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A Study on Mental Health and Behavioral Problems among Adolescents

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Abstract

This study explores the prevalence of mental health issues and behavioural problems among adolescents. With increasing evidence pointing to rising rates of anxiety, depression, and behavioural disorders in this age group, the research aims to identify key contributing factors and their implications for intervention. A mixed-methods approach was adopted, combining quantitative surveys with qualitative interviews to provide a comprehensive understanding of adolescent mental health. The findings reveal a strong correlation between mental health challenges and behavioural issues, emphasising the urgency for targeted support systems. The results underscore the importance of early identification and the implementation of effective mental health programmes within schools and communities. Addressing these issues holistically can foster healthier developmental outcomes and prevent long-term psychological consequences. This research contributes valuable insights for educators, policymakers, and mental health professionals striving to create supportive environments that prioritise adolescent well-being and resilience.

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INTRODUCTION

Adolescence is a critical developmental stage characterized by significant physical, emotional, and social changes. During this period, many individuals experience mental health challenges that can lead to behavioral problems. The World Health Organization (WHO) reports that half of all mental health conditions begin by age 14, yet most cases remain undetected and untreated. Understanding the dynamics of mental health and behavioral problems in adolescents is essential for developing effective prevention and intervention strategies.

Mental Health A state of well-being in which individuals realize their potential, cope with the normal stresses of life, work productively, and contribute to their community.

Behavioral Problems Patterns of behaviour that is disruptive, harmful, or socially unacceptable, often including issues such as aggression, defiance, and substance abuse

NEED AND SIGNIFICANCE OF THE STUDY

The increasing prevalence of mental health issues among adolescents necessitates urgent attention from researchers, educators, and policymakers. The significance of this study lies in its potential to inform interventions aimed at improving mental health outcomes and reducing behavioral problems in this vulnerable population. Examining the underlying factors contributing to these issues can guide targeted preventive measures within schools and community programs.

STATEMENT OF THE PROBLEM

Technically, nonage is the period from the morning of sexual maturity (puberty) to the completion of physical growth. Also, the cerebral impact of the transition to nonage may differ across individualities and maybe indeed across societies. Inquiries who have studied nonage view it as a period of “storm and stress”. nonage, helped make this age period a focus of specific study. nonage can be defined as the period within the life span when utmost of the person’s natural, cognitive, cerebral and social characteristics are changing from what’s generally considered childlike to what's considered adult-suchlike(Lerner & Spainier, 1980) [2]. When these changes do contemporaneously, there's a great threat of problem being. The adolescent is more responsible for his opinions and conduct and their impacts than in nonage. The transition into nonage is characterized by frequently clashing solicitations for autonomy and independence coupled with the need of support.

The explanation for fastening on internal health and behavioral problems among adolescent scholars is multifaceted. First, early intervention can alleviate the long- term goods of internal health issues, allowing adolescents to develop managing strategies and adaptability. Second, educational institutions play a pivotal part in shaping the lives of youthful people; therefore, integrating internal health support within seminaries can enhance the overall literacy terrain. Eventually, addressing these challenges can lead to a more informed and compassionate society, eventually reducing smirch associated with internal health issues and promoting a culture of understanding and support. Prioritizing internal health enterprise is not just salutary for individual scholars; it's essential for the well- being of communities as a whole.

REVIEW OF RELATED LITERATURE

NIMH (2022) National Institute of Mental Health (NIMH) [5], approximately 20% of adolescents experience a mental health disorder, with anxiety and depression being the most prevalent. Thapar et al. (2017) [6], [7], found that genetic, environmental, and

social factors significantly influence the onset of mental health disorders during adolescence. Barkley (2015) [1] highlights that behavioral problems often co-occur with mental health issues, with attention-deficit/hyperactivity disorder (ADHD) being a common predictor of future behavioral challenges. Loeber and Hay (1997) [3], [4] emphasizes the role of peer relationships in the development of behavioral problems, indicating that negative peer influence can exacerbate existing mental health issues.

OBJECTIVES OF THE STUDY

To find out the level of Mental Health and Behavioural Problem among Adolescent Students.

To find out whether there is any significant difference in the Mental Health and Behavioural Problem among Adolescents based on Gender, Locality and Birth order.

HYPOTHESES

The level of Mental Health and Behavioural Problem among Adolescent Students.

There is no significant difference in the Mental Health and Behavioural Problem among Adolescent based on Gender, Locality and Birth order.

