

## Gender differences in Mental Health, Perceived Parenting style and Academic Stress of Indian adolescents

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### Abstract

*This study was conducted to examine the gender differences in perceived democratic, perceived autocratic, perceived accepting, perceived rejecting parenting styles, academic stress and mental health of the adolescents of Punjab. A total of 200 (male = 117 and female = 83) students participated in the study and filled the questionnaires of academic stress, democratic, autocratic and accepting parenting styles and mental health. Independent sample 't' was employed to test the differences. Results of the study show that there exists a significant gender difference in the scores of perceived democratic, perceived autocratic, perceived accepting, perceived rejecting parenting styles and mental health of the adolescents. Implications for school management, counsellor, teachers and parents are discussed.*

**Key words:** gender differences, perceived parenting styles, academic stress, mental health

### Introduction

Adolescence is a sensitive developmental period when the personal identity is formed and the foundation created for later mental health. According to the psychoanalytic theory, the adolescence period seen as a transition from childhood to adulthood, is a more problematic period than other periods of life (Lok, Bademli & Canbaz, 2017). In 2002, World Health Organisation (WHO) passed its first Gender Policy, acknowledging the gender issue as important on its own. A gender approach to mental health provides guidance to the identification of appropriate responses from the mental healthcare system, as well as from public policy (Affi, 2007). According to World Health Organization (WHO) (2005), 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". Although it is often overlooked, mental health is as important to a person's well-being as their physical health, particularly during the turbulent years of adolescence. Hales and Hales (1995) also stated that mental health is the capacity to think rationally and sensibly and to cope with the changes, stresses, disturbances

and losses that occur in all lives, in a way that allows emotional stability and growth. Academic stress is anything that forces an additional demand on a person's ability to cope frequently with something that is new and different in academics (Firman, 1992). It is a form of stress that stems from academic factors such as substantial school schedule, impractical anticipation and demands of parents and teachers, low scholarly performance, poor study habits and not having sufficient time to manage school's various needs (Banerjee, 2011). Adolescents with better mental health are physically healthier, demonstrate more socially positive behaviors and engage in fewer risky behaviors (Resnick, 2000).

Adolescent's gender plays the role of determinant of parenting behaviour and is one of the significant factors which help to reveal why parents behave the way they do and subsequent impact on their adolescents' outcome (Belsky, 1984). According to adolescents' self-reports, parents restrict girls' more than boys' behaviours and have lower expectations for girls' than for boys' competencies and achievements (Hoeksema, 2001). Parenting plays a crucial role in addressing developmental challenges, academic pressures, family conflicts, abuse, and negative peer influence (Akurathi, 2020). A child's personality is influenced by home environment as well as by the parenting styles of parents. Parenting styles are defined as the behaviour, attitudes, and values parents used to determine how they interact with their children (Mussen, 1983). On the basis of this there are four parenting styles that may be classified as authoritarian, authoritative, permissive and uninvolved (Jago, Davison, Brockman & Page, 2011). Authoritarian/Autocratic, Authoritative/Democratic, and the Permissive/Laissez-faire were first introduced during a study conducted by Baumrind (1966). Chauhan and Agarwal (2022) found that parenting styles significantly impact adolescents mental health, irrespective of gender. Akurathi (2020) discovered a strong relationship between different types of parenting styles and various aspects of psychological well-being. The study also revealed variations in parenting styles and psychological well-being among different stages of adolescence. Positive effects were observed in mother and father, utopian expectation and realism, as well as lenient standards and moralism styles, for both boys and girls. Negative impacts were found in fathers and mothers rejecting versus accepting parenting styles, as well as faulty role expectations, leading to anxiety and average energy levels among adolescent boys and girls. Rani and Kour (2009) in a study revealed significant gender disparities in perceived accepting and rejecting parenting styles, while no significant gender differences were found in academic stress, perceived democratic and autocratic parenting styles, and adolescent self-concept scores. Subramani and Kadiravan

(2017) found that students in private schools faced more academic stress compared to government school students. However, private school students had better mental health status than their counterparts. The study also established a significant connection between academic stress and the mental health of high school students.

### **Manodarpan a Government initiative- its view over mental health and academic stress**

Keeping in view, the growing stress among students and its impact on mental health, Manodarpan is an initiative launched by the Government of India to address mental health and well-being issues among students during the COVID-19 pandemic. It aims to provide psychosocial support and guidance to students, parents, and teachers to cope with the challenges posed by the pandemic and minimize academic stress. Some key objectives of the Manodarpan initiative are:- Promoting mental health awareness, Providing online resources and helpline services, Training programs for teachers and school administrators, Collaborations with mental health professionals, Focus on vulnerable groups, and Integration of mental health in school curriculum (Mental Health and Well-being of School Students, A Survey- 2022).

