

**MENTAL HEALTH AND ACADEMIC ACHIEVEMENTS OF FIRST
YEAR UNDER GRADUATE STUDENTS**



A

DISSERTATION

**SUBMITTED TO THE MIER COLLEGE OF EDUCATION
(AUTONOMOUS)
UNIVERSITY OF JAMMU
IN PARTIAL FULFILMENT OF THE REQUIREMENTS
FOR THE DEGREE OF MASTER OF EDUCATION**

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2020

CERTIFICATE

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“MENTAL HEALTH AND ACADEMIC ACHIEVEMENTS OF FIRST YEAR UNDER GRADUATE STUDENTS”

Her dissertation is fit for submission, in partial fulfillment of their requirements for the award of the Degree of Master in Education.

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ACKNOWLEDGEMENT

A major research project like this is never the work of anyone alone. The contributions of many different people, in their different ways, have made this possible. This acknowledgement is not merely a formal thanks note; it is the best way I could attempt to convey my sincere gratitude and respect for those who have been indispensable in completing this project. I am highly indebted and express my heartfelt gratitude to my guide Dr. Bharti Tandon, Associate Professor PG Department, MIER College of Education, for her unprecedented help and scholarly skills that she imbibed in me. It was only due to her valuable academic guidance, encouragement, deep personal interest and inspiration that the present study could be completed well in time.

I am to place on record my heartfelt gratitude to Dr. Arun K. Gupta, Chairman and Dr. Renu Gupta, Vice Chairperson, MIER, Dr. Adit Gupta, Director and Principal MIER College of Education, Prof. N. R. Sharma, Dean Academics, MIER College of Education and Dr. Mool Raj Sharma, H.O.D, PG Department, who deserve special mention and appreciation for providing me valuable access to various facilities for conducting research and also the freedom to interact with the students and staff of the different wings of the institution. Their intellectual and academic input have helped to improve the quality of this work significantly.

I am thankful to the Principal of the college who allowed me to collect data from his college and of course the teacher trainees who participated in this study. I wish to acknowledge the invaluable support and cooperation rendered to me by the staff members of MIER College of Education. My special thanks are due to Mr. Naveen for providing computer assistance. I would also like to acknowledge the support provided at the MIER College of Education Librarian, Mrs. Eesha Sharma.

Last but not the least; I thank my family who stood behind me like a rock and for their inspirational spirit, which gave me new vigor and impetus to work with devotion and absolute commitment in every possible way. Finally, I wish to sincerely thank my peer group for understanding and cooperating with me in times of difficulty. Their love and support contributed immensely in the completion of this research.

Ayishah Tabassum

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ABBREVIATION OF THE TERM USED

MH	Mental Health
AA	Academic Achievement
SEM	Standard Error Mean
No.	Number
df	Degree of freedom
NS	Not significant
Sig.	Significance

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Appendix A: *Mental Health Scale* by Dr. SushmaTalesara and Akhtar Bano (2017)

ABSTRACT

Mental health is a state of well-being in which the individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community. Mental health is an important and essential aspect which plays significant role in the development of whole life. It is a powerful tonic for development of all cognitive, affective and psychomotor development. A man with healthy mind attains satisfaction in life. A mentally healthy person can be creative and learn new things and take risks for higher achievements. But it is true that today secondary and college students are facing mental health problems due to several reasons. Mental health problems are affecting academic performance of learner and causes of poor academic achievement and a major cause of suicide. Therefore, development of mental health at all levels is very essential. The objective of the present study was to study the mental health and academic achievements of first year undergraduate students of Degree College of Jammu city. A sample of 200 first year undergraduate students was selected from different Degree colleges in Jammu City using Simple Random sampling technique. The *Mental Health Scale* by Dr. Sushma Talesara and Akhtar Bano (2017) was used for data collection. In order to analyze the data, the statistical techniques namely percentage, *t*-test, Pearson Coefficient of Correlation and ANOVA have been employed. The result of the study shows that 14% of the students indicate the extremely good mental health level. 21.5% of the students indicate very good mental health level. 19 % of the students of first year undergraduate students indicate good mental health level 27 % of the students has the moderate mental health level. 11% of the students indicate poor mental health level. 6.5% of the students indicate very poor mental health level and only 1 % of the students indicate extremely poor mental health level. The results indicate that there was no significance difference in the mental health of first year undergraduate students in relation to gender, family background, type of college, residential background and type of programmed but there was significant difference among the first year undergraduate students between the mental health and academic achievements. Positive correlation was found between the mental health and academic achievements of first year undergraduate students.

CHAPTER I

INTRODUCTION

1.1 INTRODUCTION

Education is the most powerful weapon. It can be used to change the world. It is a saying but in today's contest it is losing its charm. The aim of education is the all-round development of personality i.e. physical, spiritual, moral, emotional and mental. Almost all education commissions, after independence, have emphasized on this very goal of education. It is supposed that present day education is doing only mental development of children. But it is no true. In real sense, present day education is only providing some information to students and developing very few mental abilities. But mental health is a state of harmonious functioning of the total personality and it reflects a maximum of success satisfaction and excellence. It is the ability of a person to adjust to the world and those around with maximum effectiveness. It is a condition that is socially acceptable and personally satisfying.

Education means inculcating moral values, positive thinking, and attitude of helping, attitude of giving to society & ethical values these kinds of students are only able to bring changes in society.

1.1.1 Concept of Mental Health

Human beings from birth to death remaining in close association of society. It is the proper interaction of a person with the society which brings out the complete and harmonious development of one's personality. Health is the most precious asset that is sought by all human beings. Health is an indispensable quality in human beings. It has been described as soul from which the fitness flower grows. Mental health which today is recognized as an important aspect of one's total health status is a factor that contributes to the maintenance of physical health as well as social effectiveness. Man is an integrated psych somatic unit whose behavior is determined by both physical and mental factors. It is in the normal state of well beings, & in the words of Johns, Sutton & Webster, "It is a positive but relative quality of life .It is a condition which is characteristics of the average person who meets the demands of life on the basis of his own capacities and limitations." It is not mere absence of mental illness and constitutes mental health. On the other hand, it is a positive, active quality of the individual's daily life.

The concept of mental health, given its polysemic nature and its imprecise borders, benefits from a historical perspective to be better understood. What today is broadly understood by “mental health” can have its origins tracked back to developments in public health, in clinical psychiatry and in other branches of knowledge.

Although references to mental health as a state can be found in the English language well before the 20th century, technical references to mental health as a field or discipline are not found before 1946. During that year, the International Health Conference, held in New York, decided to establish the World Health Organization (WHO) and a Mental Health Association was founded in London. Before that date, found are references to the corresponding concept of “mental hygiene”, which first appeared in the English literature in 1843, in a book entitled *mental hygiene or an examination of the intellect and passions designed to illustrate their influence on health and duration of life*. Moreover, in 1849, “healthy mental and physical development of the citizen” had already been included as the first objective of public health in a draft law submitted to the Berlin Society of Physicians and Surgeons ².

In 1948, the WHO was created and in the same year the first International Congress on Mental Health took place in London. At the second session of the WHO’s Expert Committee on Mental Health (September 11-16, 1950), “mental health” and “mental hygiene” were defined as follows ³: “Mental hygiene refers to all the activities and techniques which encourage and maintain mental health. Mental health is a condition, subject to fluctuations due to biological and social factors, which enables the individual to achieve a satisfactory synthesis of his own potentially conflicting, instinctive drives; to form and maintain harmonious relations with others; and to participate in constructive changes in his social and physical environment.”

However, a clear and widely accepted definition of mental health as a discipline was (and is) still missing. Significantly, the *Dorland’s Medical Dictionary* does not carry an entry on mental health, whereas the *Campbell’s Dictionary of Psychiatry* gives it two meanings: first, as a synonym of mental hygiene and second, as a state of psychological wellbeing. The *Oxford English Dictionary* defines mental hygiene as a set of measures to preserve mental health, and later refers to mental health as a state. These lexicographic concepts nonetheless, more and more mental health is employed in the sense of a discipline (e.g., sections/divisions in health ministry’s or secretaries, or departments in universities), with an almost perfect replacement of mental hygiene.

In addition, given this polysemic nature of mental health, its delimitation in relation to psychiatry (understood as the medical specialty concerned with the study, prevention, diagnosis and treatment of mental disorders or diseases) is not always clear. There is a more or less widespread effort to set mental health at least aside from psychiatry and at most as an overarching concept which encompasses psychiatry.

Mental health has a complete and comprehensive connotation. It does not refer to any aspect of mental life or to any one dimension of human personality. It encompasses all aspects of the individual's adjustment which is characterized by appropriate personal, social, intellectual, emotional and philosophical orientations, the individual is deemed to have good mental health. Mental Health is a state of continuous wellbeing, an attribute of a mature human personality and a social value to be guarded and maintained through purposeful living.

According to Encyclopedia Britannica (1968) "Mental health in the broader sense, suggests degree of happiness and satisfaction under conditions that warrant such a state of mind and a capacity for making satisfactory personal and social relationships. "Mental Health means the ability to balance feelings, desires, ambitions and ideal in one's daily living. It means the ability to face and accept the realities of life (Bhatia, 1982).

