# A Study on Mental Health Status among Secondary and Higher Secondary School students of Kadana Taluka

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# **Abstract**

The present study aims to examine the mental health status of secondary and higher secondary school students in Kadana Taluka, with a focus on understanding the psychological well—being and challenges faced by adolescents in this region. Mental health during adolescence plays a crucial role in shaping academic performance, emotional stability, social relationships, and overall development. The sample for the study consisted of 120 subjects randomly selected from various secondary and higher secondary schools students of Kadana taluka. The participants were assessed by Dr. D. J. Bhatt and Geeta R. Gida's Mental Health Questionnaire and Personal Data Sheet. Obtained data were analyzed using t-test. Result revealed that there is not significant difference between mental health status of boys and girls. The study also revealed that there is not any significant difference between mental health status of secondary and higher secondary school students.

KEYWORDS: Mental Health, Secondary School, Higher Secondary School.

## **Introduction:**

In the mid- 19<sup>th</sup> century, William Sweetser was the first to clearly define the term, "Mental Hygiene" which can be seen as the precursor to contemporary approaches to work on promoting positive mental health.

Mental health is the balance between all aspects of life- social, physical, spiritual and emotional. It impact on how we manage our surroundings and make choices in our lives- clearly. It is an integral part of our overall health.

"Mental health is how we think, feel and act as we cope with life. It also helps determine how we handle stress, relate to others and make choices."

"Mental health is the psychological state of someone who is functioning at a satisfactory level of emotional and behavioral adjustment."

"Mental health is term used to describe either a level of cognitive or emotional well-being or an absence of mental disorder."

Childhood and adolescence are essential periods for mental health development, and the surroundings in which children grow influence their well-being and development. Mental health issues pose a significant and increasing challenge for students in India, with alarming rates of depression, anxiety, and stress often intensified by academic pressures, familial conflicts, and bullying. Research indicates that a significant number of Indian students face mental health challenges, with approximately 27% experiencing depression, about 26% suffering from anxiety disorders, and others showing behavioral issues. A key factor contributing to this situation is the immense pressure from parents and society to excel academically, resulting in heightened stress, anxiety, and, in some instances, thoughts of suicide. The negative effects on students' mental health are further exacerbated by bullying, family issues, and concerns related to social media usage. The alarming rate of student suicides is a serious issue, with the National Crime Records Bureau documenting more than 12,500 student suicides in 2022, many of which were associated with academic stress. A significant number of young individuals in India refrain from seeking assistance for mental health challenges, with merely 41% expressing a desire to obtain support, a percentage that is lower than in numerous other nations, as reported by UNICEF.

Numerous studies indicate that there are elevated rates of anxiety and depression among students in India, with certain research revealing that more than 60% of students experience moderate to severe anxiety and over 50% suffer from depression. The stress experienced by

students is greatly influenced by parental expectations regarding academic success and the intense competition associated with entrance exams. The COVID-19 pandemic intensified mental health challenges as a result of social isolation, remote education, and job-related uncertainties, resulting in greater psychological distress. Certain studies indicate that female students, especially those from low-income families, might be at a higher risk of experiencing depression and anxiety. Bullying stands out as a significant problem in educational institutions, leading to a sense of isolation and a lack of self-worth in students, as stated by Education for All in India.

# **Contributing Factors:**

#### **Academic Pressure:**

Fierce competition and high parental expectations result in considerable stress, leading to prolonged study hours and anxiety regarding academic performance.

# **Family Issues:**

Harassment, unhealthy family relationships, and insufficient support systems at home can lead to feelings of loneliness and diminished self-worth.

#### **Societal and Cultural Factors:**

Access to mental health care is severely hampered by the stigma and cultural prejudices associated with mental illness.

# **Absence of assistance Systems:**

A lot of students do not have access to sufficient mental health resources, such as counselors or a physical location for assistance.

## **Social Media:**

Overuse of social media correlates with poor sleep quality, lower well-being, and potential mental health challenges.

Looking at this scenario it is the urgent demand to study these all factors and their relationship with each other and how they contribute to mental health of school going students. The present investigation was carried out to examine the impact of type of school and gender on mental health status of students.

# **Research Objectives:**

- 1. A study of the mental health status of boys and girls studying in school.
- 2. A study of the mental health of students studying in secondary and higher secondary schools

# **Research Hypothesis:**

- 1. There is no significant difference between the mean scores of mental health test scores of boys and girls studying in secondary and higher secondary schools.
- 2. There is no significant difference between the mean scores of mental health test scores of students studying in secondary and higher secondary schools.

#### **METHOD:**

# Sample:

The sample for the study consisted of 120 participants, total 60 boys and 60 girls were selected for sample. In both the groups boys and girls - 30 from secondary school and 30 from higher secondary school. Thus, the whole sample comprised of 120 students.

# **Tools:**

The following tools were used in the present study.

#### 1. Personal Data Sheet:

Personal data sheet was prepared to collect some personal information about type of school, age, gender etc.

# 2. Mental Health Scale:

The mental health scale was made by Dr. D. J. Bhatt and Geeta R. Geeda. It has 40 statements and have three points. In this scale no.1, 3, 9, 14, 19, 20, 22, 24, 25, 26, 28, 33, 34, 37, 38 statements are negative; and other sentences are positive for agree, disagree, neutral 3, 2, 1 score is used. For negative 2, 3, 1 scored used.

