



Impact Of Intervention On Mental Health And Interpersonal Relationships Of Rural Adolescent Girls Ludhiana District Of Punjab

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Abstract

Adolescence is an important period in the life span and in view of its characteristics and vulnerability, various efforts by different means are needed to have sound interpersonal relationships and function well in society. The present study focussed to assess and improve the mental health and interpersonal relationship of rural adolescent girls, and was conducted in villages Issewal, Purian, Chappar, Aliwal and Meaharna Kalan in central plain zone Ludhiana district of Punjab, the purpose of the study was to assess level of mental health an, levels of interpersonal relationship. A total of one hundred sixty five girl students studying in government high school were selected for the study. The pre test was done on rural adolescent girls to know about their level of mental health and interpersonal relationship. A Self-structured checklist was prepared to assess the level of interpersonal relationships. The girls showed improvement in mean scores with successive post testings. It was found that after intervention was provided to girls in the form of booklets, packages, lectures, group discussions, girls showed considerable increase in their level regarding mental health and interpersonal relationships. Not much change was observed in their behavioral patterns.

Key words: Rural girls, Mental Health, Interpersonal Relationship

Introduction:

India is the second most populous country in the world with total population of over 1081 million. Adolescent has been defined by World Health Organization as the period of life spanning between 10-19 years. They are no longer children, but not yet adults. Adolescents have got disadvantages. They are developing rapidly and having an extreme degree of pressure from peers, from parents, from society, and self. They

lack knowledge and skill to cope up with pressure. Adolescents form a large section of population, about 22.5 percent, that is, about 225 million. Adolescence is transitional stage of human lifecycle where they face different kind of physiological change. Adolescence is threshold of adulthood. It is period of physiological, psychological, and social maturity from Childhood to Adulthood. Childhood and adolescence are stages of rapid growth and final



maturity of human development. During this period, individuals gain about 50% of adult body weight and height growth with a unique pattern of sexual dimorphism.

For empowering rural adolescent girls enhancement of their life skills is necessary so that they can lead quality life. A large number of girls live in villages where they have to play multifaceted roles for which they are required to have skills, attitudes and personality to function well in today's challenging environment and adjust accordingly. Interpersonal relationship is important life skill which everyone should have as the happiness and satisfaction of every individual depends on how his /her interpersonal relationships are. Taking interest in others, inquiring about their welfare and well- being, showing concern at their time of need, all go to build good human relations that can last a life time. Good relationships make life enjoyable whereas bad relationships make it hell. Certain relationships come by birth, example: relationship with parents, children, siblings, grandparents, uncles and aunts. Certain relationships are acquired, example: spouse, friends, colleagues, neighbours. Some relationships last longer or even for life whereas some stay only for a short period. Improving and maintaining relations is a skill to be learnt by one and all. (Ahlawat *e.tal* 2012)

Present study aimed at assessment of interpersonal relationship of rural adolescent girls and improving their interpersonal

relationships through interventions. Several studies have been conducted in India on adolescents. But there is rarely any study specifically focusing on the "Mental health and Interpersonal relationship of rural adolescent girls" Thus the All India Coordinated Research Project in Home Science (Child Development) finalized a research project entitled, "Empowerment of rural girl child for quality of life" Therefore, the purpose of this study was to find out the level of mental health and to improve interpersonal relationship of the adolescent girls Ludhiana district of Punjab.

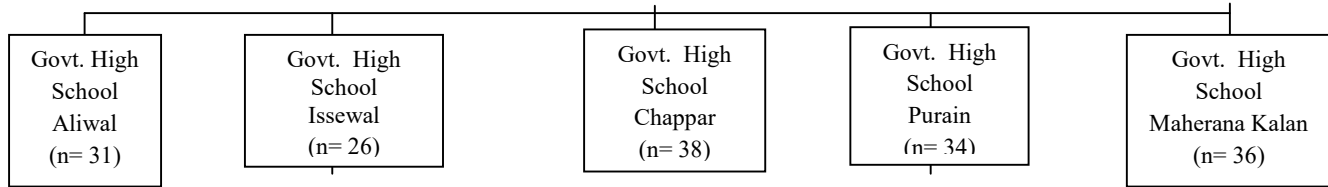
Methodology:

Locale of the Study: The sample for present study was purposively selected from five villages namely Issewal, Purian, Chappar, Aliwal and Meharna Kalan in central plain zone (Ludhiana district) having government high schools were selected.

Sample Selection: A total of one hundred sixty five rural adolescent school going girls were purposively selected from five villages namely Issewal, Purian, Chappar, Aliwal and Maharna Kalan in central plain zone Ludhiana district of Punjab. The principles of selected government high schools were contacted and after seeking permission, the purpose of research was explained so as to gain permission to carry out the research. The girl students enrolled in 7th and 9th classes in each school were included in the sample of the study.

Sample Specification:

Rural Adolescent School Girls



N=165

Tools/ Scales used: The following scales were prepared for the data collection:

Mental Health Checklists:

The girls were categorized under following categories:

Very good, Good, Average, Poor and Very poor.

Interpersonal Relations Checklists: A checklist on relationship within the family: neighborhood and community. The girls having different interpersonal relations be categorized on the basis of following scores:

Category	Score
Low	1-31
Medium	32-63
High	>64

Procedure of data collection: All scales were administered to the sampled girls and the data was collected as posttest I, posttest II, III, IV and V.

Intervention Programme: After analyzing the existing level of knowledge of rural adolescent girls on mental health and interpersonal relationship. The girl students were pretested for their mental health and interpersonal relationship and after 6 months post testing I was done. Six month period was given for intervention inputs such as lectures, demonstrations, group discussion to the girls to improve upon their mental health and interpersonal relationship.

