

Analysis of Mental Health in Adolescent School Going Children

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ABSTRACT

Background: Adolescence is a period for the onset of behaviors and conditions that not only affect health at that time but also lead to adulthood disorders. Hence, the present study was conducted for assessing mental health in adolescent school children.

Materials & Methods: The present study was conducted for assessing mental health in adolescent school children. A total of 200 school going children were enrolled. Complete clinical and demographic details of all the subjects were obtained. A pre-structured questionnaire was used for the present study. Children with high SDQ scores (16–40) are likely to have greater rates of existing mental disorders. All the results were recorded in Microsoft excel sheet and were subjected to statistical analysis using SPSS software.

Results: A total of 200 subjects were evaluated. The mean age of the subjects was 14.3 years. Out of 200 subjects, 60.5 percent of the subjects were boys. A significant proportion of mental health problems were encountered among adolescents. The incidence of these mental health problems was higher in

girls in comparison to boys.

Conclusion: In India, adolescents frequently have mental health issues. Parents and teachers need to be made acutely aware of the mental health of their students.


Key words: Adolescent, Survey, Mental.

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INTRODUCTION

Adolescence is a period for the onset of behaviors and conditions that not only affect health at that time but also lead to adulthood disorders. Unhealthy behaviors such as smoking, drinking, and illicit drug use often begin during adolescence and are closely related to increased morbidity and mortality and represent major public health challenges. Many mental health disorders emerge in mid- to late adolescence and contribute to the existing burden of disease among young people and in later life.^{1,2} More than 50% of adult mental disorders have their onset before the age of 18 years. Poor mental health has been associated with teenage pregnancy, HIV/AIDS, other sexually transmitted diseases, domestic violence, child abuse, motor vehicle crashes, physical fights, crime, homicide, and suicide. Globally, neuropsychiatric disorders are the leading cause of years lost because of disability among 10- to 24-year-olds, accounting for 45% of years lost because of disabilities. The overall prevalence of depression in adolescents is around 6% and that for children (younger than 13 years) is 3%.³⁻⁵

The global prevalence of mental health problems affecting children and adolescents is 10–20%. According to the German Health Interview and Examination Survey for Children and Adolescents, the prevalence of mental health problems in Germany is stable and high, at 10%. These problems include anxiety disorders, depression, conduct disorders, and hyperkinetic disorder. However, only about one-third of acutely and chronically mentally ill children and adolescents are receiving medical treatment. The low uptake of healthcare services by mentally ill children and their families is a problem that is known internationally.⁶⁻⁸ Hence; the present study was conducted for assessing mental health in adolescent school children.

MATERIALS & METHODS

The present study was conducted for assessing mental health in adolescent school children. A total of 200 school going children were enrolled. Complete clinical and demographic details of all the subjects were obtained. A pre-structured questionnaire was used

for the present study. It consisted of socio-demographic details. Strengths and Difficulties Questionnaire was used for evaluation. All the subjects belonged to the age group of 10 to 17 years. SDQ measures positive or negative behavioral attributes. The final scoring ranged from 0 to 40, which was further categorized as

normal (score≤15) and high (borderline (16–19) and abnormal (20–40)). Children with high SDQ scores (16–40) are likely to have greater rates of existing mental disorders. All the results were recorded in Microsoft excel sheet and were subjected to statistical analysis using SPSS software.

Table 1: Demographic data

Demographic data		Number	Percentage
Age group (years)	10 to 14	102	51
	15 to 17	98	49
Gender	Boys	121	60.5
	Girls	79	39.5

Table 2: Mental health problems

Variable	Normal	Borderline	Abnormal
Emotional problem	161	22	17
Conduct problems	172	19	9
Social behavior	165	20	15
Total difficulty score	163	20	17

RESULTS

A total of 200 subjects were evaluated. The mean age of the subjects was 14.3 years. Out of 200 subjects, 60.5 percent of the subjects were boys. A significant proportion of mental health problems were encountered among adolescents. The incidence of these mental health problems was higher in girls in comparison to boys.

DISCUSSION

Mental health is one of the evaluating factors of community indicators. Adolescence period is a very important and critical stage in human evolution process. Adolescent physiological changes result from sexual maturation and will lead to aggression and mental disorders. Physical activity is considered an important tool for the importance of public health, and it offers numerous health benefits and can help individuals maintain some chronic diseases (e.g. cardiovascular disease, osteoporosis, type 2 diabetes and hypertension. Recently, psychological issues and psychotherapy have also been considered as people especially adolescents suffer from mental disorders more than any other diseases. Also, awareness of depression in childhood and adolescence has increased.^{9- 11} Hence; the present study was conducted for assessing mental health in adolescent school children.

A total of 200 subjects were evaluated. The mean age of the subjects was 14.3 years. Out of 200 subjects, 60.5 percent of the subjects were boys. A significant proportion of mental health problems were encountered among adolescents. The incidence of these mental health problems was higher in girls in comparison to boys. Soltanian AR et al assessed the association between physical activity and mental health among high-school adolescents. Multiple logistic regression analyses were used to

compare the prevalence of mental health among those who had inactive, minimally and HEPA activity in a representative sample of adolescents aged 15–19 using data from the Mental Health Survey (n=2584). The GHQ-28 and IPAQ-short forms were used to evaluate mental health and physical activity, respectively. A total of 2584 adolescents (1401 male and 1178 female) participated in the study. The observed odds of psychological symptoms in boys compared to girls is 1.2 times (p=0.018). We observed that HEPA-activity decreases odds of somatic distress and social dysfunction compared with inactivity (p=0.031 and 0.001, respectively); minimally activity decreases odds of anxiety compared with inactivity (p=0.038); but physical activity rate was not affected on odds of adolescent's depression (p>0.05). Physical activity decreases mental health subscales except for depression among adolescents.¹¹

Biddle SJ et al synthesised reviews investigating physical activity and depression, anxiety, self-esteem and cognitive functioning in children and adolescents and to assess the association between sedentary behaviour and mental health by performing a brief review. Searches were performed in 2010. Inclusion criteria specified review articles reporting chronic physical activity and at least one mental health outcome that included depression, anxiety/stress, self-esteem and cognitive functioning in children or adolescents. Four review articles reported evidence concerning depression, four for anxiety, three for self-esteem and seven for cognitive functioning. Nine primary studies assessed associations between sedentary behaviour and mental health. Physical activity has potentially beneficial effects for reduced depression, but the evidence base is limited. Intervention designs are low in quality, and many reviews include cross-sectional studies. Physical activity interventions have been shown to have a small beneficial

effect for reduced anxiety, but the evidence base is limited. Physical activity can lead to improvements in self-esteem, at least in the short term. However, there is a paucity of good quality research. Reviews on physical activity and cognitive functioning have provided evidence that routine physical activity can be associated with improved cognitive performance and academic achievement, but these associations are usually small and inconsistent. Primary studies showed consistent negative associations between mental health and sedentary behaviour.¹²

CONCLUSION

In India, adolescents frequently have mental health issues. Parents and teachers need to be made acutely aware of the mental health of their students.

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