-report on Total difficulty score of the adolescents.

Key Words : Mental health, Adolescents, Self report, Teacher report

INTRODUCTION

Adolescence is the transition between childhood and adulthood, is a stressful period of life characterized by discernible physical, mental, emotional, social and behavioural changes. International Dictionary of Education (1977) defined mental health or mental hygiene as the maintenance of satisfactory personality adjustment and a relative absence of mental disorder. Kumar (1992) stated that mental health is an index which shows the extent to which person has been able to meet his environmental elements – social, emotional or physical. Many of the

mental health problems emerge during adolescence. Adolescents spend most of their time in school once they step out from home. School provides different settings and opportunities for adolescents to engage in various activities related to academics and non-academics. So, teachers get the chance to observe various behaviours exhibited by the adolescents when they engage in different activities and eventually teacher developed awareness about the needs and problems of adolescents. Therefore, in this study teachers were considered as a valuable information provider for adolescents. Hence, teacher report was taken to assess the mental health status of

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adolescents. Self-report of the adolescent was also taken to see how adolescents perceive themselves and describe their own mental health. Therefore the study was taken up with the following objectives:

1. To study the mental health status of adolescents from teacher report and self-report
2. To study the correlation between teacher report and self-report with respect to adolescent mental health status.

METHODOLOGY

The present study was conducted in Jorhat District of Assam. A total of 420 adolescents (210 boys and 210 girls) were randomly selected from 10 schools and the class teacher of the adolescents also participated in the study. The adolescents were in the age range of 14-16 years.

Instrument:

To assess the mental health status of adolescent Strengths and Difficulties Questionnaire (SDQ) Self Report by Robert N. Goodman, 1997 was adopted. The Questionnaire consisted of five sub-components: Emotional Symptoms, Conduct problem, Hyperactivity, Peer Problem and Prosocial behaviour. There were 25 statements and 5 statements for each of the sub components. Responses were scored as "0", "1" and "2" for the statements marked as "true", "somewhat true" and "certainly true" respectively. Reverse scoring was done for negative statements. Total difficulty score which signifies the potential mental health disorder was determined by combining the scores of four sub components namely Emotional symptoms, Conduct problem, Hyperactivity and Peer problem and prosocial behaviour was used to determine the strength. The Cronbach alpha value is 0.73. The SDQ scores were both used in the form continuous variable and also categorised as normal, borderline and abnormal.

RESULTS AND DISCUSSION

Table 1 revealed that the percentages of adolescent under abnormal category of Total difficulty score were 15.9 and 13.8 percent as per the teacher report and self-report respectively. This shows the prevalence of potential cases of mental health disorders among the adolescents. Several other studies also reported almost similar status of the prevalence of mental health disorders during

adolescence. Patil *et al.* (2102) report the prevalence of psychiatric morbidity among 5-14 years was 14.8 percent and Srinath *et al.* (2005) also informed the prevalence rate of psychiatric disorders among 5-16 years was 12 percent. The incidences of mental health disorders during adolescence may be attributed to the marked physical and psychological changes occur during this period. Therefore, they experience more unpleasant emotions and involve themselves in risky behaviours which usually affect their mental health.

When the subcomponents of the SDQ were studied separately, it was seen that among the different sub-components of mental health, the percentage of adolescents under abnormal category was highest in Conduct problem both in teacher's (29%) report as well as in self-report of adolescents (41.4%). This result was supported by study of Rizvi and Najam (2015) who also found that externalizing problems were most prevalent in adolescents and Conduct problems were found as most common in adolescents. The reasons for high percentages of abnormal category in Conduct problems may be due to impulsive nature of adolescents to satisfy themselves immediately of what they desire and in the process of accomplishing what they want, they involve in various activities which are unacceptable by the society.

Table 1 highlighted that after Conduct problem the percentage of adolescents under abnormal category was found to be higher in Peer problem. It was 14.7 percent as reported by teachers and 23.3 percent in self-report. The reasons for higher prevalence in abnormal category of Peer problem could be due to their intense desire for peer group acceptance. Peer group disapproval and being bullied at school may lead to serious peer problems for the adolescents. It was seen from the finding that adolescents reported high abnormal category of Peer problem than teacher report. The possible justification could be adolescents are in the stage where they become very conscious about peer approval than any other stage of life.

It was noticed that 13.3 percent of adolescents were in abnormal category of Prosocial behaviour according to teacher report and 3.8 percent as per the self-report of adolescents. It can be seen from the results that there is vast discrepancy between teacher report and self-report regarding abnormal category of prosocial behavior. This may be adolescents find their behaviours as acceptable and never realize that their behaviours are not considered as Prosocial behaviour by others.