### **Indian modules on School Health & Wellness**

For preserving the mental health of the adolescents, modules and programmes on school health and wellness have also been formulated like:

**Nurturing Mental Health and Well-being in Schools (NMHWS):** This module, developed by the National Institute of Mental Health and Neurosciences (NIMHANS) in collaboration with the Ministry of Human Resource Development (MHRD), focuses on promoting mental health and well-being in schools. It offers training programs for teachers, school counsellors, and administrators to enhance their understanding of mental health issues and develop strategies to support students' well-being.

**School Health Programme (SHP):** The School Health Programme is an initiative by the Ministry of Health and Family Welfare in India. It aims to promote the health and well-being of school children through various interventions, including health screenings, immunizations, health education, and provision of basic health services in schools. The program addresses physical, mental, and social aspects of health.

Comprehensive School Health Program (CSHP): The CSHP is an integrated school health program implemented by the National Health Mission (NHM) in collaboration with the Ministry of Health and Family Welfare. It focuses on promoting health, hygiene, and nutrition among school children. The program includes health education, health screenings, hygiene promotion, provision of safe drinking water and sanitation facilities, and other health interventions.

Adolescent Education Program (AEP): The Adolescent Education Program, initiated by the National Council of Educational Research and Training (NCERT), addresses the specific health and well-being needs of adolescents. The program includes modules on reproductive health, mental health, substance abuse prevention, life skills, and career guidance. It aims to provide age-appropriate information and support to students during their adolescence.

These modules and programs highlight the importance of school health and wellness and provide guidance and resources for schools and educators to promote the overall well-being of students. Schools can explore these modules and programs to enhance their efforts in creating a healthy and supportive environment for their students.

### **Purpose of the study**

To compare the mean differences in academic stress, perceived parenting styles and mental health in relation to gender

## **METHOD**

### **PARTICIPANTS**

The participants in the study were 200 adolescents (Boys and girls) of co-educational institutions studying in IX classes from private and government senior secondary schools of Amritsar city. Random sampling technique was used to select the sample.

### **MATERIALS**

The following tools were used to collect the data:

- Mental health Battery by Singh and Gupta (2011)
- Children's Perception of Parenting Styles by Pyari and Kalra (2005)
- Academic stress- Bisht Battery of stress scales (2005)

## Hypotheses

- There exists no significant difference between mean scores of mental health of adolescents in relation to their gender.
- There exists no significant difference between mean scores of perceived parenting style (democratic, autocratic, accepting, rejecting) of adolescents in relation to their gender.
- There exists no significant difference between mean scores of academic stress of adolescents in relation to their gender.

## Procedure

The researcher explained and administered the questionnaires to the participants in their schools. The participants provided the best of their cooperation and returned the completed questionnaires after answering.

## Data Analysis and Result

Independent sample 't' was employed to test the gender differences among the variables of this study.

**Table No. 1**

**N, Mean, Standard Deviation, t-value of scores of mental health, perceived democratic, perceived autocratic, perceived accepting and perceived rejecting parenting styles and academic stress in relation to gender**

Variable	Gender	N	Mean	Std. Deviation	t
<b>Mental Health</b>	male	117	88.84	9.960	2.286**
	female	83	85.47	10.682	
<b>Perceived Democratic</b>	male	117	27.03	4.655	2.523**
	female	83	25.30	4.968	
<b>Perceived Autocratic</b>	male	117	24.86	4.560	2.152**
	female	83	26.35	5.148	
<b>Perceived Accepting</b>	male	117	29.65	4.223	14.86**
	female	83	21.17	3.598	
<b>Perceived Rejecting</b>	male	117	23.46	3.757	4.316**

<b>Rejecting</b>	female	83	25.80	3.783	
<b>Academic</b>	male	117	304.41	67.373	
<b>Stress</b>	Female	83	367.88	70.983	6.420**

**\*\* Significant at 0.05 level of significance**

Individually the 't' test for Academic Stress, perceived Parenting Styles and Mental health for male and female is computed. The results are presented in the Table 1.

The results in table 1 clearly show that the t- value for mental health of adolescents came out to be 2.286 which is significant at 0.05 level. The mean scores on mental health of the male adolescent students and female adolescent students are 88.84 and 85.47 respectively. It indicates that the male adolescent students are better than female adolescent students in their mental health. Thus, the hypothesis that *"There exists no significant difference between mean scores of adolescents in mental health in relation to their gender"* was rejected.

