

An Analysis upon the Psychosocial Problems in School Going Children: A Case Study of Adolescents

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Abstract – Psychosocial medical issues are exceptionally common and one of the shrouded general medical issues among the children and adolescents. Early finding by essential care doctors and provoke referral to the expert is imperative for controlling it. To screen all school going children for the danger of psychosocial problems, recognize hazard factors and allude in danger children to the therapist for guiding. A Cross sectional examination in urban and country field rehearse territory of a showing doctor's facility in Delhi. A screening device the adolescent report of pediatric manifestation agenda (Y-PSC) was utilized .Statistical analysis by Chi square test and Multivariate strategic relapse was utilized as the test for criticalness. Our investigation unmistakably draws out the part of management in psychosocial weakness. The psychosocial debilitation is around 15.2% with greater impedance seen among government schools.

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INTRODUCTION

Adolescence is a time of investigation and experimentation that requirements acclimation to physical development, changing parts inside families and with peers, and the rise of a more autonomous way of life. Contrasted with grown-ups, adolescents indicate higher feelings of anxiety and less adapting assets. The unpleasant procedure of separation and personality union can bring about noteworthy mental trouble. Studies demonstrate that no less than one out of five children and adolescents have an emotional well-being jumble. No less than one of every 10, or around six million individuals, all inclusive have a genuine emotional unsettling influence.

All inclusive among youngsters of 15-24 years of age, suicide is the third driving reason for death, alongside inadvertent damage and murder. In 1996, more teenagers and youthful grown-ups passed on of suicide in the US than from growth, coronary illness, AIDS, birth absconds, stroke, pneumonia and flu, and constant lung sicknesses joined. A large number of the fundamental hazard factors for adolescent suicidality are outstanding. Among these, the most critical are sorrow, introduction to suicide or suicide endeavors by relatives or companions, substance or liquor manhandle, and having firearms in the home.

Closeness with guardians, and parental help and direction are noteworthy determinants of adolescent modification. Ongoing discoveries demonstrate that parental warmth/inclusion, mental self-rule conceding,

and conduct control/observing, are related with security of connection in late childhood and early adolescence and add to great psychosocial, scholarly and social alteration. Parent-adolescent connectedness has been connected to a wide assortment of results including psychological wellness (misery, suicide, modification, character), individual attributes (fearlessness, adapting aptitudes, inspiration, general prosperity), and social abilities (counting the quality and soundness of associate and close connections).

Right now, there is an uncertain worry among open authorities whether these groups of students have excessively abnormal amounts of psychosocial problems potentially because of their free parental direction and support and introduction to new condition. Plainly, a more profound comprehension of a portion of the relates of adolescents' fundamental psychosocial problems is one of the key pre-essential data required in planning applicable, compelling and far reaching instructive and adolescent wellbeing programs.

Childhood psychosocial scatters display as chunk of ice marvel and are one of the concealed general medical issues. Conclusion of childhood psychosocial scatters are deferred and first observed by family doctor or pediatrician. Early analysis by instructors, guardians and essential care doctors with provoke referral to the concerned expert is crucial for controlling them.

Adolescents experience the ill effects of psychosocial problems at one time or the other amid their improvement. These problems are of transient nature and are frequently not taken note. Besides, children may display these problems in a single setting and not in other (e.g. home, school). A few key transitional periods (moving from early rudimentary to center school, moving from center school to secondary school or moving from secondary school to school) can exhibit new difficulties for these adolescents and side effects or brokenness may happen. The term psychosocial reflects both the under controlled, externalizing or social problems, for example, direct clutters, instructive troubles, substance manhandle, hyperactivity and so on., and the over controlled, disguising or emotional problems like nervousness, despondency and so forth. The emotional problems have been moderately ignored contrasted and conduct problems in light of the fact that these are difficult to be recognized by guardians or instructors.

Numerous epidemiological overviews on school going children and adolescents have announced a wide variety (20-33%) in the pervasiveness of psychosocial problems. Singular examinations delineated the predominance of psychosocial problems extending between 10-40%. In India, where a mental issue and visit to the specialist is viewed as a disgrace, it turns out to be much more important to make mindfulness among guardians and human services suppliers about the degree of these mental problems the same number of normal endless and emotional well-being conditions emerge amid childhood. These following psychosocial problems are known to prompt different learning and emotional troubles in children which at that point affect their mental prosperity.