Results and Discussion:

Table 1: Mental health scores of rural adolescent girls

Test	Positive self evaluation (PSE)	Perception on reality (PR)	Integration of personality (IP)	Autonomy (AUNTY)	Group oriented attitude	Environmental Mastery (EM)	Overall
Pretest							
Range	16-34	13-28	11-42	10-27	11-32	11-30	22.08
Mean	24	22.1	25.8	14	24	22.6	
Posttest1							
Range	17-39	14-27	12-35	10-27	11-31	15-28	22.16
Mean	24	32.3	25.8	14.2	24	22.7	-

Table 1 enumerates the mean scores of rural adolescent girls in view of their mental health levels. The components of mental health includes positive self-evaluation, perception of reality, integration of personality, autonomy group oriented attitude and environmental competence. The adolescent girls were evaluated on six dimensions of mental health scale. During pretesting the mean scores were PSE-24, PR-2.1, IP-25.8, AUNTY-14GOA-24 and EM-22.6 with overall mean score 22.08. The

girls were tested again after a gap of 4 months after the input of intervention programme. The girls did not gain much with marginal scores in each dimension. The overall mean score was 22.1. It is further suggested that successive interventions are required to embark a Permanent effect on the girls to improve upon their mental health. Constant interactions, group meetings, lectures are required to be given to girls to improve upon their present mental health.

Table 2: Frequency distribution of rural adolescent girls in view of their mental health levels.

(N=165)					
Test	Very good	Good	Average	Poor	Very poor
Pre Test					
PSI	-	5	40	60	60
PR	-	5	40	50	70
IR	-	15	60	50	40
AUNTY	15	35	65	35	15
GOA	-	-	35	60	70
EM	-	-	38	62	65
Post Test					
PSI	-	25	40	70	25
PR	-	3	35	60	67
IR	-	-	40	70	55
AUNTY	-	50	54	23	2
GOA	-	-	20	90	55
EM	-	-	10	90	65

Table 2 enumerates the frequency distribution of rural adolescent girls in view of their mental health levels. The components of mental health includes positive self-evaluation, perception of reality, integration of personality, autonomy, group oriented attitudes and environmental competence. Initially, when the pretesting was conducted most of the girls were

found in 'very poor' category. The scores improved gradually as a result of intervention provided in the form of lectures regarding mental health. The scores improved in post testing I in comparison to pretesting in all dimension as girls moved in 'Good.' Category and decreased in poor category of mental health.

Table 3: Interpersonal relationship scores of rural adolescent girls.

Test/Components		Parents	Siblings	Friends	Neighbors	Group	Overall
Pretest	Range	10-15	4-9	4-10	6-12	5-8	8.1
	Mean	12.9	6.5	6.6	7.9	6.5	
Pretest 1	Range	12-16	4-9	5-10	6-12	5.9	8.3
	Mean	12.9	6.8	6.8	8.2	6.8	
Pretest 2	Range	10-16	4-10	5-10	4-12	6-9	8.66
	Mean	13.7	7.1	7.2	8.3	7	
Pretest 3	Range	11-18	5-10	5-10	6-12	5-9	9.02
	Mean	14.3	7.5	7.4	8.7	7.2	
Pretest 4	Range	17-19	8-10	9-10	10-11	9-10	11.2
	Mean	14	9	10	10	10	
Pretest 5	Range	17-19	9-10	9-10	10-11	9-10	11.8
	Mean	18	10	10	11	10	

Table 3 describes the interpersonal relationship scores of rural adolescent girls with respect to parents, siblings, friends, neighbors and group. The pretest mean scores with respect to interpersonal relationship with parent (12.9), siblings (6.5), friends (6.6), neighbors (7.9) and group (6.5) improved gradually 18 for parents, 10 for siblings, 10 for friends, 11 for

neighbors and 10 for group when post testing was conducted regarding interpersonal relationship. Overall mean scores also improved when post testing were conducted i.e. from pretesting scores 8.1 to post testing scores 11.8. It is assumed that skills are different aspects of personality. Improvement in one skill will definitely affect the other skills.

Table 4: Frequency distribution of rural adolescent girls in view of their Interpersonal relationship. (N=165)

Test	Low (1-31)	Medium (32-63)	High (> 64)	Total
Pre test	-	165	-	165
Post test 1	-	165	-	165
Post test 2	-	165	-	165
Post test 3	-	165	-	165
Post test 4	-	165	-	165
Post test 5	-	165	-	165

Table 4 emphasizes the interpersonal relationship levels of adolescent girls. In this table, all 165 girls from different villages have been categorized in the medium level of interpersonal relationships and they remain in that category from pretest to posttest. This shows that in rural culture whatever is thought during child rearing as a socialization process, the rural girls follow strictly. The different behavior in terms of roles, duties and interaction patterns are clearly specified. For example, the complete subordination to male members, not allowed to talk to male strange person, household duties clearly marked and so on. Not much change was observed in their behavioral patterns.

Conclusion:

Thus, the study reflects rural adolescent girls about their level of mental health and interpersonal relationship. It was found that after post intervention was provided to girls in the form of booklets, packages, lectures, group discussions, girls showed considerable increase in their level regarding mental health and interpersonal relationships. Not much change was observed in their behavioral patterns and they did not gain much with marginal scores in each dimensions of mental health. Results of the study also concluded that there is dire need of

interventions to improve interpersonal relationship and mental health of the adolescent girls. Girls should be made aware of the fact that nobody can live in isolation and survive. They have to maintain cordial relations with all to live comfortably and to get others support in difficult situations. Good interpersonal relationship is also essential for health and harmony in the family, workplace and society.

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