According to Medlexicon's medical dictionary, mental health is: "Emotional, behavioral, and social maturity or normality; the absence of a mental or behavioral disorder; a state of psychological well-being in which one has achieved a satisfactory integration of one's instinctual drives acceptable to both oneself and one's social milieu; an appropriate balance of love, work, and leisure pursuits."

According to the World Health Organization (WHO), mental health is "a state of well being in which the individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community."

The WHO stresses that mental health "is not just the absence of mental disorder." This definition while representing a substantial progress with respect to moving away from the conceptualization of mental health as a state of absence of mental illness raises several concerns and lends itself to potential misunderstandings. In fact wellbeing is a key aspect of mental health which is difficult to reconcile with the many challenging life situations in which wellbeing may even be unhealthy most people would consider as mentally unhealthy and

individual experiencing a state of wellbeing while killing several persons during a war action, and would regard as healthy a person feeling desperate after being fired from his/her job in a situation in which occupational opportunities are scarce.

People in good mental health are often sad, unwell angry or unhappy, and this is part of a fully lived life for a human being. In spite of this, mental health has been often conceptualized as a purely positive effect, marked by feelings of happiness and sense of mastery over the environment.

1.1.2 Factors affecting mental health

Most people at some point feel worried, stressed or even down about things that are going on in their lives. There are number of factors in life that can have impact on our mental health. These factors can either pose a risk to, or protect, your mental health and wellbeing.

Everyone is different and we all live in varying circumstances. Risk and protective factors are also different for everyone and change over your lifespan e.g. child, teenager, adult or older adult. By building the protective factors and reducing the risk factors in your life you can improve your mental health and wellbeing.

Good mental health is more than just the absence of mental illness. It can be seen as a state of mental health that allows one to flourish and fully enjoy life. Everyone experiences down times in life. The ability to cope with negative experiences varies greatly from one person to another and, in large part, determines whether people enjoy their lives. Some of the factors that affect the mental health of youth are as follows:

Self esteem

This is the value we place on ourselves, our positive self-worth. People with high self-esteem generally have a positive outlook and are satisfied with themselves most of the time.

Feeling loved

Children, who feel loved, trusted and accepted by their parents and others are far more likely to have good self-esteem. They are also more likely to feel comfortable, safe and secure, and are better able to communicate and develop positive relationships with other.

Confidence

Youth should be encouraged to discover their own unique qualities and have the confidence to face challenges and take risks. Young people who are brought up to have confidence in themselves are more likely to have a positive attitude and to lead happy and productive lives.

Family breakup or loss

Separation or divorce or the loss of a parent or sibling is extremely painful. Finding ways to cope and adjust to the changes.

1.1.3 Concept of Academic achievement

Academic achievement is the outcome of education the extent to which the student teacher or institution has achieved their educational goals. Academic achievement is commonly measured by examination or continuous assessment but there is no general agreement on how it is best tested or which aspects are most important procedural knowledge such as skills or declarative knowledge such as facts. Individual differences in academic performance have been linked to differences in intelligence and personality. Students with higher mental ability as demonstrated by IQ tests and those who are higher in conscientiousness tend to achieve highly in academic settings. A recent meta-analysis suggested that mental curiosity (as measured by typical intellectual engagement) has an important influence on academic achievement in addition to intelligence and conscientiousness. Academic achievement is something you do or achieve at school, college or university in class, in a laboratory, library or field work. It does not include sport or music.

In academic achievement nature and nurture play a combined role. Nature implies certain innate or inherited factors such as intelligence, potentiality and personality while nurture contributes such things as may be found in homes, school, neighborhood and the wider society. To ascertain the relative importance of nature and nurture is an arduous task. It endeavors to pinpoint such important factors as would give the reader a better understanding and insight into school and failure. Academic achievement has been one of the most important goals of the educational process. It is also a major goal, which every individual is expected to perform in all cultures.

Crow and Crow (1969) defined "academic achievement as the extent to which a learner is profiting from instructions in a given area of learning i.e. achievement is reflected by the extent to which skill or knowledge has been imparted to him".

Kohli (1975) defines academic achievement as the level of academic proficiency attained in academic work or as formally acquired knowledge in school subjects, which is often represented by percentage of marks obtained by students in examination. In our society academic achievement is considered as a key criterion to judge one's total potentialities and capacities.

Hence academic achievement occupies a very important place in education as well as in the learning process. Academic achievement is of paramount importance in the present socioeconomic and cultural context.

Mental health problem will affect the academic performances student and it will go from bad to worse if the students do not receive any treatment. The negative effect of mental health is not only on the academic side, but also on their daily life. The relation between mental health and Academic performance has been reported variously in different studies. The present research aims to study the relation between mental health and Academic Performance of First year under graduate students.

1.2 NEED AND SIGNIFICANCE OF THE STUDY

Mental health is very important for every human beings Mental health problems and illnesses are clinically significant patterns of behavior or emotions that are associated with some level of distress, suffering, or impairment in one or more areas such as school, work, social and family interactions, or the ability to live independently (Canadian Psychiatric Association, 2004).

Mental health is an important facet of one's life. According to the World Health Organization (WHO), it can be defined as "a state of wellbeing in which every individual realizes his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community."

As awareness of the importance of mental health increases, more and more researches are being conducted to relate the importance of mental health with the learning process. Among others, the American College Health Association, in a survey in 2015, found that students

with psychological distress received lower grades in their exams or courses, and experienced a significant disruption in completing their theses, dissertations and/or practicum tasks.

Finally, mental health is also instrumental in allowing students to accept negative feedback with a positive mindset. Poor mental health may lead to the student being skeptical toward understanding a different perspective or in interpreting criticism. This type of individual is generally protective and defensive of his thoughts and does not take opinions from a third party easily. Hence, in promoting better mental health among their students, teachers in this situation can try different tactics. For instance, they could personally convey their feedback to the individual students instead of sharing it in front of the whole classroom. The latter may be perceived by the students as an act of exposing their weaknesses, which may also cause a negative impact in their lives, such as lower self-esteem.

For one, social development, an important aspect that contributes to one's mental health, is heavily highlighted through a variety of activities across all levels at the school. The Early Childhood program integrates authentic social interactions and scenarios that allow students to learn to solve problems, conflict resolution strategies and how to compromise at a developmentally appropriate level. As these students progress to Lower School, they will join their teachers in regular Morning Meeting sessions that allow them to improve their social skills in a group setting. This effort continues in the Upper School through the Advisory program, during which students are equipped with both study and social skills.

In the current study examined first-generation college students in relation to the challenges that affect their mental health and their academic performance. Many of the studies conducted in higher education show that first-generation students are more likely to: experience symptoms of depression, higher levels of stress, lower levels of life satisfaction, and a decreased sense of belonging in higher education institutions. There can be a possible correlation between mental health and academic performance of students.

1.3 STATEMENT OF THE PROBLEM

MENTAL HEALTH AND ACADEMIC ACHIEVEMENT OF FIRST YEAR UNDER GRADUATE STUDENT.

1.4 OPERATIONAL DEFINITION OF THE TERM

Various terms used in the study have been operationally defined as:

Mental Health: Mental Health is a state of continuous wellbeing, an attribute of a mature human personality and a social value to be guarded and maintained through purposeful living as measured by Mental Health Scale by SushmaTalesara and Akhtar Banoo (2017)

Academic achievement: Academic achievement as the extent to which a learner is profiting from instructions in a given area of learning i.e. achievement is reflected by the extent to which skill or knowledge has been imparted to him. In the present study, academic achievement refers to marks obtained by the first year undergraduate students in their 12th examination.

1.5 OBJECTIVES

The objectives of the study were:

- 1) To study the overall mental health level of first year undergraduate students.
- 2) To study significance gender difference in the mental health of undergraduate students.
- 3) To study significance difference in the mental health of undergraduate student in relation to family background.
- 4) To study significance difference in the mental health of undergraduate student in relation to type of college.
- 5) To study significance difference in the mental health of undergraduate student in relation to residential background.
- 6) To study significance difference in the mental health of undergraduate student in relation to type of program undertaken.
- 7) To find the relationship between mental health and academic achievement of first year undergraduate student.

1.6 HYPOTHESES

- 1) There is no significance difference in overall mental health level of first year undergraduate students.
- 2) There is no significance difference in the mental health of male and female undergraduate students.

- 3) There is no significance difference in the mental health of undergraduate students belonging to nuclear and joint families.
- 4) There is no significance difference in the mental health of undergraduate students studying in government and private degree colleges.
- 5) There is no significance difference in the level of mental health of urban and rural undergraduate students.
- 6) There is no significance difference in the level of mental health of undergraduate student in relation to Program undertaken.
- 7) There is no significance relationship between mental health academic achievements of first year undergraduate students.

1.7 DELIMITATION OF THE STUDY

- This study was confined to first year undergraduate students of degree college of Jammu city.
- Mental Health was measured through one tool i.e. Mental Health Scale developed by Dr. SushmaTalesara and Akhtar Bano (2017).
- The study was delimited to degree colleges of Jammu city affiliated to the University of Jammu.

