ORIGINAL

Association of Age, Birth Order and Family Income with Psycho-Social Problems in Rural Adolescents

Noorul Amin, M.Sc
Nursing Staff, Department of Emergency Medicine, SKIMS Soura

ABSTRACT

Background: The present age is the age of stress. Everybody is disturbed due to one or the other reason irrespective of their age. However adolescents are more prone to psychological and sociological disturbances.
Objectives: To assess the psychosocial problems in adolescents.
Methods: the study was conducted in selected schools of urban and rural areas taking 100 participants each for boys and girls using convenient sampling method. The tool used was youth self report. The data collected was analyzed using appropriate statistical methods.
Results: The study revealed that 48.5% adolescents were well adjusted; 47% were having mild psychosocial problems; 4% had moderate psychosocial problems and 0.5% had severe psychosocial problems.
Conclusion: Adolescents irrespective of their living places had varying degrees of psychosocial problems. JMS 2017; 20 (2):90-95
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INTRODUCTION

The word Adolescence has been derived from the Latin word adolescere which means, to grow into adulthood. Wikipedia online encyclopedia, has also defined it as a transitional stage of physical and mental human development that occurs between childhood and adulthood. This transition involves biological (i.e. pubertal), social, and psychological changes, though the biological or physiological ones are the easiest to measure objectively. There is no single event or boundary line that denotes the end of childhood or the beginning of the adulthood or adolescence. Rather it is thought to be the passage from childhood into and through adolescence as composed of set of transitions that unfold gradually and touch many aspects of individual's behavior, development and relationships. These transitions are biological, cognitive, social, and emotional.

Correspondence
Noorul Amin, M.Sc
Nursing staff, Department of Emergency Medicine
SKIMS Soura
E-mail: amindhobiwani@yahoo.com

World Health Organization [WHO] has defined Adolescence as the age group of 10-19 years. In India, adolescents (10-19 years) constitute 21.4 percent of the population, comprising one fifth of the total Population. [1,4] Adolescent population in India during 1991 was 181,419,000 which are projected to be around 215,332,000 by the year 2016 (UNFPA, 2003).

"Adolescence" is a dynamically evolving theoretical construct informed through physiologic, psychosocial, temporal and cultural lenses. This critical developmental period is conventionally understood as the years between the onset of puberty and the establishment of social independence (Steinberg, 2014). The most commonly used chronologic definition of adolescence includes the ages of 10-18, but may incorporate a span of 9 to 26 years depending on the source (APA, 2002). The onset of adolescence and the beginning of adulthood vary from country to country but we can generally place adolescents to be persons within the ages of eight and eighteen. Those in the period of adolescence are referred to as adolescents or teenagers or simply as teens. The period of Adolescence is

filled with intellectual and emotional changes in addition to other major biological and physical changes. It is a time of discovery of self and one's relationship to the world around himself or herself. Before we delve into the problems of adolescence, let us take some time to note the causes. It is important to the success of our discourse that we first understand what is happening to the teen physically, cognitively, and socially; before looking at how these affects teens. [Steinberg]

Psychosocial problems have been identified as important among adolescents at particular times when they enter their period of adolescence and are in the secondary and senior secondary schools. These psychosocial problems affect an adolescent in wide range of settings and cause deterioration of their mental, psychological and social health. The psycho-social problems have many causes like excessive parental control, war, conflicts, poverty, stress, abuse, neglect etc. There were very few studies that have been conducted on psychosocial problems among adolescent students comparatively in rural and urban areas, particularly in the age group of 12-19 years in Kashmir. The objectives of my study were to study extent of psychosocial problems in rural adolescents and association of age, birth order and family income with psychosocial problems of adolescents.

METHODS

The study was conducted by using descriptive method of research design, as it is one of the main research designs used in the non-experimental studies. The sample consists of 100 adolescent boys and 100 adolescent girls from selected schools of urban and rural areas. The convenient sampling method was used to select the participants for this study both in rural and urban schools of Kashmir valley. Moreover, the tool used for this study was Youth Self Report developed by Thomas M Achenbach and C.S Edelbrock. The principals of the selected schools were requested to grant Permission for data collection. Data was collected by using Youth self-report which has 70 negatively stated statements each having option of never, sometimes, often having 0, 1 and 2 as score respectively, thus having 140 maximum score.