The t- value for perceived democratic parenting style of adolescents came out to be 2.523 which are significant at 0.05 level. The mean scores on perceived democratic parenting style of the male adolescent students and female adolescent students are 27.03 and 25.30 respectively. It indicates that male adolescent students perceive their parents as more of democratic as compared to female adolescent students. Thus, the hypothesis that *"There exists no significant difference between mean scores of adolescents in perceived democratic parenting style in relation to their gender"* was rejected.

The t- value for perceived autocratic parenting style of adolescents came out to be 2.152 which are significant at 0.05 level. The mean scores on perceived autocratic parenting style of the male adolescent students and female adolescent students are 24.86 and 26.35 respectively. It indicates that female students perceive their parents as more of autocratic as compared to male adolescent students. Thus, the hypothesis that *"There exists no significant difference between mean scores of adolescents in perceived autocratic parenting style in relation to their gender"* was rejected.

The t- value for perceived accepting parenting style of adolescents came out to be 14.86 which is significant at 0.05 level. The mean scores on perceived accepting parenting style of the male adolescent students and female adolescent students are 29.65 and 21.17 respectively. It indicates that male students perceive their parents as more of accepting as compared to female adolescent students. Thus, the hypothesis that *"There exists no significant difference between mean scores of adolescents in perceived accepting parenting style in relation to their gender"* was rejected.

The results in table 1 clearly show that the t- value for perceived rejecting parenting style of adolescents came out to be 4.316 which is significant at 0.05 level. The mean scores on perceived rejecting parenting style of the male adolescent students and female adolescent students are 23.46 and 25.80 respectively. It indicates that female students perceive their parents as more of perceived rejecting parenting as compared to male adolescent students. Thus, the hypothesis that *“There exists no significant difference between mean scores of adolescents in perceived rejecting style in relation to their gender”* was rejected.

The results in table 1 clearly show that the t- value for academic stress of adolescents came out to be 4.316 which is significant at 0.05 level. From the table, it is observed that the mean scores in academic stress of the male adolescent students and female adolescent students are 304.41 and 367.88 respectively. It indicates that the female adolescent students have higher level of academic stress as compared to males. Thus, the hypothesis that *“There exists no significant difference between mean scores of adolescents in academic stress in relation to their gender”* was rejected.

## Discussion

This study aimed at exploring the gender differences on the various profiles viz. academic stress, perceived (democratic, autocratic, accepting and rejecting) parenting styles and mental health. It was assumed that there exists no significant gender difference in the above-mentioned profiles of the adolescent students studying in class IX. Regarding the gender differences, results of the study revealed that female have higher level of academic stress in comparison to male students. An important factor for stress is poor academic performance, where students with low Grade Point Average (GPA) scores or a low ranking in academic grades often experience higher levels of perceived stress or pressure (Bjorkman, 2007; Li, Feng, Mei, & Yao, 2007). Similar with above observation, male students scored high on mental health index in comparison to female students, which is in connection with the academic stress result. Analysis of parenting style regarding the gender difference revealed that female perceives their parents as autocratic on the other hand male perceive their parents more democratic. Moreover, male students perceived their parents as accepting in their parenting styles whereas female perceived their parents to have rejecting parenting style. Findings of the study has bearing on all the concerned authorities including parents, it is desirable that they should take this difference into their consideration and try to make the home and school environment gender sensitive. Counselling cells must be developed and counsellors may develop intervention programmes keeping these findings into their

consideration to deal with issues. Parents may also be counselled regarding their important role in practicing the gender sensitive parenting style. Beside this teacher are also required to understand their role in facilitating the gender sensitive environment in the classroom.

## Conclusion

Mental health is not merely the absence of mental illness; rather, it is a state of positive mental well-being. It is influenced by various factors, including biological, psychological, and social factors. Maintaining good mental health is crucial for overall well-being and quality of life. It allows individuals to manage stress, adapt to changes, and make positive choices. Academic stress is closely intertwined with mental health, as prolonged or excessive stress can have significant impacts on a student's psychological well-being. Good mental health also enables people to engage in productive activities, pursue personal goals, and maintain satisfying relationships. Over the years, there has been a growing recognition of the importance of mental health and a shift toward reducing stigma associated with mental illness. Efforts are being made to improve mental health awareness, promote early intervention, and provide accessible and equitable mental healthcare services to all individuals. The awareness of initiative of Government – Manodarpan, which reflects on recognition of the importance of mental health in academic success and overall well-being should be created to strengthen a supportive ecosystem that addresses mental health concerns, reduces academic stress, and fosters positive learning environments for students in order to promote their holistic development.

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