# $\rightarrow$ Reliability:-

Mainly reliability invented by 3 ways.

- 1. Rational equivalence method = 0.81
- 2. Split half method = 0.94
- 3. Test Retest method = 0.87

# $\rightarrow$ Validity:-

**MHI** concurrent validity = 0.63

#### **Procedure:**

Above mentioned tools were administered to all the selected boys and girls students from secondary and higher secondary school. Scoring was carried out as per the manual. To test the framed hypotheses related to mental health status of boys and girls from secondary and higher secondary school t-test was used.

#### **RESULTS AND DISCUSSION:**

The purpose of the present study was to investigate whether boys and girls students from secondary and higher secondary school differ in the mental health status. Another objective of the study was to investigate whether secondary and higher secondary students differ in the mental health status. To examine the framed hypotheses t-test was applied and the obtained results are presented in the following table-1 and 2.

Table-1 Means, SDs and t – values of Mental Health Status of Boys and Girls (N=120)

Variable	N	Mean	SD	t-values
Boys	60	153.03	740.24	
				-0.0038NS
Girls	60	152.12	1011.97	

NS=Not Significant, \*P<0.05, \*\*P<0.01

Table-2 Means, SDs and t – values of Mental Health Status of Secondary and Higher Secondary School (N=120)

Variable	N	Mean	SD	t-values
Secondary School	60	152.33	1028.00	
				0.13NS
Higher Secondary	60	152.82	719.53	
School				

NS=Not Significant, \*P<0.05, \*\*P<0.01

The results indicated that boys (M = 153.03, SD = 740.24) and girls (M = 152.12, SD = 1011.97) did not differ significantly in their mental health scores, t (118) = -0.0038, p > .05. Hence the null hypothesis was accepted and it was concluded that there is no statistically significant difference in mental health status between male and female students in the sample.

The findings of this study reveal that the mental health status of boys and girls is largely similar. Although boys had a marginally higher mean score than girls, the difference was negligible and statistically non-significant. This outcome implies that gender may not be a determining factor in the overall mental health status among adolescent students in this context.

One possible explanation is that both boys and girls, especially during adolescence, experience similar psychological stressors such as academic pressure, peer influence, identity development, and family expectations. These shared experiences may contribute to a comparable mental health profile across genders.

Additionally, evolving gender roles and increased mental health awareness may have narrowed traditional gender differences in how stress is experienced or expressed. Although previous literature often highlights gender disparities in emotional expression—suggesting that girls may report higher levels of internalizing symptoms such as anxiety or depression—this study found no such difference in overall mental health scores.

These findings imply that gender does not play a significant role in influencing the outcome variable in this sample. Future research may explore other factors or use larger or more diverse samples to determine whether this finding holds across different populations or contexts.

As shown in the table - 2, the results indicated that the mean mental health score of Secondary School students (M = 152.33, SD = 1028.00) was very close to that of Higher Secondary School students (M = 152.82, SD = 719.53) and the t values are (118) = 0.13, p > .05. Hence the null hypothesis was accepted and it was concluded that there is no statistically significant difference in mental health status between secondary and higher secondary students in the sample.

An independent samples t-test was conducted to examine the differences in mean scores between students at the Secondary School level and those at the Higher Secondary School level. The sample consisted of 60 students in each group (N = 120). The results indicated that the mean score for Secondary School students was 152.33 (SD = 1028.00), while the mean for Higher

Secondary School students was 152.82 (SD = 719.53). The difference in means was minimal (0.49 points), and the t-test result was not statistically significant.

These results suggest that there is no significant difference in the mental health status between students from the secondary and higher secondary school.

The findings suggest that there is no significant difference in mental health status between students at the Secondary and Higher Secondary levels. This minimal difference in mean scores implies that educational level—whether students are in lower or upper secondary school—does not appear to have a notable impact on their overall mental health in the present sample.

One possible interpretation is that students in both levels experience similar types of stressors, such as academic pressure, parental expectations, peer relationships, and future uncertainty. These shared stress factors may contribute to the comparable mental health outcomes observed.

Moreover, adolescence itself is a critical developmental stage during which students face psychological, emotional, and social changes, regardless of their specific grade level. These common challenges may overshadow any differences that could arise due to curriculum or grade transitions.

#### **Conclusion:**

The present study aimed to investigate potential differences in mental health status across gender and educational level among school students. The findings revealed no statistically significant difference in mental health scores between male (M = 153.03, SD = 740.24) and female students (M = 152.12, SD = 1011.97), t(118) = -0.0038, p > .05. Similarly, no significant difference was found between secondary (M = 152.33, SD = 1028.00) and higher secondary students (M = 152.82, SD = 719.53), t(118) = 0.13, p > .05.

These results suggest that mental health status is consistent across both gender and educational level within the sample studied. Therefore, the null hypotheses for both comparisons were retained, indicating that neither gender nor school level significantly influences students' mental health scores in this context.

The findings underscore the importance of adopting a universal approach to mental health support in schools, rather than targeting specific subgroups based on gender or grade level.

Future research could explore other variables—such as socio-economic background, academic pressure, or family environment—that may more significantly impact student mental health.

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