



MENTAL HEALTH OF SENIOR SECONDARY SCHOOL STUDENTS WITH RESPECT TO FAMILY TYPE AND SELF-CONCEPT

Nidhi Walia¹ Dr. Reena²

Research Scholar, School of Education, Abhilashi University, Chailchowk, Mandi, Himachal Pradesh, India¹

Assistant Professor, School of Education, Abhilashi University, Chailchowk, Mandi, Himachal Pradesh India²

Abstract : The present study was carried out to study mental health of senior secondary school students with respect to family type and self-concept. In the present study survey technique under descriptive research was used. To select the sample in the present study Multistage sampling along with stratified random sampling and incidental sampling were used. Total sample in the study consisted of 737 senior secondary school students (403 students of nuclear family and 334 students of joint family) of +2 class. Standardised tool 'Mental Health Battery' by Arun Kumar Singh and Alpana Sen Gupta and self-made tool 'Self-Concept Scale' were used to collect the necessary data. Descriptive statistics and Analysis of Variance were used to analyse the data. The findings of the study indicated that senior secondary school students of nuclear and joint family possessed similar level of mental health. Senior secondary school students having different level of self-concept differed significantly with respect to their mental health. Family type and self-concept do not interact significantly with respect to mental health of senior secondary school students.

KEYWORDS: Mental Health, Family Type, Self-Concept

INTRODUCTION

Mental health of adolescents becomes an important topic in the 21st century. mental health of adolescents is important because of their role in future. The future of the country depends on adolescents. Mental health is state of mind which enable person to make adjustment, cope with stress, maintain relationships, learn well and understand their abilities. Mental health affects all aspects of life. It encompasses thought, feelings, action and cognitive functioning. Mental health of adolescents is not only important for their personal development but also for their academic success and social development. Mentally healthy children can focus, retain information and take part in different activities. As change is the law of nature. Everything in life changing with time. A mentally healthy person can enjoy the changes of life and achieve the goal that he set for

themselves. Mentally healthy student becomes self-conscious and stable. When the students become self-conscious it means they have clear image of themselves. It means that student have clear self-concept. Good mental health of students allows to form healthy relationships which are important for development of self-concept. Self-concept is clear image about themselves. Self-concept means how student value themselves or his own characteristics. Self-concept of a student guided his action and shape his behaviour. Self-concept is a key to get success in life. A student with positive self-concept can perform better and solve problems in his life which improve his mental health. **Singh and Devi (2018)** showed that significant positive correlation existed between mental health and family climate of secondary school students. There was significant positive correlation between mental health and family climate of male students and between mental health and family climate of female students. **Agarwal and Bahadur (2023)** confirmed the role of family structure on mental health of adolescents. Overall mental health scores of adolescents showed that joint family as enhancer of mental health. On the basis of dimensions wise analysis, it was showed that students of joint family performed better in six dimensions of self-concept. There was significant difference in mental health of the adolescents of nuclear and joint family. Joint family students had better mental health as compare to students of nuclear family. **Sekhri and Lal (2023)** concluded that in self-concept domain males and females do not differ significantly. It also suggested that males and females do not differ significantly on anxiety. **Babu and Suneela (2024)** revealed that all adolescents students fall above average level of mental health. There was significant difference between mental health of male and female students and students belonging to nuclear and joint family. There was no significant difference in mental health of students belonging to rural and urban area. **Hazra (2024)** found no significant difference in mental health, including anxiety, stress and depression between higher secondary students of nuclear and joint family. There was no significant difference in mental health including anxiety, stress and depression in higher secondary boy and girl students. **Durga (2025)** in her study reported that students in sample demonstrated moderate level of self-concept. Significant difference was found in mental health of male and female students and rural and urban senior secondary school students. **Durga (2025)** revealed that students in sample demonstrated moderate level of self-concept. Significant difference was found in mental health of male and female students and rural and urban senior secondary school students.

On the basis of thorough review of the literature it has been observed that very few studies were found on mental health of students with respect to their self-concept and no specific conclusion could be made about the mental health of student in relation to family type. Hence, it was decided to study the mental health of senior secondary school students with respect to family type and self-concept.

OBJECTIVES OF THE STUDY

1. To study the mental health of senior secondary school students with respect to their family type.
2. To study the difference in mental health of senior secondary school students with respect to their level of self-concept.

3. To study the interactional effect of family type and self-concept on mental health of senior secondary school students.

HYPOTHESES OF THE STUDY

1. There exists no significant difference in mental health of senior secondary school students with respect to their family type.
2. There exists no significant difference in mental health of senior secondary school students with respect to their level of self-concept.
3. There exists no significant interactional effect of family type and self-concept on mental health of senior secondary school students.