CHAPTER II

REVIEW OF RELATED LITERATURE

2.1 INTRODUCTION

The literature in any field forms foundation upon which all the future works will be build. Study of related literature implies, locating, reciting, and evaluating reports research as well as reports of the casual observation and opinion that are related to the individual planned research project. All progress, which is traceable today, is the result of efforts undertaken by man, in close succession. Whenever man is confronted with some problem, he seeks guidance from the experiences of others. In fact, there is nothing new except in context of old. It is only with reference to the old that a new thing is learnt. Any research work in any field requires an in depth study of the problem which has been done in the same area. Survey of related literature is an important pre-requisite to actual planning and execution of any research project. It is an exacting task calling for deep insight and clear perspective of the overall field. It helps to eliminate the duplication of what has been done and provides useful direction in formulating hypotheses and helpful suggestions of significant investigation. Research makes us aware of what has already been done and what is being done in a particular field of knowledge. It prepares a suitable background for the investigation. It is helpful in making a straight-forward statement of the problem for investigation to be undertaken. It gives a better application and thorough comprehension of the study being undertaken.

What is required is to include the studies which are absolutely relevant which can lead to fuller and better understanding of the problem. This study serve as available guide and helps in defining the problem, recognizing its significance and also help the researcher in selecting the tools, in making appropriate research design and in effective analysis to arrive at fruitful conclusions. According to Good (1959)," The survey of related literature may provide guiding hypothesis suggestive methods of investigation and comprehensive data for interpretive purpose" Best (1995) pointed out that review of related literature is "A brief summary of previous research and writing of recognized experts provide the researchers familiar with what is already known and with what is still unknown and untested. Since, effective research must be based on past knowledge, this step helps to eliminate the duplication of what has already been done and provides useful hypothesis and helpful suggestions for significance investigation".

2.2 STUDIES RELATED TO MENTAL HEALTH AND ACADEMIC ACHIEVEMENTS

Sinha (1978) studied mental health of university students. The sample consisted of 259 male and 118 female students of Kurukshetra University and 293 male engineering students. Thematic Apperception Test and the Crown and Crisp Middlesex hospital questionnaire were used to collect the data. The boys and girls of university do not differ on emotional security. Emotionally insecure group suffered from neurotic symptoms and syndromes in a greater degree than emotionally secure group. Those with secure emotional health ascribed positive characteristic to the central figure in the stories. Emotional insecurity was more prominent among children from agricultural community. The democratic permissive and rational home atmosphere assessed by the recognition and acceptance of opinion of the children was a potent factor behind emotional security. Stressful situations and emotional insecurity were concomitant variables. Jealous and quarrelsome neighborhood developed emotional insecurity among individuals.

Veereshwar (1979) studied the mental health and adjustment problems of college going girls. A sample of 406 girls in the age group of 18-20 years was taken from the undergraduate students. There was a significant difference in the area of family adjustment between urban and rural girls. Family problems were more unsatisfactory for rural girls. The percentage of cases requiring help was very low for both the groups. The scores of urban and rural girls in the area of education showed a significant difference. The college or educational area was a problem for rural girls more than for urban girls. The social area held problems for both urban and rural girls. The difference between the two was significant i.e. the percentage of rural girls showing unsatisfactory adjustment in social area was higher. Personal emotional problems were shown less by urban girls than by rural girls and the difference was significant. The difference in adjustment of urban and rural girls was not significant in the area of health. Both groups showed quite satisfactory health adjustment.

Prasanna (1989) conducted a study on certain mental health variables associated with high and low achieving adolescents. 1) It studied that all the mental health variables studied discriminated between high and low achievers in most of the groups studies. 2) High achievers had higher mean scores than low achievers for all the 16 mental health variables studied. The findings of the study indicate the need A) avoid threats which caused

disequilibrium in children. B) To provide for guidance – oriented teaching. C) To organize extension lectures for parents and community D) To form parent – teacher association and to encourage pupils to participate in extracurricular activities and institutional guidance.

Devi (1993) studied creativity and academic achievement in relation to mental health of tribal and non-tribal high school students. It was found that only one mental health factor had significant effect on creativity. Extrovert students had been found to be more creative than introverts. The rest of the factors of mental health i.e., insecurity, inferiority, psychoticism, neuroticism, state-anxiety, trait-anxiety and adjustment as single main variables did not show significant difference on creativity of the students. Mean scores showed that female students had higher academic achievement than male students in all these cases. However, sex as a single main variable did not show significant difference on academic achievement when taken with inferiority and neuroticism factors of mental health. The various factors of mental health i.e., insecurity, inferiority, psychoticism, neuroticism, extraversion, state anxiety, trait anxiety and adjustment as single main variables did not show significant difference on academic achievement of students. None of the two factor interactional effects of sex x various factors of mental health, viz., insecurity, inferiority, psychoticism, neuroticism, extraversion, state anxiety, trait anxiety and anxiety adjustment on academic achievement were significant. The correlation coefficients showed that insecurity was not significantly related with academic achievement either for the total sample of the students or for the individual groups i.e., male tribal, female tribal, male non-tribal and female non-tribal students. Inferiority was significantly and negatively related with academic achievement for the total sample of the students as well as for non-tribal male students. But, it did not show significant relationship for tribal male, tribal female and non-tribal female students. Psychoticism was significantly and negatively related with academic achievement of the total sample of the students as well as for female tribal students. However, the relationship was not significant for the other three groups. Neuroticism was significantly and negatively related with academic achievement for the total sample of the students as well as for tribal male and non-tribal male students. Extraversion was significantly and positively related with academic achievement for the total sample of the students as well as for nontribal female students. State anxiety was not significantly related with academic achievement for the total sample of the students as well as for individual groups. However, all these significant coefficients of correlation between academic achievement and various factors of mental health varied from negligible to low.

Bullock (1995) studied intellectual, achievement and mental health evaluation of at risk adolescents. A multidimensional clinical assessment project was conducted on an at-risk adolescent population (n=78) in a public school setting. The focus of the project was on the identification of specific learning disabilities (LD) and attention deficit hyperactivity disorder (ADHD) as they relate to mental health problems and scholastic difficulties. Results indicated that 11.5% of these at-risk students had a Wechsler intelligence scale for children-III full scale IQ less than 70, indicative of a developmental handicap. Of the remaining students, 39% met criteria for one or more specific LD, 30% met criteria for ADHD, and 13% of these at-risk students met criteria for Comorbid ADHD and LD. Those classified as ADHD also exhibited significantly greater levels of psychological distress, evidenced by Minnesota multi-phasic personality inventory-A scale elevations, compared to the non-ADHD students, suggesting that even among their at-risk peers, ADHD students warrant greater attention with regard to psychological problems.

Mortimer (1996) conducted a longitudinal study to examine adolescents' mental health, academic achievement, and behavioural adjustment in relation to work intensity during high school. Data were collected from approximately 1,000 adolescents during a 4- year period, beginning in the subjects' freshman year of high school. Self-administered questionnaires were distributed each year; 93% participation was maintained over the 4-year period. Mental health variables measured included depressive affect, self-esteem, and mastery orientation; two indicators of school achievement were grade point average and time spent doing homework. Adolescents were considered employed if they were working at least once a week outside their home for pay at the time of each survey. Work intensity was measured by hours of employment per week. Analysis showed that 12th grade students who worked fewer than 20 hours per week had significantly higher grade point averages than students who did not work at all. Only in the senior year did students who worked long hours spend less time on homework. No evidence to support the claim that working long hours fosters smoking or school problem behavior was found. However, there was evidence that as work hours increased, alcohol use also rose. No significant relationships between hours of work, psychological outcomes, and indicators of school involvement were found.

D'Amato (2004) developed a theory of positive mental health. In his research, theories and definitions purporting to address mental health were discussed and critiqued, and a new theory of mental health was outlined. The newly developed theory accounted for neglected

areas in past research regarding context and degree when defining psychological health. The new theory stated that positive mental health was reflected in the accuracy of an individual's schemata, in each of the defined schematic components, for internal and external environments.

Ambler (2006) purported to explore the relationship between undergraduate students' mental health and their engagement in the educational experience. Chi square analyses showed that mental health category was independent of gender and parents' highest level of education. ANOVA results also showed that student GPA also did not differ significantly by mental health category.

Singh (2008) studied mental health behavior as a function of SES and residence. A sample of 200 college students of both sexes participated in the study. 100 students were taken from colleges located in the rural areas of Patna district and 100 students were taken from urban areas of the same district. They were administered mental health battery (MHB) and SES scale. The obtained results were analyzed with the help of t-test. It was found that SES particularly lower SES had a negative impact upon sound development of mental health behavior. However rural-urban region was not found to be a significant determiner of mental health behavior. Socio-economic status to which the person belongs has an impact upon various behavioral and emotional conditions of the person, thereby influencing his mental health behavior in long term. However, SES, whose chief feature was poverty, was found to tax mental health behavior because it causes considerable stress for individual and families (Chen et al. 2003, Pestonjee 2006, Landrine et al. 2001)

Warwick et al. (2008) studied mental health and emotional well-being among younger students in further education. Over the last 25 years there has been an increase in reported behavioural and emotional problems among young people. Moreover, students in higher education (HE) were reported to have increased symptoms of mental ill health compared with age-matched controls. Some students in further education (FE) were likely to experience similar difficulties, especially as an increasing number may come from backgrounds that may make them more vulnerable to mental health problems. National policies and guidance highlight the importance of promoting the mental health of young people in general and of students in particular. This exploratory study aimed to identify whether, and in what ways, FE colleges were contributing to younger students' (aged 16-19 years) mental health. Interviews with key informants, a survey of FE colleges in England and five case studies of

individual FE colleges providing specialized mental-health support services to students revealed some evidence of promising and good practice, but this did not appear to be widespread. Given the current range of college settings, no single approach to improving mental health among students was likely to be the answer. Rather, respondents highlighted a number of factors that influence the provision of support services for students: awareness among professionals of the links between students' mental health and their achievement at college; having in place national and college policies and guidance that address mental; building an inclusive college ethos; building leadership at senior and middle manager levels; having accessible in-college and/or external support services; and the provision of professional development opportunities for staff.