Data means the information collected on Youth self-report from the adolescents of selected rural and urban secondary and senior secondary schools of the Kashmir. The data was collected from the rural schools of district Baramulla sub division Tangmarg and urban schools of district Srinagar. The selected schools offered formal education from 1st to 12th standards and cater coeducation with approximately 600 students and run under private and government management.

Research Design

Keeping in view, the problem statement, the objectives and hypothesis of the research it was seen that the best research design for this study was descriptive research design. It is this design that helped us to know the association between research variables.

Population of the study

The population of this study refers to the adolescents who were studying in the rural and urban schools of Kashmir. The selected population was divided into two groups. One group was hailing from the rural schools that belonged to the subdivision Tangmarg of the district baramulla and the other group belonged to the urban schools of Srinagar i.e. soura. All the students were in the age group of 12-19 years. Thus the target population were the adolescents studying in the schools of rural and urban communities.

Sample of the study

In this study, the sample size was fixed to be 200 adolescents. Out of these 200 samples, 100 samples were taken from rural areas and 100 from the urban areas. Moreover the sample was further divided into two sets in the rural and urban areas on the basis of gender. So, the number of boy adolescents in the sample was 50 from rural area and the number of girl adolescents from the rural area was also 50. In the same manner the sample was distributed as 50 female adolescents and 50 male adolescents from the urban areas making a total number of 200.

Sampling procedure

The samples of the study were selected by a Non-probability sampling technique namely convenient sampling technique. The samples were selected by this technique as there were no abundant students coming to school because of the prevailing conditions(curfew and hartals) in the valley and when conditions were restoring to near normal the government of Jammu and Kashmir declared winter vacations. Thus at the time of data collection whosoever in the age group of 12-19 years were present were taken as samples after established criteria as mentioned earlier.

Research setting

The study was conducted in the selected rural and urban schools of Kashmir valley. The selected

schools run classes from 1st to 12th catering co-education and are under the government and private managements. The study was conducted in following schools in the district baramulla viz

Govt. hr. sec. school, chandilora Tangmarg.

Govt. hr. sec. school, lalpora Kunzer.

Govt. model high school, Dhobiwan Kunzer.

Iqbal memorial institute, Kunzer.

The schools in the urban area from where the samples were collected are

Govt. hr. sec. school, soura Srinagar.

Govt. high school, Umerhair Srinagar.

Galaxy Public Secondary school, 90 feet road soura Srinagar.

Selected variables

In this study two types of variables were selected. These variables are briefly explained as under-

Criterion Variable

In this study it refers to the level of Psycho-social problems faced by adolescents in the rural and urban areas as depicted by the Psycho-social problem score.

Predictor Variables

In this study it refers to the selected baseline characteristics in the part I of the tool reflecting participants age, gender, type of family, family income and birth order.

Inclusion criteria for Sampling

Those adolescents who were present at the time of study in the selected rural and urban schools were included in the study. Also those boys and girls who were willing to be part of this research project and thus gave their consent to be so were included in the preparation of this thesis.

Exclusion criteria for Sampling

Those students who were not present at the time of data collection were obviously excluded from the research. Also those who were not interested to be a part of this project were also excluded from this work.

Tool or Instrument used for Data Collection

The tool that was used for this research was earlier developed by Thomas M Achenbach and C.S Edelbrock. The tool that they have developed is known as Youth Self Report. This youth Self Report is divided in 2 sections viz part first contains the biographic data and part 2nd of the instrument consists of a self-reported scale of Psycho-social problems. The biographic data has different components like age, gender, type of family, family income and the birth order of the respondent. The part II of the tool consists of 70 negatively stated statements each having three options as never, sometimes, and often. While giving score to the adolescents self-reported psycho-social scale, the option of Never was given a score of zero, Sometimes was given a score of one and Often was scored as two. Thus the total number of score that this scale had, was one hundred and forty [140]. While analyzing the results the score of the scale was arbitrarily classified as follows:

01-35, An adolescent having score in this range was considered to be well adjusted and having no deviation.