METHODOLOGY

Survey technique under descriptive research was used in the present study.

SAMPLING

In the present study, a representative sample of 737 senior secondary school students (403 students of nuclear family and 334 students of joint family) of +2 class were selected from schools of Mandi, Kullu, Hamirpur and Bilaspur districts of Himachal Pradesh by applying multistage sampling along with the process of stratified random sampling and incidental sampling.

RESEARCH TOOLS USED

- ‘Mental Health Battery’ developed by Arun Kumar Singh and Alpana Sen Gupta.
- ‘Self-Concept Scale’ developed and standardised by investigator herself.

ANALYSIS OF DATA

Descriptive statistics and Analysis of Variance (ANOVA) were used to analyse the collected data. Detail of analysis is given below:

In order to study the main and interaction effect of family type and self-concept on mental health of senior secondary school students, Analysis of Variance (2x3 factor design) involving two types of family i.e. nuclear family and joint family and three levels of self-concept i.e. high, average and low, was applied on the mean scores of mental health. The mean and standard deviation of mental health scores with respect to family type and level of self-concept are given in Table-1

TABLE-1**MEAN AND STANDARD DEVIATION OF MENTAL HEALTH OF SENIOR SECONDARY SCHOOL STUDENTS WITH RESPECT TO FAMILY TYPE AND SELF-CONCEPT**

Sr. No	Family Type Level Of Self- Concept		Mean Mental Health Scores		
			Nuclear Family	Joint Family	Total
1.	High Level	Mean	83.79	83.58	83.70
		S.D.	10.857	9.125	10.068
		N	63	52	115
2.	Average Level	Mean	81.38	83.53	82.43
		S.D.	10.039	8.873	9.540
		N	264	251	515
3.	Low Level	Mean	76.57	79.65	77.46
		S.D.	10.719	8.232	10.121
		N	76	31	107
4.	Total	Mean	80.85	83.18	81.91
		S.D.	10.515	8.902	9.879
		N	403	334	737

From the mean scores of mental health of senior secondary school students with respect to family type and self-concept, 'F' values were calculated. The results are given in table 2.

TABLE-2**SUMMARY OF THE RESULTS OF ANALYSIS OF VARIANCE OF MENTAL HEALTH OF SENIOR SECONDARY SCHOOL STUDENTS WITH RESPECT TO FAMILY TYPE AND SELF-CONCEPT**

Sr. No	Source of Variation	Sum of Squares	df	Mean Square (Variance)	F-Ratio
1.	Family Type	284.733	1	284.733	3.043 ^{NS}
2.	Self-Concept	1757.508	2	878.754	9.392**

3.	Family Type X Self- Concept	166.366	2	83.183	0.889 ^{NS}
4.	Error Variance	68393.600	731	93.562	
5.	Total sum of squares	5016105.000	737		
6.	Corrected Total	71826.540	736		

NS- Not Significant

****.- Significant at 0.01 Level of Significance**

(I) Main effect

(a) Family Type (A)

The obtained value of 'F' for the main effect of family type on mental health of senior secondary school students for df 1/731, came out to be 3.043, which is less than the table value 3.85 even at 0.05 level of significance. Hence the Hypothesis No 1 "There will be no significant difference in mental health of senior secondary school students with respect to their family type" was accepted. It indicates that senior secondary school students belonging to nuclear and joint family did not differ significantly in term of their mental health. So, it may be interpreted that senior secondary school students belonging to nuclear and joint family possessed similar level of mental health. This is also evident from the mean mental health scores of senior secondary school students belonging to nuclear family (80.85) and joint family (83.18), which are almost equal. However, mean mental health scores of students belonging to joint family were higher than the students belonging to nuclear family.

The mental health scores of senior secondary school students belonging to nuclear and joint family can also be shown in figure 1