It was seen that in Hyperactivity the percentage of adolescents under abnormal category was 9.5 percent as per the teacher report and it was 4 percent in adolescent self-report. Harrison *et al.* (2012) who found that in adolescents behaviours associated with anxiety and distractibility were the problem most commonly addressed by teachers in the classroom and in the cross-sectional study conducted by Patil *et al.* (2013) found that attention deficit hyperactivity disorder as the common

mental health problems among adolescents.

Further it was also evident from table 1 that in Emotional symptoms the percentage of adolescents under abnormal category as per teacher report was 4.5 percent and in self-report it was 7.6 percent. It was seen that among all the subcomponents of mental health the highest percentages of adolescent under abnormal category were in Conduct problem followed by Peer problem and Prosocial behaviour. This result was consistent with the

Table 1 : Mental Health of Adolescents (Teacher Report and Self Report)

Sr. No.	Mental health	Teacher Report						Self Report					
		Boys N=210		Girls N=210		Total N=420		Boys N=210		Girls N=210		Total N=420	
		F	%	F	%	F	%	F	%	F	%	F	%
1.	Emotional Symptoms												
	Normal	189	90	194	92.4	383	91.2	173	82.4	171	81.4	344	81.9
	Borderline	14	6.7	4	1.9	18	4.3	18	8.6	26	12.5	44	10.5
	Abnormal	7	3.3	12	5.7	19	4.5	19	9	13	6.2	32	7.6
2.	Conduct problem												
	Normal	98	46.7	129	62.4	227	54	53	25.2	74	35.2	127	30.2
	Borderline	31	14.7	40	19	71	16.9	54	25.7	65	30.9	119	28.3
	Abnormal	81	38.6	41	19.5	122	29	103	49	71	33.8	174	41.4
3.	Hyperactivity												
	Normal	169	80.5	181	86.2	350	83.3	183	87.1	195	92.6	378	90
	Borderline	14	6.7	16	7.6	30	7.1	17	8.1	8	3.8	25	5.9
	Abnormal	27	12.8	13	6.2	40	9.5	10	4.8	7	3.3	17	4
4.	Peer problem												
	Normal	65	30.9	85	40.5	150	35.7	66	31.4	81	38.6	147	35
	Borderline	100	47.6	108	51.4	208	49.5	85	40.5	90	42.8	175	41.7
	Abnormal	45	21.4	17	8.1	62	14.7	59	28.1	39	18.6	98	23.3
5.	Pro-social												
	Normal	160	76.1	143	68.1	303	72.1	184	87.6	188	89.5	372	88.6
	Borderline	29	13.8	32	15.2	61	14.5	17	8.1	15	7.1	32	7.6
	Abnormal	21	10	35	16.7	56	13.3	9	4.3	7	3.3	16	3.8
6.	Total Difficulty Score												
	Normal	121	57.6	147	70	268	63.8	112	53.3	145	69	257	61.2
	Borderline	50	23.8	35	16.7	85	20.2	56	26.7	49	23.3	105	25
	Abnormal	39	18.6	28	13.3	67	15.9	42	20	16	7.6	58	13.8

Table 2 : Correlation between Self Report and Teacher report on Mental Health of adolescents

Sr. No.	Areas of Mental Health	Correlation		
		Boys	Girls	Total
1.	Emotional Symptoms	.009	.067	.034
2.	Conduct Problem	.096	.219*	.172**
3.	Hyperactivity	.097	.186*	.160**
4.	Peer Problem	.068	.158*	.095
5.	Pro-social behaviour	.011	.110	.063
6.	Total Difficulty Score	.130	.137*	.154**

* Significant at .05 level and ** Significant at .01 level

findings of Seenivasan and Kumar (2014) who also reported that Conduct problems were the highest among adolescents aged 13-16 years followed by Peer problem and Prosocial behaviour.

Table 2 indicated statistically significant correlation in Total difficulty scores ($r=.154$, $p=.01$), Conduct problem ($r=.172$, $p=.01$) and Hyperactivity ($r=.160$, $p=.01$) between self-report of adolescents and teacher report. This implies that teacher knowledge on the mental health status of the adolescents is in agreement with the adolescents' self-report.

The results of correlation test showed positive correlation between self-report of adolescents and teacher report on the Mental Health Status of the adolescents as well as in all the subcomponents of the scales. It can be inferred that the way adolescents feels about himself is reflected in his/her behaviour which could be recognised by the teachers.

Conclusion:

The present study revealed the prevalence of possible cases of mental health problems among the adolescents as reported by the teacher and the adolescent themselves. This called for an attention for the professionals and stake holders as adolescents represent nation future. An adolescent with good mental health status will bring prosperity for the nation.

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