METHODOLOGY AND PROCEDURE

The study shall collect the data concerning A Study on Mental Health and Behavioural Problem among Adolescents. The Normative Survey method is applied to explain and interprets what exists in the present study.

SAMPLE AND SAMPLING TECHNIQUE

The present study is concerned with Adolescent Students constitute the population for the present study. Stratified Random Sampling Technique was used to select the sample from Private School in Kanchipuram District. The total sample composes of 100 Adolescent Students.

TOOLS USED

Mental Health: Standardized tool by Prof. Augustin.

Behavioural Problem questionnaire was prepared by the researcher.

Data Analysis And Interpretation

From the above table , it is observed that the obtained “t” value 0.83 is lesser than the table

Table 1 Mean, Standard Deviation, t-Test and correlation were used to analyze the data

Variable	Sub Variable		N	Mean	S.D	t-Value	L.S
Mental Health	Gender	Male	50	1.96	0.81		
		Female	50	1.88	0.86	0.83	N.S
	Locality	Rural	72	1.79	0.82		
		Urban	28	1.95	0.85	1.42	N.S
	Birth order	1	31	2.20	1.60		
		2 & Above	69	2.13	1.50	1.97	0.05
Behavioural Problem	Gender	Male	50	2.17	1.56		
		Female	50	2.28	1.74	2.04	0.05
	Locality	Rural	72	2.14	1.52		
		Urban	28	3.17	1.56	2.34	0.05
	Birth order	1	31	1.11	0.47		
		2 & Above	69	1.20	0.61	0.99	N.S

value 1.96 indicating that there is no significant difference between the mean score of Mental Health with respect to Gender. Hence the null hypothesis is accepted. But in Behavioural Problem the t-value 2.04 is higher than the table value 1.96 indicating that there is significant difference between the mean score of Behavioural Problem with respect to Gender. Hence the null hypothesis is rejected. And it is observed that the obtained "t" value is 1.42 is lesser than the table value 1.96 indicating that there is no significant difference between the mean score of Mental Health with respect to Locality. Hence the null hypothesis is accepted. The obtained "t" value is 1.97 is higher than the table value indicating that there insignificant difference between the mean score of Behavioural Problem with respect to Locality. Hence the null hypothesis is rejected. It is observed that the obtained "t" value is 1.97 is greater than the table value 1.96 indicating that there is significant difference between the mean score of Mental Health with respect to Birth Order. Hence the hypothesis is rejected. But The obtained "t" value is 0.99 is less than the table value indicating that there is no significant difference between the mean score of Behavioural Problem with respect to Birth Order. Hence the null hypothesis is accepted.

Table 2 Relation between mental health and behaviours problem

Variable	N	R
Mental Health Vs Behavioural Problem	100	0.313

From the above table, it is observed that the obtained "r" value is 0.313. There is significant relationship between Mental Health and Behavioural Problem was found positive level of correlation between the variables.

FINDINGS

Gender is not significant by Mental Health and significant by Behavioural Problems.

Locality is not significant by Mental Health and significant by Behavioural Problems.

Birth Order is significant by Mental Health and not significant by Behavioural Problems.

It was found that the positive relationship between Mental Health and Behavioural Problems.

EDUCATIONAL IMPLICATION

Adolescents face a myriad of internal health and behavioral challenges that can significantly impact their educational exploits and issues. Understanding these challenges is vital for instructors and policymakers. Mental health issues analogous as anxiety, depression, and behavioral conditions can lead to dropped academic performance, increased absenteeism, and advanced hustler rates. Seminaries serve as a vital terrain for relating and addressing these problems beforehand on. Administering comprehensive internal health programs within educational settings can foster rigidity and give support for affected scholars. This includes training instructors to fete signs of internal health issues, integrating social-emotional knowledge into the class, and icing access to comforting services. Also, promoting a positive academe terrain that fosters inclusivity and peer support can palliate the stigma associated with internal health challenges.

CONCLUSION

Addressing internal health and behavioral problems among adolescents is essential for their academic success and overall well- being. By prioritizing internal health enterprise in seminaries, we can produce a supportive

educational terrain that empowers scholars to thrive.

Ethical Approval: No ethical approval was necessary for this study.

Author Contribution

All authors made substantial contributions to the conception, design, acquisition, analysis, or interpretation of data for the work. They were involved in drafting the manuscript or revising it critically for important intellectual content. All authors gave final approval of the version to be published and agreed to be accountable for all aspects of the work, ensuring its accuracy and integrity.

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