Eisenberg et al. (2009) conducted their first study to find out, as to how mental health predicts academic success during college on a random longitudinal sample of students. They found that depression is a significant predictor of lower GPA and higher probability of dropping out, controlling for prior academic performance and other variables. The association between depression and academic outcomes was found strongest among students with a positive anxiety disorder screen.

Kitsantas et al. (2009) studied college students' homework and academic achievement: the mediating role of self-regulatory beliefs. The influence of homework experiences on students' academic grades was studied with 223 college students. Students' self-efficacy for learning and perceived responsibility beliefs were included as mediating variables in this research. The students' homework influenced their achievement indirectly via these two self-regulatory beliefs as well as directly. Self-efficacy for learning, although Review of Related Literature 81 moderately correlated with perceptions of responsibility, predicted course grades more strongly than the latter variable. No gender differences were found for any of the variables. Kitsantas et al. (2009) studied college students' homework and academic achievement: the mediating role of self-regulatory beliefs.

Chinaveh (2010) studied the effectiveness of multiple stress management intervention on academic performance and mental health among undergraduate students and found that after the intervention sessions the academic performance and mental health was improved in the experimental group.

Haddadi (2011) studied the relation between quality of image of God and mental health in college student and found that magnitude of mental health can be studied from the quality of

images of God. The data also revealed that the student having positive attitude for the image of god were higher in mental health while the student who had negative attitude towards image of God'

Chawla (2012) tested the Mental Health and its relation to Academic Achievement. A brief note was added on auto-suggestion to improve Mental Health. With help of Physiological action of Neurons of Brain, mechanism of auto- suggestion was explained. The participants of the study were included sixty students --- 30 boys and 30 girls -- randomly selected from different colleges of Nasik City of age group 21-25 years. Mental Health Inventory by Jagdish and SrivastavaA.K was used for the purpose of data collection. Second semester (yearly) marks of college students were taken. Data analysis was done by using Arithmetic Mean, Standard Deviation, ttest. Findings of the study revealed that female students had better mental health than male students; and mental health score was positively associated with the academic achievement of the students [1].ademic performance and mental health was improved in the experimental group.

McLeod, Uemura and Rohrman (2012) studied adolescent mental health, behavior problems and academic achievement. Results of the study showed that the social consequences of mental health problems are not the inevitable result of diminished functional ability but rather, reflect negative social responses. The results also encourage a broader perspective on mental health by demonstrating that behavior problems increase the negative consequences of more traditional forms of distress.

Beverly (2012) reviewed 25 years of evidence about the relationship of adolescents' academic achievement and health behaviors and found that all six health risk behaviors (violence, tobacco use, alcohol and other drug use, sexual behavior, inadequate physical activity and unhealthy dietary behaviour) showed significantly significant inverse relationship between academic achievement and health risk behavior.

Chhatrala(2013) studied the mental health and emotional intelligence among college students and found that both male and female students differ significantly in mental health and emotional intelligence, also the results revealed that there is very high positive correlation between mental health and emotional intelligence.

Subramanian (2013) aimed to investigate graduate students' achievement in relation to their mental health, emotional maturity and adjustment. The findings revealed that the graduate students are having average level of achievement in commerce subject and have obtained average level of mental health. The influence of homework experiences on students' academic grades was studied with 223 college students. Students' self-efficacy for learning and perceived responsibility beliefs was included as mediating variables in this research. The students' homework influenced their achievement indirectly via these two self-regulatory beliefs as well as directly. Self-efficacy for learning, although Review of Related Literature 81 moderately correlated with perceptions of responsibility, predicted course grades more strongly than the latter variable. No gender differences were found for any of the variables.

A study was conducted by Kaur and Arora (2014) in which they attempted to elaborate the relationship between academic achievement and mental health of adolescents belonging to the Ludhiana and Moga districts of Punjab. The sample of 300 adolescents (150 rural and 150 urban) were taken from various Govt. schools. The results clearly indicated that there is a highly significant relation between academic achievement and certain dimensions of mental health namely overall adjustment and intelligence for the sample as a whole.

Ghasemi and Hosseininassab (2014) conducted a comparative study on Academic Achievement, Mental Health, and Achievement Motivation on normal and quota undergraduate students. The results indicated that there was a difference between the normal and quota students in their achievement motivation. The mean of quota students was more than the mean of normal students. On the other hand, there was a significant difference between normal and quota students in their mental health.

Kaur and Arora (2014) studied academic achievement in relation to mental health of adolescents. 300 adolescents (150 rural and 150 urban) belonging to Ludhiana and Moga were selected for the sample. Results of the study showed 47 positive and significant relation between academic achievement and certain dimensions of mental health.

Thilagavathy (2014) purported to study the relationship between the academic achievement and mental health of adolescents in the Cuddalore District, Tamil Nadu state. The results found that the academic achievement of first year higher secondary students is average. The students of different achievement groups (high, average and low) seem to possess different mental health. A positive and significant relationship was also found between academic achievement and mental health.

2.3 CONCLUSION

Above quoted review of related literature acquaint the researcher with the current knowledge in the field in which she is going to conduct her research. The studies highlight that mental health of the students in late adolescent stage and early adulthood have impact on their academic achievement indicating higher the anxiety lower is the academic achievement. The studies also highlight different factors that influence the mental health of the students

CHAPTER- III

RESEARCH METHODOLOGY

3.1 INTRODUCTION

The procedure followed to reach the accurate solution of the problem is called methodology. The methodology consists of all those procedures and techniques adopted by the researcher to solve the research problem. It includes sampling, selection of tools, and administration of tests, scoring, classification and tabulation of data.

The basic concept of research methodology refers to the way in which researchers conduct their research and how they collect the data they need. Whenever a researcher or organizations need to investigate a particular area of their research dealings, they need to adapt the most suitable research methodology for the job. Research methodology is typically involving a fully breakdown of all the option that have been chosen by a researcher in order to investigate something. This would include the procedures and techniques used to perform the research; as well as any of the terminology and explanations of these methods will be applied effectively.

Research methodology is a systematic way to solve the research problem. It may be understood as a science of studying how research is done scientifically. In it we study the various steps that are generally adopted by a researcher in studying the research problem along with the logic behind them. It is necessary for the researcher to know not only the research methods, techniques but also the methodology. The proper direction in any researcher work yield positive and meaningful results. The direction determined by the research methodologies and strategies, the investigator has adopted for completing the task. This chapter provides the information about population. Sample, which has been the basis of research and provides a picture of the instrument used, collection and procedure employed for tabulation of data and also the statistical techniques used.

The present chapter shows the details of the procedures followed in conducting this piece of research. In addition to this, it also provides a picture of the instruments employed for the analysis of the data. Each study possesses its own problem and size of the sample varies from study to study.

3.2 DESIGN OF THE STUDY

3.2.1 METHOD

Methodology is a system of methods used in a particular area of study and design is a plan produced to show the look and importance of something before it is made. The current study will be a quantitative survey design and makes use of a questionnaire as the primary data collection tool. The use of quantitative design is for the purpose to know about the mental health of the first year undergraduate students.. However, qualitative validation of the results is also important and can be done by recording the answers of some selected respondents. Descriptive survey method will be adopted for the present study

3.2.2 VARIABLES OF THE STUDY

Variable is a trait or a characteristic which gets in its quantity and the change can be measured. In the present study –

A) Independent Variables

The independent variable is the variable the experimenter changes or controls and is assumed to have a direct effect on the dependent variable.

1. Gender: Male and Female
2. Family background: Joint and Nuclear family
3. Type of college: Govt. and Private
4. Residential background: Rural and Urban

B) Dependent Variable

The dependent variable is the variable being tested and measured in an experiment, and is ‘dependent’ on the independent variable.

5. Mental Health
6. Academic achievements

3.2.3 POPULATION

The population can be explain as a comprehensive group of individuals, institutions, objects and so forth with have a common characteristics of the groups distinguish them from other individuals, institutions, objects and so forth. If the population is very large in number and vastly scattered, it was very difficult to contact it because of the limited resources. Moreover, it seemed that it would be a wasteful exercise to carry on the study with the whole population,

when only a small representative sample could furnish the required information and the expected results.

The population of the present study consisted of all the first year undergraduate students of government and private colleges located in Jammu City

3.2.4 SAMPLE OF THE STUDY

The process of selection or the drawing of the accurate representation of a unit, group or sample from a population of interests is called as sampling.

A sample of 200 first year undergraduate students was taken from different colleges located in Jammu city. Random Sampling technique was used in the present study.

