A COMPATIVE STUDY OF "MENTAL HEALTH AMONG MALE AND FEMALE STUDENTS"

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Abstract

The present study attempts to explore a comparative study of mental health among male and female students. The data was collected on 60 subjects (30 male and 30 female). The results revealed that there will be no significant difference between male and female students on Mental Health.

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Introduction

Health is an important aspect of human life. It is well-recognized truth from the time immemorial that possessing good health prerequisite for every human being for all-around growth and development. Health has been defined differently by different thinkers. However, it is generally defined as "a state of physical, mental and, social well-being and not merely an absence of disease or infirmity."

In this rapidly changing society due to technological and scientific advancement, it is very difficult to remain mentally healthy. Therefore, it is a great challenge before the education system to remain the mental health of students.

The concept of mental health originated early in the present century. The meaning of the term mental health can be expressed in a dictionary of Psychology "a state of good adjustment with a subjective state of wellbeing, zest for living, and the feeling that is exercising his talents and abilities" (Atkinson, Bern and, Woodworth, 1988). In the modern age of science and technology majority of people are seeking wealth, material prosperity, power and status, but in return they suffer from various psychosomatic disorders. They live in insecurity, anxiety, stress and, tension which are the by-products of science and technology.

Meaning of Mental Health

It is true that every individual, in one way or another, is inevitably involved in conflict and all of us are occasionally placed under strain. It is, in fact, one of the dark blessings of the modern age. Let us consider the following two terms.

- **Mental Health:** Absence of mental illness: more positively, a state characterized by adjustment, a productive orientation and zest.
- **Mental Illness:** Emotional, motivational and social adjustment are severe enough to interfere with the ordinary conduct of life.

According to W.H.O. criteria "Health is a state of complete physical, mental and, social well-being and not merely the absence of disease or infirmity."

According to Kari Menninger, a psychiatrist (1947), "Mental Health is the adjustment of human beings to the world and to each other with a maximum of effectiveness and happiness."

The term gender is often used to classify the anatomy of a person's reproductive system as either male or female. In the social sciences, however, the concept of gender means much more than biological sex. It refers to socially constructed expectations regarding the way in which one should think and behave, depending on sexual classification. These stereotypical expectations are commonly referred to as gender roles. Attitudes towards gender roles are thought to result from complex interactions among societal, cultural, familial, religious, ethnic and political influences.

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Gender affects many aspects of life, including access to resources, methods of coping with stress, styles of interacting with others, self-evaluation, spirituality, and expectations of others. These are all factors that can influence mental health either positively or negatively. Psychological gender studies seek to better understand the relationship between gender and mental health in order to risk factors and improve treatment methods.

Traditional gender roles define masculinity as having power and being in control in an emotional situation in the workplace, and in sexual relationships. Acceptable male behaviors include competitiveness, independence, assertiveness, ambition, confidence, toughness, anger, emotional expressiveness, vulnerability (weakness, helplessness, insecurity, worry) and intimacy.

Traditionally, femininity is defined as being nurturing, supportive and assigning a high priority to one's relationships. Women are expected to be emotionally expressive, dependent, passive, cooperative, warm and accepting to subordinate status in marriage and employment. Competitiveness, assertiveness, anger and violence are viewed as unfeminine and are not generally tolerated as acceptable behavior.

Why does gender matter in mental health?

A gender approach to health means distinguishing biological and social factors while exploring their interactions, and to be sensitive to how gender inequality affects health outcomes. A gender approach to mental health provides guidance to the identification of appropriate responses from the mental health care system, as well as from public policy. Gender differences clearly exist, even where the socioeconomic gradient may not be strong. Never married and separated/divorced men have higher overall admission rates to mental health facilities than women in the same marital status categories. In contrast, married women have higher admission rates than married men (Dennertein L, & C. Morse.) Gender, like other stratifies, does not operate in isolation. It interacts in an additive or multiplicative way with other social makers like class and rates. Gender analysis improves understanding of the epidemiology of mental health problems, decisions and treatment of these problems in under-reported groups, and also increases the potential for greater public participation in health (Vlassoff C, Gracia Moren, 2002). Doctors are more likely to diagnose depression in women compared to men, even when they have similar scores on standardized measures of depression or present with identical symptoms. Gender stereotypes regarding processes to emotional problems in women and alcohol problems in men appear to reinforce social stigma and constrain help seeking along stereotypical lines. They are a barrier to the accurate identification and treatment of Dr. Karuna Anand

psychological disorders. (Adhoc working group. 2006). Women's mental health affects others in society. Their increasing presence in the workforce means that their mental health affects national productivity. Their social roles as caregivers mean that their mental health affects the mental health of their children and elderly parents. These gender differences vary across age groups. In childhood, most studies report a higher prevalence of conduct disorders, with aggressive and antisocial behaviors, among boys than in girls. During adolescence, girls have a much higher prevalence of depression and an eating disorder, and engage in suicidal ideation and suicide attempts than boys. Boys experience more problems with anger, engage in high-risk ehaviors and commit suicide than girls. In gender, adolescent girls are, more prone to symptoms that are directed inwardly, while adolescent boys are prone to act out.