36-70, An adolescent having score in this range was considered to be having mild Psycho-social Problem.

71-105, An adolescent having score in this range was considered to be having moderate Psycho-social Problem.

106-140, An adolescent having score in this range was considered to be having severe Psycho-social Problem.

RESULTS

Descriptive and inferential statistics were used for the analysis of data as shown in the tables below:

Table 1.0

Table showing Frequency and Percentage distribution of adolescents as per their age in selected urban and rural settings.

N=200

Age in years	No. of adolescents	Percentage
12 yr-14yr	37 [23 R] [14 U]	18.5%
15 yr-17yr	115 [54 R] [61 U]	57.5%
18 yr-20yr	48 [23 R] [25 U]	24%

R= Rural and U= Urban

Table 2.0

Table showing Frequency and Percentage distribution of adolescents as per Gender in selected urban and rural setting.

N=200

Gender	No. of adolescents	Percentage
Male	100 [50 R] [50 U]	50%
Female	100 [50 R] [50U]	50%

Table 3.0

Table showing Frequency and Percentage distribution of adolescents as per their Type of Family in selected urban and rural setting.

N=200

Type of Family	No. of adolescents living in	percentage
Joint	83 [33 R] [50 U]	41.5%%
Nuclear	117 [67 R] [50 U]	58.5%

Table 4.0

Table showing Frequency and Percentage distribution of adolescents as per their Family Income in selected urban and rural setting.

N=200

Family Income per month	Frequency	Percentage
1000-10,000	104 [66 R] [38 U]	52 %
10,001-20,000	33 [24 R] [09 U]	16.5 %
20,001-30,000	33 [07 R] [26 U]	16.5 %
30,001-40,000	20 [03 R] [17 U]	10 %
40,001-50,000	05 [0 R] [05 U]	2.5 %
>50,000	05 [0 R] [05 U]	2.5 %

Table 5.0

Table showing Frequency and Percentage distribution of adolescents as per their Birth Order in selected urban and rural setting.

N=200

Birth Order	Frequency	Percentage
First	55 [17 R] [38 U]	27.5 %
Second	47 [27 R] [20 U]	23.5 %
Third	44 [16 R] [27 U]	22 %
Fourth	42 [27 R] [17 U]	21 %
Fifth	07 [10 R] [01 U]	3.5 %
Sixth	05 [03 R] 02 U	2.5 %

Table 6.0

Table showing Psycho-social problem score and percentage of adolescents in selected rural and urban setting.

N=200

Psycho-social problem Score	Frequency (Percentage)	Mean	Standard Deviation	Range
1-35	97 (48.50%)			
36-70	94 (47%)			
71-105	08 (04%)			
106-140	01 (0.50%)	37.77	20.87	117-04

Table 6.1

Table showing Psycho-social problem score and percentage of adolescents in selected rural schools.

Nr=100

Psycho-social problem Score	Frequency (Percentage)	Mean	Standard Deviation	Range
1-35	40 (40%)			
36-70	55 (55%)			
71-105	05 (05%)	40.75	20.02	86-04
106-140	0 (0%)			

DISCUSSION

The results of this study indicated that psycho-social problems were present in the adolescents of selected rural and urban schools. This study has also revealed that irrespective of location highest number of adolescents that is 57.50% belonged to age group of 15-17 years of age, 24% of adolescents belonged to age group of 18-20 years while as 18.5% adolescent study population belonged to 12-14 years of age. This study also highlighted that in selected rural schools 35% of the adolescents were in the age group of 12-14 years, 42% were in the age group of 15-17 years and 23% were in the age group of 18-20 years. This study also revealed that in urban 14% of the adolescents were in the age group of 12 -14 years, 61% were in 15-17 years of age and 25% of adolescents belonged in the age group of 18-20 years.