Table 3.2.4 Distribution of sample from Government and Private Degree College of Jammu city

S.NO.	NAME OF COLLEGES	NO. OF STUDENTS
1.	Govt. M.A.M. College, Jammu	44
2.	G.G.M. Science College, Jammu	45
3.	Govt. SPMR College, Jammu	47
4.	Trikuta Degree College Nardni-Raipur KotBhalwal Road, Jammu	33
5.	Govt. College for Women Parade Ground Jammu	31
	Total	200

3.3 TOOLS EMPLOYED

For the purpose of accomplishment of objective a standardized tool was used:

- ❖ Mental Health Scale by SushmaTalesara and AkhtarBanoo(2017) was used in the study.

3.4 DATA COLLECTION

The data collected for the study was quantitative in nature. The quantitative data for knowing the mental health of first year undergraduate students was collected by administering the standardized questionnaire.

3.5 ADMINISTRATION OF THE TOOL

The tool was personally administered to the selected 200 students of first year undergraduate students of degree college of Jammu district. Close link was established with the respondents before administering the tool by emphasizing the purpose and the utility of the study. They were told about the future importance of study. Hence the data was collected with great care and sense of responsibility. The first year undergraduate students were informed that their responses will be kept confidential and therefore they should be frank, honest, bold and sincere while answering the question. After providing the necessary instruction the researcher distributed copies to the first year undergraduate Students of degree college of Jammu district. Every attempt was to remove their doubt and difficulties. The first year undergraduate Students were directed to read statement one by one and tick mark the most suitable response for the respective items in the scale. After the responses, test booklets were collected back. In this way the test was administered in all first year undergraduate Students of degree college of Jammu district and thus data were collected.

3.6 STATISTICAL TECHNIQUES EMPLOYED

To analyze the collected data, the following statistical techniques were employed.

- ❖ Percentage
- ❖ t-Test
- ❖ Pearson' Coefficient of Correlation
- ❖ ANOVA

CHAPTER IV

ANALYSIS AND INTERPRETATION OF DATA

4.1 INTRODUCTION

The analysis and interpretation of data involve the objective material in the possession of the researcher and his subjective reactions are desired to drive from the data, the inherent meanings in their relations to the problems. Data analysis is considered to be important step and heart of the research in any research Endeavour. The process of data evaluation with analytical and logical reasoning leads a researcher to examine each of its components. The foremost task before the investigator, after the collection of data, is its compilation and careful tabulation which finally leads us to meaningful inferences. Data analysis is a process of assigning meaning to the collected information to determine the conclusions, significance, and implications of the findings. Data collected by the researcher needs to be scientifically and systematically processed or analyzed so as to achieve the objectives of investigation.

Data analysis refers to the process of generating value from the raw data (Johnson & Christensen 2004). The purpose of the data analysis phase is to transform the data collected into credible evidence about the development of the intervention and its performance. According to the De Ros (1998) Data analysis entails that the analyst breaks down data into constituent parts to obtain answers to research questions and to research hypothesis. Statistical analysis is the mathematical process of gathering, organizing, analyzing and interpreting numerical data and is one of the basic phases of the research process. The aim of this chapter is to analyze the collected data and interpret the findings of the study. Data analysis and interpretation is the process of assigning meaning to the collected information and determining the conclusions, significance and implications of the findings. It involves breaking down existing complex factors into simple parts and putting the parts together in new arrangements for the purpose of interpretation. In this chapter, a detailed analysis of the collected data is made.

4.2 RESULTS AND FINDINGS

4.2.1 RESEARCH OBJECTIVE 1

To study the overall mental health level of first year undergraduate students.

Table 4.2. *Levels of mental health*

S. No.	Score	Level of Mental health	Number& Percentage
1	170 & above	Extremely Good	28(14%)
2	155 to 169	Very Good	43(21.5%)
3	140 to 154	Good	38(19%)
4	120 to 139	Moderate	54(27%)
5	105 to 119	Poor	22(11%)
6	91 to 104	Very Poor	13(6.5%)
7	90 & below	Extremely Poor	2(1%)

The above given table shows the level of mental health of first year undergraduate Students. In this table 14% of the students indicate the extremely good mental health level. 21.5% of the students indicate very good mental health level. 19 % of the students of first year undergraduate students indicate good mental health level 27 % of the students has the moderate mental health level. 11% of the students indicate poor mental health level. 6.5% of the students indicate very poor mental health level and only 1 % of the students indicate extremely poor mental health level.

4.2.2 RESEARCH OBJECTIVE 2: To study significance gender difference in the mental health of undergraduate students.

Table 4.2.2 *Mean Std. Deviation and SEM, and t for the gender differences in the mental health of undergraduate students.*

Gender	N	Mean	Std. Deviation	Std. Error Mean	df	t	Level of significance
Female	93	144.35	25.96	2.70	198	0.97	N.S.
Male	107	140.90	24.72	2.39			

The above table shows that the mean value of Male and Female was 144.35 and 140.90 and the value standard deviation is 25.96 and 24.72. The calculated t-value is .97 less than the table value 1.97 and 2.60) which is not significant at 0.5 level of significance. Hence the t-value is not significant, the Null Hypothesis is accepted. Hence, it is concluded that there is no significant gender difference in the mental health of undergraduate students.

4.2.3 RESEARCH OBJECTIVE 3: To study significance difference in the mental health of undergraduate student in relation to family background.

Table 4.2.3 Mean Std. Deviation and SEM and t for significance difference in mental health in relation to family background.

Family Background	N	Mean	Std. Deviation	Std. Error Mean	df	t	Level of significance
Nuclear	140	142.28	26.92	2.28	198	0.19	N.S.
Joint	60	143.04	21.22	2.74			

The above table shows that the mean value of nuclear and joint family is 142.28 and 143.04 and the value standard deviation is 26.92 and 21.22. The calculated t-value is -.195 (less than the table value 1.97 and 2.60) which is not significant at 0.5 level of significance. Hence the t-value is not significant, the Null Hypothesis is accepted. Hence, it is concluded that there is no significant difference in the mental health of undergraduate students in relation to family background.

4.2.4 RESEARCH OBJECTIVE 4: To study significance difference in the mental health of undergraduate student in relation to type of college.

Table 4.2.4 Mean Std. Deviation and SEM and t for significance difference mental health in relation to type of college.

Type of college	N	Mean	Std. Deviation	Std. Error Mean	df	t	Level of significance
Govt.	167	142.47	25.88	2.01	198	0.41	NS
Private	33	142.67	22.50	3.92			

The above table shows that the mean value of govt. and private colleges is 142.47 and 142.67 and the value standard deviation is 25.88 and 22.50. The calculated t-value is -0.41 (less than the table value 1.97 and 2.60) which is not significant at 0.5 level of significance. Hence the

t-value is not significant, the Null Hypothesis is accepted. Hence, it is concluded that there is no significant difference in the mental health of undergraduate students in relation to type of college.

4.2.5 RESEARCH OBJECTIVE: 5

To study significance difference in the mental health of undergraduate student in relation to residential background.

Table 4.2.5 Mean Std. Deviation and SEM and t for significance difference mental health in relation to residential background.

Residential Background	N	Mean	Std. Deviation	Std. Error Mean	df	t	Level of significance
Rural	81	138.94	24.78	2.76	198	1.65	NS
Urban	119	144.93	25.46	2.34			

The above table shows that the mean value of rural and urban is 138.94 and 144.93 and the value standard deviations are 24.78 and 25.46. The calculated t-value is -1.650 (less than the table value 1.97 and 2.60) which is not significant at 0.5 level of significance. Hence the t-value is not significant, the Null Hypothesis is accepted. Hence, it is concluded that there is no significant difference in the mental health of undergraduate students in relation to residential background.

4.2.6 RESEARCH OBJECTIVE 6

To study the relationship between mental health and academic achievements of first year undergraduate students.

Table 4.2.6 Pearson's Coefficient of Correlation between mental health and academic achievement of first year undergraduate students.

Variables	N	Academic Achievements	Level of significance
Mental Health	200	0.080	Negligible Correlation (Significant at 0.01)

The above table shows that the correlation ($r = 0.080$) between mental health and academic achievements of first year undergraduate students is significant at 0.01 level of significance.

Hence, it can be concluded that there is a significant, extremely poor relationship between mental health and academic achievements. Thus, null hypothesis has been rejected. Hence, it is concluded that there is a significant relationship between mental health and academic achievement of first year undergraduate students.

4.2.7 RESEARCH OBJECTIVE 7

To study significance difference in the mental health of undergraduate student in relation to type program undertaken.

Table 4.2.7 One way ANOVA summary for significance difference in the mental health of undergraduate students in relation to type of program undertaken.

	Sum of Squares	df	Mean Square	F	Sig.
Between groups	3275.52	2	1637.76	2.601	Not Significant
Within groups	124040.49	197	629.65		
Total	127316.00	199			

Type of Program	N	Mean
BA	79	140.06
B.Sc.	52	149.33
B.Com.	69	140.16
Total	200	142.51

The above given table shows that the obtained F value is less than both the 0.01 & 0.05 levels of significance. Thus there is no significance difference among the different programs of first year undergraduate students. Hence a null hypothesis is accepted.

4.3 CONCLUSIONS

It is concluded that there was no significance difference in the mental health of first year undergraduate students in relation to gender, family background, type of college, residential background and type of program but there was significant difference among the first year undergraduate students between the mental health and academic achievements. Positive Correlation was found between the mental health and academic achievements of first year undergraduate students.