As per psychological wellness report, numerous adolescents today are experiencing dejection, uneasiness and stress which are common mental issue described by nonattendance of bliss and delight, trouble, low self-esteem, confused rest, poor craving, sentiments of tiredness, poor focus and inability to scholarly accomplishment. High commonness of despondency, uneasiness and stress side effects among adolescents is a hazard factor for their emotional well-being. These hazard components could even influence emotional wellness in adolescence and dangers the adolescents future contrarily.

Socio-statistic information of adolescents, for example, age, sex, ethnics, scholastic accomplishment, and additionally family estimate, family economy as well as sort of house, parental holding has a cozy association with the psychosocial problems. Statistic information of guardians (i.e conjugal status and instructive level) additionally importantly affect psychosocial problems among adolescent.

It is vital to ponder the major psychosocial problems among adolescents in urban zone. At exhibit, there is absence of information on psychosocial problems of

adolescents in Malaysia, particularly in the southern territory. This investigation is intended to decide the psychosocial status, sadness, uneasiness and stress manifestations and their related components among students.

W.H.O. characterizes adolescent age group in 10 – 19 years¹. Numerous scientists chipped away at different psychosocial problems and endeavored to characterize them from multiple points of view however disarray still wins. Some portrayed the term emotional scatters and conduct issue's synonymous with disguising and externalizing conditions individually. Disguising issue are problems turned internal and show in emotional and intellectual indications i.e. despondency, uneasiness and psychosomatic issue.

Externalizing issue are problems turned out ward and show in social problems or carrying on i.e. misconduct, medication and liquor mishandle, truancy and problems in relational connection. W.H.O. in its report uncovered that 10 – 20% of all children have at least one mental or conduct problems.⁴ Other scientists have detailed psychosocial problems in 12% of children and 18% of adolescents individually by utilizing pediatric manifestation check list (PSC).

Adolescence is the transitional stage of advancement amongst childhood and adulthood, speaking to the timeframe amid which a man encounters an assortment of organic and emotional changes. Lobby signified this period as "Tempest and Stress" and states "strife at this formative stage is typical" . Amid this period, adolescents experience the ill effects of different types of problems/dysfunctions and clashes, which at last debilitate ordinary psychosocial advancement disturbing psychosocial brokenness. Scientists have attempted to characterize psychosocial brokenness from multiple points of view, yet disarray remains. Notwithstanding, understanding in regards to psychosocial brokenness reasons that it is a condition of emotional and conduct issue synonymous with disguising and externalizing conditions, individually. Most normal issue incorporate misery and nervousness (disguising clutters), and wrongdoing, animosity, instructive troubles, and truancy (externalizing disarranges). Adolescence is essentially influenced by home and school situations. Schools assume an imperative part in the improvement of an adolescent, as they invest much energy going to school, taking part in extracurricular exercises, and finishing academic work at home. School speaks to a foundation that adds to the general instructive and socialization forms, basic in identity advancement of an adolescent

METHODOLOGY

The investigation endorsement was taken from institutional morals advisory group and composed assent was gotten from the two students and their folks. It is a cross-sectional examination completed in

the urban and provincial field hone zone of a tertiary care showing doctor's facility in Delhi, India. The length of the investigation was 2 years from first November 2009 to 31st Oct 2011. All students from fifth to twelfth principles exhibit amid information gathering and gave their assent were incorporated into the examination.

Government and private and both Marathi and English medium portrayal was looked for while choosing the schools as a purposive example. Evaluation test of students was taken in the chosen three schools. A Y-PSC screening apparatus (Annexure I) was utilized to distinguish in danger children. The device was converted into Marathi and approved by the employees of the office by cross making an interpretation of it again to English and checking for error assuming any. The apparatus additionally gathered socio-statistic information of the understudy viz. age, sexual orientation, financial status, medium of instruction, kind of management, sort of family and so forth. Financial status was figured according to adjusted BG Prasad's classification.

The affectability/specificity of Y-PSC screening apparatus is 95%/68% in center financial class tests, 80%/100% in bring down SE class tests and is a legitimate, solid instrument for screening psychosocial problems in adolescents. The YPSC device comprises of 35 things on standard of conduct of the child that are evaluated as "never," "at times", "frequently" show and scored 0, 1, and 2 separately. The aggregate score is computed by including the score for each of the 35 things.