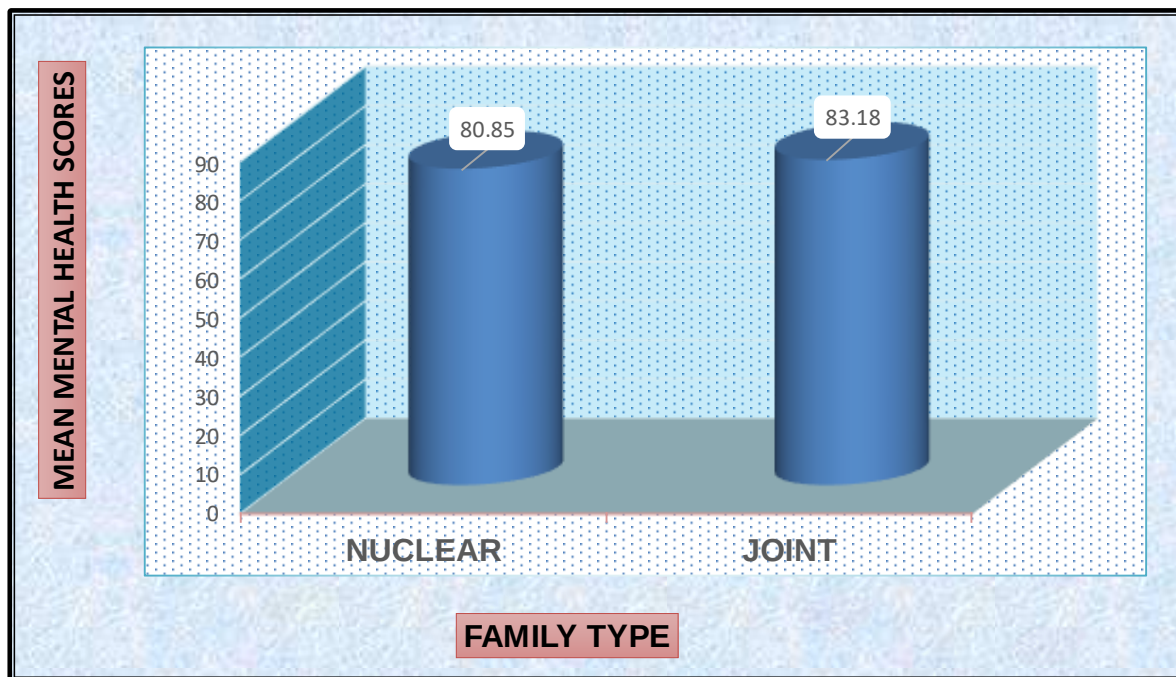
FIGURE - 1**MEAN MENTAL HEALTH OF SENIOR SECONDARY SCHOOL STUDENTS BELONGING TO NUCLEAR AND JOINT FAMILY****(b) Self-Concept (B)**

Table-2 further shows that the computed value of 'F' for the main effect of self-concept on mental health of senior secondary school students for, df 2/731 came out to be 9.392, which is greater than the table value 4.63 at 0.01 level of significance. There was significant difference in self-concept of senior secondary school students. Hence the Hypothesis No 2, "There exists no significant difference in mental health of senior secondary school students with respect to their level of self-concept." was rejected. Thus, it may be interpreted that senior secondary school students having high, average and low level of self-concept differed significantly in their mental health.

Further, it is also evident from mean mental health scores of senior secondary school students with high self-concept (83.70), which is higher than the score of senior secondary school students with average self-concept (82.43) and low self-concept (77.46).

Further in order to find out the significance difference in mental health scores of senior secondary school students possessing different level of self-concept in different combinations (considering two groups at a time), Tukey-Kramer test was applied. The computed and critical values of 'q' (studentized ranges statistic) and respective mean differences are given in table-3

TABLE- 3

COMPUTED AND CRITICAL VALUE OF ‘q’ (STUDENTIZED RANGE STATISTIC) AND RESPECTED MEAN DIFFERENCE IN MENTAL HEALTH OF SENIOR SECONDARY SCHOOL STUDENTS WITH DIFFERENT LEVEL OF SELF-CONCEPT

	Self-Concept Level	mean mental health scores	Pair of Comparison	Mean Difference	Computed value of ‘q’
A1	High	83.70	A1-A2	1.27	1.98 ^{NS}
A2	Average	82.43	A2-A3	4.97	5.04*
A3	Low	77.46	A1-A3	6.24	6.83*

NS.....Not significant

*.....Significant at 0.05 level of significance

Critical value of ‘q’= 3.31 (at 0.05 level) and 4.12 (at 0.01 level), (for df 731, Numbers of groups compared=3)

The computed value of ‘q’ (Studentized Range Statistic) for mental health scores were compared with the critical value (Table value of ‘q’) for three groups of senior secondary school students classified on the basis of their level of self-concept. It was revealed that senior secondary school students possessing high and average level of self-concept had reflected significantly high level of mental health as compared to the senior secondary school students with low level of self-concept because the respective computed ‘q’ values i.e. 5.04 (Average Vs. Low) and 6.83 (High Vs. Low) were significantly higher than the critical value of ‘q’ (3.31) at 0.05 level of significance, df 2/731. So, it may be averred that senior secondary school students with low level of self-concept had shown significantly low-level of mental health as compared to students possessing either high or average level of self-concept. On the other hand, the senior secondary school students with high level of self-concept did not differ significantly in terms of mental health from the students possessing average level of self-concept because the computed ‘q’ value (1.98) fall short of the critical ‘q’ value (3.33) even at 0.05 level of significance.