CHAPTER V

FINDINGS, CONCLUSIONS, EDUCATIONAL IMPLICATIONS AND SUGGESTIONS FOR FURTHER RESEARCH

5.1 INTRODUCTION

The results section of the research is where a researcher reports the findings of his research study based upon the information gathered as a result of the methodology/methodologies applied for the purpose. After processing the data, obtaining and interpreting the result in previous chapter, the findings have been delimited and discussed in present chapter. These findings can be generalized to the extent of representatives of the sample and methodology employed in the study. In this chapter, the results are discussed to show how these findings are concurrent with some of the empirical studies already conducted in the field. At places, some of the observation did not occur concur with the findings of the same investigators. Keeping the major findings in view, the educational implications of the study have been worked out. As such some suggestions have been given for the further research. This chapter is therefore, devoted to focusing the findings, conclusion, discussion of result of the study and for indicating their implications and suggestions for further studies or research.

Researcher should organize the layout of the result section in the same way as he structured the hypotheses or research questions in the introduction section of his project. This will make it easier for the readers to follow his results. The following findings are drawn after the analysis and interpretations of the data in the present study.

5.2 MAJOR FINDINGS OF THE STUDY

The major findings of the present study are reported in the following sub-sections.

5.2.1 RESEARCH OBJECTIVE: 1

For the fulfillment of first objective, Mental health level of first year undergraduate students has been computed in which 14% students has extremely good mental health level, 21.5 % has very good mental health level, 19 % of students has good mental health level, 27 % students has moderate mental health level 11% students has poor mental health level, 6.5% students has very poor mental health level and 1% students has extremely poor mental health level.

5.2.2 RESEARCH OBJECTIVE: 2

To find out the significant gender difference in the mental health of first year undergraduate students. For the fulfillment of second objective, *t*-test has been computed to analyze the difference between male and female. It is seen that no significant gender difference has been found in overall mental health level of first year undergraduate students.

5.2.3 RESEARCH OBJECTIVE: 3

To find out the significant difference in the mental health of undergraduate students in relation to family background. In this objective the *t*-test was computed and the results shows that there is no significant difference in the mental health of undergraduate students in relation to family background.

5.2.4 RESEARCH OBJECTIVE: 4

To find out the significant difference in the mental health of undergraduate students in relation to type of college. For the fulfillment of fourth objective, the *t*-test was computed and the result shows that there is no significant difference in the mental health of undergraduate students in relation to type of college.

5.2.5 RESEARCH OBJECTIVE: 5

To find out the significance difference in the mental health of undergraduate student in relation to residential background. For the fulfillment of fifth objective, the *t*-test was computed and the result shows that there is no significant difference in the mental health of first year undergraduate students in relation to residential background.

5.2.6 RESEARCH OBJECTIVE: 6

To find out the relationship between mental health and academic achievements of first year undergraduate students. For the fulfillment of sixth objective, Pearson's coefficient of correlation was computed between mental health and academic achievements, the result shows that there is significant difference between the mental health and academic achievements of first year undergraduate students.

5.2.7 RESEARCH OBJECTIVE: 7

To find out the significance difference in the mental health of first year undergraduate student in relation to type of program undertaken. For the fulfillment of seventh objective, ANOVA was computed ,In this study the obtained F-value is less than both the 0.01 & 0.05 levels of significance. Thus there is no significance difference among the different programs of first year undergraduate students.

5.3 CONCLUSIONS AND DISCUSSIONS OF RESEARCH

The following conclusions are drawn after the analysis and interpretation of data in the present study:-

1. There was no significance difference in overall mental health level of first year undergraduate students.
2. The present study revealed that there was no significant gender differences in the mental health of first year undergraduate students.
3. There was no significant difference in the mental health of first year undergraduate students in relation to family background.
4. No significant difference has been found in the mental health of first year undergraduate students in relation to type of college.
5. There was no significant difference in the mental health of first year undergraduate students in relation to residential background.
6. The result shows that there was significant difference between the mental health and academic achievements of first year undergraduate students.
7. In this study the obtained F-value is less than both the 0.01 & 0.05 levels of significance. Thus there was no significance difference among the different programs of first year undergraduate students.

5.3 EDUCATIONAL IMPLICATION

- 1.This study will be helpful to educational administrators and principals of colleges to improve the mental health of students.
2. Provision for activities like yoga, exercise, meditation should be organized in the undergraduate colleges for the students in order to promote their overall positive mental health and well-being.

3. Co-curricular activities should be an integral part of curriculum to discharge the pent-up feelings of students and to use their energy in a healthy way.
4. Guidance and counseling services should be provided by the colleges to help students to improve their mental health.
5. There should be orientation programs regarding mental health in order to improve academic performance as well as problem solving ability among students.

5.4 SUGGESTIONS FOR FURTHER RESEARCH

The present study has brought out how the students of first year undergraduate have mental health and academic achievement. It has examined the impact of gender, family background, type of college, residential background, type of program undertaken and relationship between mental health and academic achievement. These results suggest further research to be carried out as follows:

1. A similar study can be conducted on students studying at higher secondary level or even at university level.
2. The study can be further done with other higher educational institutions and variables such as type of family, emotional maturity etc
3. The present study covers only representative sample of the 200 first year graduate students. The study can be replicated on a large sample in order to get a better understanding of variables under study.
4. A similar research can be conducted in other districts of J&K and neighboring states.

SUMMARY

INTRODUCTION

Concept of Mental Health

Mental health refers to our cognitive, behavioral, and emotional wellbeing – it is all about how we think, feel, and behave. The term ‘mental health’ is sometimes used to mean an absence of a mental disorder. Mental health can affect daily life, relationships, and even physical health. Mental health also includes a person’s ability to enjoy life – to attain a balance between life activities and efforts to achieve psychological resilience.

Mental health is the level of psychological well-being or an absence of mental illness. It is the state of someone who is "functioning at a satisfactory level of emotional and behavioural adjustment".^[1] From the perspectives of positive psychology or of holism, mental health may include an individual's ability to enjoy life and to create a balance between life activities and efforts to achieve resilience. According to the U.K. Surgeon Journal (1999), mental health is the successful performance of the mental function, resulting in productive activities, fulfilling relationships with other people, and providing the ability to adapt to change and cope with adversity. The term mental illness refers collectively to all diagnosable mental disorders—health conditions characterized by alterations in thinking, mood, or behaviour associated with distress or impaired functioning.

Mental health is an integral and essential component of health. The WHO constitution states: "Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity." An important implication of this definition is that mental health is more than just the absence of mental disorders or disabilities.

Mental health is a state of well-being in which an individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and is able to make a contribution to his or her community. Mental health is fundamental to our collective and individual ability as humans to think, emote, interact with each other, earn a living and enjoy life. On this basis, the promotion, protection and restoration of mental health can be regarded as a vital concern of individuals, communities and societies throughout the world.

In 1948, the WHO was created and in the same year the first International Congress on Mental Health took place in London. At the second session of the WHO's Expert Committee on Mental Health (September 11-16, 1950), "mental health" and "mental hygiene" were defined as follows ³: "Mental hygiene refers to all the activities and techniques which encourage and maintain mental health. Mental health is a condition, subject to fluctuations due to biological and social factors, which enables the individual to achieve a satisfactory synthesis of his own potentially conflicting, instinctive drives; to form and maintain harmonious relations with others; and to participate in constructive changes in his social and physical environment."

According to the World **Health Organization (WHO)**, mental health is "a state of well being in which the individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully and is able to make a contribution to his or her community."

The WHO stresses that mental health "is not just the absence of mental disorder." This definition while representing a substantial progress with respect to moving away from the conceptualization of mental health as a state of absence of mental illness raises several concerns and lends itself to potential misunderstandings. In fact wellbeing is a key aspect of mental health is difficult to reconcile with the many challenging life situation in which well being may even be unhealthy most people would consider as mentally unhealthy an individual experiencing a state of well being while killing several persons during a war action, and would regard as healthy a person feeling desperate after being fired from his/her job in a situation in which occupational opportunities are scarce.

People in good mental health are often sad, unwell angry or unhappy, and this is part of a fully lived life for a human being. In spite of this, mental health has been often conceptualized as a purely positive effect, marked by feelings of happiness and sense of mastery over the environment.

Factors affecting mental health

Good mental health is more than just the absence of mental illness. It can be seen as a state of mental health that allows one to flourish and fully enjoy life.

Everyone experiences down times in life. The ability to cope with negative experiences varies greatly from one person to another and, in large part, determines whether people enjoy their lives.

Some of the factors that affect the mental health of youth are as follows: Self-esteem, Feeling loved, Confidence and Family breakup or loss

Concept of Academic achievement

Academic achievement is the outcome of education the extent to which the student teacher or institution has achieved their educational goals. Academic achievement is commonly measured by examination or continuous assessment but there is no general agreement on how it is best tested or which aspects is most important procedural knowledge such as skills or declarative knowledge such as facts. Individual differences in academic performance have been linked to differences in intelligence and personality. Student with higher mental ability as demonstrated by IQ tests and those who are higher in conscientiousness tend to achieve highly in academic settings. A recent meta-analysis suggested that mental curiosity (as measured by typical intellectual engagement) has an important influence on academic achievement in addition to intelligence and conscientiousness. An academic achievement is something you do or achieve at school, college or university in class, in a laboratory, library of field work. It does not include sport or music.