The cut off score is 28 and therefore every one of the students scoring over 28 were considered in danger for psychosocial problems with the hazard expanding as the score expanded. The device was filled by the guardians and educators were asked for to guarantee guardians consistence on the same. The device had the portable number of the main agent for clearing questions, assuming any, identified with the questionnaire and study.

The information gathered was automated and broke down utilizing SPSS adaptation 14.01. Chi square test and Multivariate calculated relapse was utilized as the test for criticalness. P esteem under 0.05 was thought to be measurably huge. Wellbeing instruction as short address including methods to deal with psychosocial problems was given to in danger children distinguished and alluded to the therapist for advance management.

RESULTS AND DISCUSSION

The aggregate example size of the children took an interest in the examination was 2154. Out of 2145 students screened 1186 (55.01%) were male and 968 (44.09 %) were females. Furthermore, Table 1

demonstrates the dissemination of children screened by socio-statistic profile.

Out of the aggregate 2154 children, 328 (15.2%) were observed to be in danger of psychosocial issue according to the Y-PSC questionnaire.

Socio-demographic risk factors	N (%)	Socio-demographic risk factors	N (%)
Gender (n=2154)		Age group (n=2154)	
Male	1186 (55.1%)	10-14 years	1781 (82.7%)
Female	968 (44.9%)	15-18 years	373 (17.3%)
Religion (n=2154)		Education (n=2154)	
Hindu	2048 (95.1%)	5 th -7 th standard	1053 (48.9%)
Muslim	55 (2.6%)	8 th -10 th standard	1101 (51.1%)
Buddha	37 (1.7%)	Family type(n=2123)	
Jain	7 (0.3%)	Nuclear	1639 (77.2%)
Christians	7 (0.3%)	Joint	484(22.8%)
Management type(n=2154)		Socio economic(n=1830)	
Government	1430 (66.4%)	Class-I	331 (18.1%)
Private	724 (33.6%)	Class-II	341 (18.6%)
Education medium(n=2154)		Class-III	360 (19.7%)
Marathi	1430 (66.4%)	Class-IV	505 (27.6%)
English	724 (33.6%)	Class-V	293 (16.0%)
Location (n=2154)		Family members(n=2154)	
Urban	1505 (69.9%)	Up to 4 members	1084 (50.3%)
Rural	649 (30.1%)	5-8 members	936 (43.5%)
		more than 8 members	134 (6.2%)

Table-1: Distribution of children according to Socio-demographic profile.

Measurably critical distinction was seen according to sort of management whether government or tuition based school, medium of instruction whether English or Marathi medium school, area of the school whether urban or rustic, age group whether beneath 15 years or over 15 years, Class (standard) of the understudy, add up to individuals in the family and financial status. No critical distinction was seen according to sexual orientation or the kind of the family. Our outcomes are practically identical with different investigations led by Ahmad An and Jellinek MS who utilized a similar device in comparative age group.

In the present investigation it was watched that the extent of psychosocial problems expanded with the reduction of the financial status. Just 1830 guardians uncovered their financial status. The extent extended from 9.4% in Class I to 22.2% in Class V. This distinction was factually critical ($\chi^2=30.231$, $df = 4$, $p < 0.001$). Comparable discoveries were likewise detailed by different examiners.

The investigation uncovers that students examining in government schools demonstrated an altogether higher extent (20.6%) of danger of psychosocial debilitation than the extent of students (4.7%) considering in tuition based schools. We didn't discover any investigation which discovered critical relationship of the sort of school management with psychosocial debilitation. Potentially the higher extent of mental weakness in the government run school could be connect with a higher instructor

understudy proportion and accordingly constraining teacher student compatibility.

CONCLUSION

All in all, the present investigation uncovered some relationship between the statistic components of adolescents and furthermore their folks with psychosocial problems. Our investigation obviously draws out the part of management in psychosocial impedance. The psychosocial debilitation is around 15.2% with greater weakness seen among government schools. Consequently, National Mental wellbeing system should concentrate more on government schools and particularly in auxiliary class children. Educators ought to be taught about the notice indications of psychosocial impedance. There is a solid requirement for the post of advisor in the schools with intermittent screening of children and better parent educator affiliation.

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