In adulthood, the prevalence of depression and anxiety is much higher in women, while substance use disorders and antisocial behaviors are higher in men. In the case of severe mental disorders such as schizophrenia and bipolar depression, there are no consistent sex differences, but men have an earlier onset of schizophrenia, while women are more likely to exhibit serious forms of bipolar depression.

In the older age group, although the incidence rates of Alzheimer's disease-a degenerative disease of the brain which usually occurs after 65 years of age is reported to be the same for women and men, comorbidity the occurrence of more than one disorder concurrently is associated with increased severity of mental illness and higher levels of disability. Recent studies have found that women had significantly higher lifetime and 12 months commorbidity than men.

The Objective of the Study

To study gender differences in Mental Health among undergraduate students.

Hypothesis

There will be no significant difference between Male and Female undergraduate students on Mental Health.

Material and Methods

Sample

In this study, the design is a randomized group design selected on the basis of randomization between male and female students. A total of 60 subjects were used in the research. The subjects of both the gender (Male & Female) were selected randomly from a different college. The sample was between the ages of 18 to 22. The level of socio-economic status was constant for the entire group.

Tool Used

To measure the mental health of students the Metal Health checklist constructed by Pramod Kumar (D.Phil) was used. In this inventory items were

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formulated. The inventory was divided into two sub-areas such as psychological and physical health. In part 'A' only six items represent psychological health and the rest five items represent the physical health of a person. There is a four-point scale. Their points are as follows:-

FOUR-POINT SCALE				
RARELY	AT TIME	OFTEN	ALWAYS	

Procedure

The Mental Health inventory developed by Pramod Kumar (D'Phil) was administered on 60 subjects according to instructions given in its manual. The test was administered in the group situations as well as at the individual level. Male and Female students were selected as subjects. There was no time limit to complete the scale but maximum of 15 to 20 minutes were taken by each subject.

Statistical Analysis

Mean and t-test was applied for analysis of the collected data to draw results. The mean & result tables are given in Tables 1, 2, 3 & 4.

Table No. 2
Showing Score & Mean of Male and Female Students

Students					
Male Students		Female Students			
n	Total	Mean	n	Total	Mean
30	580	19.3	30	615	20.5

Table No. 3
Result table

t-VALUE	INTERPRETATION
0.11	NON-SIGNIFICANT

Table No. 4
Showing the Physical & Psychological Score & Mean of Male

MALE			
Physical		Psychological	
Total Score	Mean	Total Score	Mean
330	11.00	250	8.33

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Table No. 5
Showing Total Score & Mean of Female on Physical & Psychological

Female			
Physical		Psychological	
Total Score	Mean	Total Score	Mean
358	11.93	257	8.33

Result and Discussion

The present study aimed to see the gender difference in mental health among students. On the basis of the t-test, we can say that our hypothesis "There will be no significant difference between Male & Female Students on mental Health", proved right because the obtained t-value (0.11) is smaller than the critical t-value (2.00) at .05 level. So we can say that there is no significant difference in mental health among male & female students. The finding of Dr. Smitatrivedi& Dr. Saritamisra& Dr. A.K. Srivastava (2006) also support our hypothesis they also find out the psychological study of mental health among students from a different area. They have taken a sample of 300 students (Male & Female) from different areas. But they find no significant difference on the basis of sex on Mental Health. But on the other hand, Charlie & Zeenat Zahoor (2011) have found contradictory results. They study Mental Health among Male & Female youths. The sample consisted of 50 Male and 50 Females and the findings are the immense significance of Mental Health. Meet on the basis of the mean value (see table: 1) we can say that Male have better Mental health in comparison to females because the mean value of males is 19.3 while the mean value of females is 20.5 on mental health.

The Mental Health checklist is also divided into two sub-areas. The first area is physical health and the other is psychological health. If we compare the physical and psychological health of male and female students, we can see (table:3 & 4) that the raw score of males and in their physical health is 330 & the mean value is (11.00) which is less than the raw scores (358) &mean socres (11.93) of female and the fewer scores shows the better health. On the other hand, the psychological health of males is better than the psychological health of females because of the mean of males (8.56) but the difference is not wide enough.

Conclusion

On the basis of the results of the above investigation, it could be concluded that there is no significant difference in Mental Health among Male & female students.

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