In academic achievement nature and nurture play a combined role. Nature implies certain innate or inherited factors such as intelligence, potentiality and personality while nurture contributing such things as may be found in homes, school, neighbourhood and the wide society. To ascertain the relative importance of nature and nurture is an arduous task. It endeavors to pinpoint such important factors as would give the reader a better understanding and insight into school and failure. Academic achievement has been one of the most important goals of educational process. It is also a major goal, which every individual is expected to perform in all cultures.

Crow and Crow (1969) defined "academic achievement as the extent to which a learner is profiting from instructions in a given area of learning i.e. achievement is reflected by the extent to which skill or knowledge has been imparted to him".

Hence academic achievement occupies a very important place in education as well as in the learning process. Academic achievement is of paramount importance in the present socioeconomic and cultural context.

Mental health problem will affect the academic performances student and it will go

From bad to worse if the students do not receive any treatment. The negative effect of mental Health not only on the academic side, but also on their daily life. The relation between mental health and Academic performance has been reported variously in different studies. The present research aims to study the relation between mental health and Academic Performance of First year under graduate students.

B. NEED AND SIGNIFICANCE OF THE STUDY

Mental health is very important for every human being Mental health problems and illnesses are clinically significant patterns of behavior or emotions that are associated with some level of distress, suffering, or impairment in one or more areas such as school, work, social and family interactions, or the ability to live independently (Canadian Psychiatric Association, 2004). As awareness of the importance of mental health increases, more and more researches are being conducted to relate the importance of mental health with the learning process. Among others, the American College Health Association, in a survey in 2015, found that students with psychological distress received lower grades in their exams or courses, and experienced a significant disruption in completing their theses, dissertations and/or practicum tasks. Finally, mental health is also instrumental in allowing students to accept negative feedback with a positive mindset. Poor mental health may lead to the student being skeptical toward understanding a different perspective or in interpreting criticism. This type of individual is generally protective and defensive of his thoughts and does not take opinions from a third party easily. Hence, in promoting better mental health among their students, teachers in this situation can try different tactics. For instance, they could personally convey their feedback to the individual students instead of sharing it in front of the whole classroom. The latter may be perceived by the students as an act of exposing their weaknesses, which may also cause a negative impact in their lives, such as lower self-esteem. In the following literature review, first-generation college students will be compared to continuing-generation college students in relation to the challenges that affect their mental health and their academic performance. Many of the studies conducted in higher education show that first-generation

students are more likely to: experience symptoms of depression, higher levels of stress, lower levels of life satisfaction, and a decreased sense of belonging in higher education institutions. There can be a possible correlation between mental health and academic performance of students.

C. OBJECTIVES

The objectives of the study are:

- 1) To study the overall mental health level of first year undergraduate students.
- 2) To study significance gender difference in the mental health of undergraduate students.
- 3) To study significance difference in the mental health of undergraduate student in relation to family background.
- 4) To study significance difference in the mental health of undergraduate student in relation to type of college.
- 5) To study significance difference in the mental health of undergraduate student in relation to residential background.
- 6) To study significance difference in the mental health of undergraduate student in relation to type of program undertaken.
- 7) To find the relationship between mental health and academic achievement of first year undergraduate student.

D. HYPOTHESES

- 1) There will be no significance difference in overall mental health level of first year undergraduate students.
- 2) There will be no significance difference in the mental health of male and female undergraduate students.
- 3) There will be no significance difference in the mental health of undergraduate students belonging to nuclear and joint families.
- 4) There will be no significance difference in the mental health of undergraduate students studying in government and private degree colleges.
- 5) There will be significance difference in the level of mental health of urban and rural undergraduate students.
- 6) There will be significance difference in the level of mental health of undergraduate student in relation to Program undertaken.

7) There will be no significance relationship between mental health academic achievements of first year undergraduate students.

E. METHOD

Methodology is a system of methods used in a particular area of study and design is a plan produced to show the look and importance of something before it is made. The current study will be a quantitative survey design and makes use of a questionnaire as the primary data collection tool. The use of quantitative design is for the purpose to know about the mental health of the first year undergraduate students.. However, qualitative validation of the results is also important and can be done by recording the answers of some selected respondents. Descriptive survey method will be adopted for the present study.

F. POPULATION

The population of the present study consisted of the entire first year undergraduate student who are studying in the degree colleges of Jammu district. The population being very large in number and vastly scattered, it was very difficult to contact it because of the limited resources. Moreover, it seemed that it would be a wasteful exercise to carry on the study with the whole population, when only a small representative sample could furnish the required information and the expected results.

- ❖ The population for the study comprises Population of the present study consists of all the first year undergraduate students of government and private colleges located in Jammu City.

G. SAMPLE

- ❖ A sample of 200 first year undergraduate students has been taken from different colleges located in Jammu city. Random Sampling technique was used in the present study.

H. TOOL EMPLOYED

For the purpose of accomplishment of objective a standardized tool was used :

- ❖ Mental Health Scale by Sushma Talesara and Akhtar Banoo 2017 has been used in the study.

I. STATISTICAL TECHNIQUES EMPLOYED

To analyze the collected data, the following statistical techniques will be employed.

- ❖ Percentage
- ❖ t-Test
- ❖ Pearson' Coefficient of Correlation
- ❖ ANOVA

J. RESULTS

RESEARCH OBJECTIVE 1

To study the overall mental health level of first year undergraduate students.

Table 1. *Levels of mental health*

S. No.	Score	Level of Mental health	Number& Percentage
1	170 & above	Extremely Good	28(14%)
2	155 to 169	Very Good	43(21.5%)
3	140 to 154	Good	38(19%)
4	120 to 139	Moderate	54(27%)
5	105 to 119	Poor	22(11%)
6	91 to 104	Very Poor	13(6.5%)
7	90 & below	Extremely Poor	2(1%)

RESEARCH OBJECTIVE 2: To study significance gender difference in the mental health of undergraduate students.

Table 2 Mean Std. Deviation and SEM, and *t* for the gender differences in the mental health of undergraduate students.

Gender	N	Mean	Std. Deviation	Std. Error Mean	df	t	Level of significance
Female	93	144.35	25.96	2.70	198	0.97	N.S.
Male	107	140.90	24.72	2.39			

RESEARCH OBJECTIVE 3: To study significance difference in the mental health of undergraduate student in relation to family background.

Table 3 Mean Std. Deviation and SEM and *t* for significance difference in mental health in relation to family background.

Family Background	N	Mean	Std. Deviation	Std. Error Mean	df	t	Level of significance
Nuclear	140	142.28	26.92	2.28	198	0.19	N.S.
Joint	60	143.04	21.22	2.74			

RESEARCH OBJECTIVE 4: To study significance difference in the mental health of undergraduate student in relation to type of college.

Table 4 Mean Std. Deviation and SEM and *t* for significance difference mental health in relation to type of college.

Type of college	N	Mean	Std. Deviation	Std. Error Mean	df	t	Level of significance
Govt.	167	142.47	25.88	2.01	198	0.41	NS
Private	33	142.67	22.50	3.92			

RESEARCH OBJECTIVE: 5

To study significance difference in the mental health of undergraduate student in relation to residential background.

Table 5 Mean Std. Deviation and SEM and t for significance difference mental health in relation to residential background.

Residential Background	N	Mean	Std. Deviation	Std. Error Mean	df	t	Level of significance
Rural	81	138.94	24.78	2.76	198	1.65	NS
Urban	119	144.93	25.46	2.34			

RESEARCH OBJECTIVE 6

To study the relationship between mental health and academic achievements of first year undergraduate students.

Table 6 Pearson's Coefficient of Correlation between mental health and academic achievement of first year undergraduate students.

Variables	N	Academic Achievements	Level of significance
Mental Health	200	0.080	Negligible Correlation (Significant at 0.01)

RESEARCH OBJECTIVE 7

To study significance difference in the mental health of undergraduate student in relation to type program undertaken.

Table 7 One way ANOVA summary for significance difference in the mental health of undergraduate students in relation to type of program undertaken.

	Sum of Squares	df	Mean Square	F	Sig.
Between groups	3275.52	2	1637.76	2.601	Not Significant
Within groups	124040.49	197	629.65		
Total	127316.00	199			

Type of Program	N	Mean
BA	79	140.06
B.Sc.	52	149.33
B.Com.	69	140.16
Total	200	142.51

K. FINDINGS OF THE STUDY

The major findings of the present study are reported in the following sub-sections.

- For the fulfillment of first objective, Mental health level of first year undergraduate students has been computed in which 14% students has extremely good mental health level, 21.5 % has very good mental health level, 19 % of students has good mental health level, 27 % students has moderate mental health level 11% students has poor mental health level, 6.5% students has very poor mental health level and 1% students has extremely poor mental health level.
- For the fulfillment of second objective, *t*-test has been computed to analyze the difference between male and female. It is seen that no significant gender difference has been found in overall mental health level of first year undergraduate students.
- In this objective the *t*-test was computed and the results show that there is no significant difference in the mental health of undergraduate students in relation to family background.
- For the fulfillment of fourth objective, the *t*-test was computed and the result shows that there is no significant difference in the mental health of undergraduate students in relation to type of college.
- For the fulfillment of fifth objective, the *t*-test was computed and the result shows that there is no significant difference in the mental health of first year undergraduate students in relation to residential background.
- For the fulfillment of sixth objective, Pearson's coefficient of correlation was computed between mental health and academic achievements, the result shows that there is significant difference between the mental health and academic achievements of first year undergraduate students.