(II) Interactional Effect (AXB)

The calculated value of ‘F’ for the interactional effect of family type and self-concept on mental health of senior secondary school students, for degree of freedom 2 and 737 came out to 0.889. This value is below the table value of ‘F’ i.e. 3.00 at 0.05 level of significance. This shows that Hypothesis No 3 “Family type and self-concept will not interact significantly on mental health of senior secondary school students” was retained.

It means that there was no significant interactional effect between family type and self-concept with respect to mental health of senior secondary school students. Therefore, it may be interpreted that the family type and self-concept taken together did not significantly affected mental health of senior secondary school students.

CONCLUSION

(I) Senior secondary school students belonging to nuclear and joint family possessed similar level of mental health. However, mean mental health scores of senior secondary school students of joint family (83.18) was higher than senior secondary school students of nuclear family (80.85).

(II) Senior secondary school students having different level of self-concept differed from each other in their mental health. Senior secondary school students possessing high and average level of self-concept had reflected significantly high level of mental health as compared to the senior secondary school student with low level of self-concept. Senior secondary school students with high level of self-concept did not differ significantly in terms of mental health from the students possessing average level of self-concept.

(III) Family type and self-concept do not interact significantly with respect to mental health of senior secondary school students. Therefore, it may be interpreted that the family type and self-concept taken together did not significantly affected mental health of senior secondary school students.

IMPLICATIONS

The present study was undertaken to study the mental health of senior secondary school students with respect to family type and self-concept. After finding the conclusion it was revealed that there was no significant difference in mental health of senior secondary school students of nuclear and joint family. However, mean mental health scores of senior secondary school students of joint family (83.18) was higher than senior secondary school students of nuclear family (80.85). So, the teacher should focus on individual needs rather than their family structure. Teacher should create such an environment in which the students feel safe and free to express their emotions. Different groups activities should be planned so that students can learn to cooperate each other. There should be better teacher taught relationship. The present study also showed that senior secondary school students having different level of self-concept differed from each other in their mental health. Healthy self-image should be promoted and make students responsible for their own action. Children should be encouraged to take part in different activities. When children take part in different activities it develops different skill among children and enhance their self-concept. The cooperation of teachers and parents is essential for development of self-concept.

REFERENCES

- Agarwal, Ayushi and Bahadu, Anshuhi (2023). Role of Family Structure on Mental Health of Adolescents: A Comparative Study. *The international Journal of Indian Psychology*, 11(5),1571-1578. DOI1102.165 Retrieved On 23 May 2025 from <https://ijip.in/wp-content/uploads/2023/05/18.01.165.20231102.pdf>
- Babu, V. Sekhar and Suneela, M. Esther (2024). Mental Health of Adolescents with Reference to Gender, Locality and Type of Family. *Journal of Emerging Technologies and Innovative Research (JETIR)*, 11(4), 0159-0167. Retrieved on 20 May 2025 from <https://www.jetir.org/papers/JETIR2404F23.pdf>
- Durga, A.S.K. (2025). The effect of Self-Concept on Secondary School Students. *International journal of Multidisciplinary Educational Research*, 14(3(3)),95-102. Retrieved on 22 April 2025 from [https://s3-ap-southeast-1.amazonaws.com/ijmer/pdf/volume14/volume14-issue3\(3\)/13.pdf](https://s3-ap-southeast-1.amazonaws.com/ijmer/pdf/volume14/volume14-issue3(3)/13.pdf)
- Hazra, Bratati (2024). Mental Health in Secondary School Students: The Role of Some Demographic Factors. *International Education and Research Journal (IERJ)*, 10(10),207-211.
- Sekhri, Sekhri and Lal Roshan (2023). A Study of Anxiety, Self-Concept and Gender Difference among Youth. *YMER*, 22(12), 506-514. Retrieved on 22 April 2025 from <https://ymerdigital.com/uploads/YMER2221256.pdf>
- Singh, Amisha and Devi, Sharmila (2018). Mental Health of Secondary School Students in Relation to Family Climate. *International Journal of Research in Social Sciences*, 8(4),853-861. Retrieved on 15 April 2025 from https://www.ijmra.us/project%20doc/2018/IJRSS_APRIL2018/IJMRA-13670.pdf