This study disclosed that both male and female adolescents participated in this study equally in selected rural and urban schools and their percentage is 50% each.

This study revealed that only 41.50% of adolescents were living in Joint families and 58.50% of them were living in Nuclear families in the selected rural and urban setting. While as studying same in contract the conclusion that was brought fore is that only 33% of rural adolescents were living in Joint families and 67% of them were living in Nuclear families in the selected rural setting while as this study also revealed that 50% of urban adolescents were living in Joint families and rest of the 50% were living in Nuclear families in the selected urban setting.

This study also revealed that majority of adolescents i.e. 52% were hailing from the families whose monthly income was in between 1000-10,000 rupees and there were only 2.5% adolescents whose income exceeded Rs. 50,000 per

month. Here 16.5% had income in between 10,001- 20,000 and 16.5% had in between 20,001-30,000 while as only 10% had income in between 30,001-40,000 and 2.5% had family income in between 40,001- 50,000.

This study revealed that in rural areas, the majority of adolescents i.e. 69% were hailing from the families whose monthly income was in between 1000-10,000 rupees and there were no adolescents whose income exceeded Rs. 50,000 per month. Here 20% had income in between 10,001- 20,000 and 7% had in between 20,001-30,000 while as only 4% had income in between 30,001-40,000. While as this study revealed that in urban schools, the majority of adolescents i.e. 38% were hailing from the families whose monthly income was in between 1000-10,000 rupees and there were only 5% adolescents whose income exceeded Rs. 50,000 per month. Here 9% had income in between 10,001- 20,000 and 26% had in between 20,001-30,000 while as only 17% had income in between 30,001-40,000 and 5% in between 40,001-50,000.

This study revealed that 27.50% of adolescents in rural and urban setting were having their birth order as first, 23.50% had second, 22% had third, 21% had fourth, 3.5% had fifth, and only 2.5% had sixth as their birth order. This study shows that 17% of adolescents in rural setting were having their birth order as first, 27 % had second, 16% had third, 27% had fourth, 10% had fifth, and only 3% had sixth as their birth order. This study also shows that 38% of adolescents in rural setting were having their birth order as first, 20% had second, 27% had third, 17% had fourth, 1% had fifth, and only 2% had sixth as their birth order.

This study also revealed that 48.50% of Adolescents were well adjusted while as 47% of Adolescents were having mild Psycho-Social problems, 04% had moderate Psycho-social problems and 0.5% had severe Psycho-social Problems. Thus in general the adolescents irrespective of their location had some Psycho-Social problems and constitute about 51.50% of total studied population and are said to be impaired while as 48.50% were well adjusted and are said to be not impaired or simply well adjusted. 60 % of Adolescents in selected rural schools were having Psycho-Social Problems and were said to be impaired and only 40% of the adolescents were well adjusted. 43% of Adolescents in selected urban schools were having Psycho-Social Problems and were said to be impaired and only 57% of the adolescents were well adjusted. The means and percentage of the Psycho-social problem score of adolescents of rural (60%, 40.75) and urban schools (43%, 34.80) it can be concluded that adolescents of the selected schools living in the rural areas particularly those studied have more Psycho-Social Problems as compared to the Adolescents in the selected schools living in the urban areas of Kashmir valley.

There is significant association of age with Psycho-social problem score of rural adolescents as is depicted by value 6.69 which is <0.05 with degree of freedom 2.

CONCLUSION

Adolescents living in the rural and urban areas of Kashmir valley have psycho-social problems. These problems might be on rise due to prevailing situation in the valley and other co-conditions surrounding them. The environment in which youngsters are growing make them prone to development of Psycho-Social Problems. Excessive family control, availability of internet, backwardness, poverty in rural areas, dissolution of joint family system, stress, conflicts, unrecognition of needs and demands may also lead development of these psycho-social problems. The adolescents living in rural areas or setting are more prone to these problems. This might be due to non-availability of resources, shyness, reservations, child neglect, economic and social backwardness of the areas. This could be also due to non-availability of services to adolescents and excessive parental control. Female adolescents of rural areas are more affected than male adolescents.

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