- For the fulfillment of seventh objective, ANOVA was computed ,In this study the obtained F-value is less than both the 0.01 & 0.05 levels of significance. Thus there is no significance difference among the different programs of first year undergraduate students.

L. CONCLUSIONS AND DISCUSSIONS OF RESEARCH

The following conclusions are drawn after the analysis and interpretation of data in the present study:-

1. There was no significance difference in overall mental health level of first year undergraduate students. Therefore, the Null hypothesis was accepted.
2. The present study revealed that there was no significant gender difference in the mental health of first year undergraduate students. Therefore, the Null hypothesis was accepted.
3. There was no significant difference in the mental health of first year undergraduate students in relation to family background. Therefore, the Null hypothesis is accepted.
4. No significant difference has been found in the mental health of first year undergraduate students in relation to type of college. Therefore, the Null hypothesis was accepted.
5. There is no significant difference in the mental health of first year undergraduate students in relation to residential background. Therefore, the Null hypothesis was accepted.
6. The result shows that there is significant difference between the mental health and academic achievements of first year undergraduate students. Therefore the, Null hypothesis was rejected.
7. In this study the obtained F-value is less than both the 0.01 & 0.05 levels of significance. Thus there is no significance difference among the different programs of first year undergraduate students. Hence a null hypothesis was accepted.

M. EDUCATIONAL IMPLICATION

1. This study will be helpful to educational administrators and principals of colleges to improve the mental health of students.

2. Provision for activities like yoga, exercise, meditation should be organized in the undergraduate colleges for the students in order to promote their overall positive mental health and well-being.
3. Co-curricular activities should be an integral part of curriculum to discharge the pent-up feelings of students and to use their energy in a healthy way.
4. Guidance and counseling services should be provided by the colleges to help students to improve their mental health.
5. There should be orientation programs regarding mental health in order to improve academic performance as well as problem solving ability among students.

N. SUGGESTIONS FOR FURTHER RESEARCH

The present study has brought out how the students of first year undergraduate have mental health and academic achievement. It has examined the impact of gender, family background, type of college, residential background, type of program undertaken and relationship between mental health and academic achievement. These results suggest further research to be carried out as follows:

1. A similar study can be conducted on students studying at higher secondary level or even at university level.
2. The study can be further done with other higher educational institutions and variables such as type of family, emotional maturity etc
3. The present study covers only representative sample of the 200 first year graduate students. The study can be replicated on a large sample in order to get a better understanding of variables under study.
4. A similar research can be conducted in other districts of J&K and neighboring states.

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APPENDIX-1

Mental Health Scale by Dr.SushmaTalesara and Akhtar Bano (2017)

 T. M. Regd. No. 564838 Copyright Regd. No. © A-73256/2005 Dt. 13.5.05 Dr. Sushma Talesara (Udaipur) Dr. Akhtar Bano (Udaipur)	Consumable Booklet of MHS-TSBA (English Version)																														
Please fill in the following entries : Date Name Father's Name Date of Birth Gender : Male ☐ Female ☐ Residence Family : Nuclear ☐ Joint ☐ Brother / Sister : Younger ☐ Elder ☐ Area : Urban ☐ Rural ☐ Any Defect : Physical ☐ Economic ☐ Social ☐ <i>Type of College: Govt./Private, Type of programme: B.A/B.Sc./B.Com.</i>																															
INSTRUCTIONS On the following pages have 54 statements which are related to your life. Each individual have his/her unique life therefore no answer is wrong. Every statement has five option, viz., Always, Frequently, Occasionally, Rarely and Never and put a tick mark ☒ at the option which match to your nature. You are requested to answer all the questions. There is no boundation of time. Your answers will be kept confidential.																															
Scoring Table <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Sr. No.</th> <th>Dimension</th> <th>Raw Score</th> <th>z-Score</th> <th>Grade</th> <th>Level of Mental Health</th> </tr> </thead> <tbody> <tr> <td>I.</td> <td>School</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>II.</td> <td>Home</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>III.</td> <td>Peers</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td>Full Scale</td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>		Sr. No.	Dimension	Raw Score	z-Score	Grade	Level of Mental Health	I.	School					II.	Home					III.	Peers						Full Scale				
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2 | Consumable Booklet of MHS-TSBA

Sr. No.	STATEMENTS	Always	Fre- quently	Occasi- nally	Rarely	Never	SCORE
1.	I am nagged for my studies again & again.	☐	☐	☐	☐	☐	
2.	My parents give more love and affection to my brother/sister.	☐	☐	☐	☐	☐	
3.	I get frightened even without a reason.	☐	☐	☐	☐	☐	
4.	I get less sleep at night.	☐	☐	☐	☐	☐	
5.	My sleep often gets interrupted in night.	☐	☐	☐	☐	☐	
6.	I feel stressed when my sleep breaks at nights.	☐	☐	☐	☐	☐	
7.	I get headache when I continuously think of something.	☐	☐	☐	☐	☐	
8.	I feel suffocated.	☐	☐	☐	☐	☐	
9.	My relatives keep questioning me when I go out of home.	☐	☐	☐	☐	☐	
10.	Everyone criticizes me.	☐	☐	☐	☐	☐	
11.	I like being silent.	☐	☐	☐	☐	☐	
12.	When my friends are laughing I feel they are making fun of me.	☐	☐	☐	☐	☐	
13.	I am not able to concentrate while studying.	☐	☐	☐	☐	☐	
14.	I forget fast what I learn.	☐	☐	☐	☐	☐	
15.	I often feel tensed and worried.	☐	☐	☐	☐	☐	
16.	I get scary dreams.	☐	☐	☐	☐	☐	
17.	I get dreams of performing badly in examination.	☐	☐	☐	☐	☐	

Total Score Page 2

Sr. No.	STATEMENTS	Always	Fre- quently	Occasi- nally	Rarely	Never	SCORE
18.	I faced many difficulties in childhood.	☐	☐	☐	☐	☐	
19.	I forget what is studied during examination.	☐	☐	☐	☐	☐	
20.	Some children tease me.	☐	☐	☐	☐	☐	
21.	My friends talk about disappointing things.	☐	☐	☐	☐	☐	
22.	I feel that I am sick.	☐	☐	☐	☐	☐	
23.	I am lost in myself.	☐	☐	☐	☐	☐	
24.	People want to harm me.	☐	☐	☐	☐	☐	
25.	Life is dull/boring.	☐	☐	☐	☐	☐	
26.	My capacity to work is reducing.	☐	☐	☐	☐	☐	
27.	My family accuses me for the wrong even when it is not my mistake.	☐	☐	☐	☐	☐	
28.	I like to stay alone.	☐	☐	☐	☐	☐	
29.	I face hindrances in all my work.	☐	☐	☐	☐	☐	
30.	I am curious to know all things.	☐	☐	☐	☐	☐	
31.	I am fully confident.	☐	☐	☐	☐	☐	
32.	I answer questions asked by teacher with enthusiasm.	☐	☐	☐	☐	☐	
33.	I wish to talk to my relatives.	☐	☐	☐	☐	☐	
34.	I like watching films.	☐	☐	☐	☐	☐	
35.	I freely communicate with my family members.	☐	☐	☐	☐	☐	
36.	I like to go out for excursions.	☐	☐	☐	☐	☐	

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Sr. No.	STATEMENTS	Always	Fre- quently	Occasi- nally	Rarely	Never	SCORE
37.	I like to take part in any activity at my home.	☐	☐	☐	☐	☐	
38.	I get sufficient love and affection from my family.	☐	☐	☐	☐	☐	
39.	I like humour and have fun.	☐	☐	☐	☐	☐	
40.	I have many friends.	☐	☐	☐	☐	☐	
41.	I like to read books.	☐	☐	☐	☐	☐	
42.	I finish my work on time which is given to me in school.	☐	☐	☐	☐	☐	
43.	I am well organized.	☐	☐	☐	☐	☐	
44.	I like to look smart.	☐	☐	☐	☐	☐	
45.	I feel excited to do new things.	☐	☐	☐	☐	☐	
46.	I wish to celebrate my birthday with lot of fun.	☐	☐	☐	☐	☐	
47.	Festivals make me happy.	☐	☐	☐	☐	☐	
48.	If something hurts me, I immediately clarify it with that persons.	☐	☐	☐	☐	☐	
49.	My friends love me a lot.	☐	☐	☐	☐	☐	
50.	I like to go to school.	☐	☐	☐	☐	☐	
51.	I like to participate in co-curricular activities.	☐	☐	☐	☐	☐	
52.	I work wholeheartedly.	☐	☐	☐	☐	☐	
53.	My parents respect my thoughts & feelings.	☐	☐	☐	☐	☐	
54.	I think I am fortunate / lucky.	☐	☐	☐	☐	☐	

Total Score Page 4