

## **Concept of Problem Behavior (Negative Mental Health)**

**Dr. Naveen Chandra Bhatt\*, Bhagwan Chandra Bhatt\*\***

*\*Head, Deptt of Yoga, Kumaun University, Almora, \*\*Research Scholar,  
Deptt. of Psychology, S.S.J. Campus, Almora*

### **Abstract**

*The study was aimed to find out the Role of Yogic Exercises on Problem behavior in yogic exercisers and seldom yogic exercisers. Three hundred sixty participants in the age range between 15-40 years were taken and they were arranged according to the requirement of the factorial design with three types of yogic exercisers (yogic exercisers at Institute, yogic exercises at home and seldom exercisers), Two types of sex (Male, Female) and two levels of age (15-25 yrs, 30-40 yrs) i.e. 30 participants per cells. In order to measure the pattern of problem behavior check list (Achenbach 1991) was used. Data were analyzed by three ways ANOVA and it was found that highest level of problem behavior was noticed in seldom exercisers, lowest level of problem behavior found in yogic exercisers at home and the level of problem behavior was zero in yogic exercisers at Institute. The level of problem behavior on order participants was higher as compared to the younger ones more ever it was seen that males were higher problem behavior than Female.*

*Findings were interpreted in terms of yogic exercisers, age and sex as determinant of problem behavior.*

**Key word:** *Yoga, problem behavior.*

Reference to this paper  
should be made as  
follows:

**Dr. Naveen Chandra  
Bhatt\*, Bhagwan  
Chandra Bhatt\*\*,  
“Concept of Problem  
Behavior (Negative  
Mental Health),”  
Journal Global Values,  
Vol. VIII, No.1,  
pp. 20-26  
[http://anubooks.com/  
?page\\_id=2424](http://anubooks.com/?page_id=2424)**

## Introduction

Keeping these views in perspective this study was planned and it was aimed to ascertain the pattern of problem behavior as affected by a yogic process in developmental perspective. The objectives of this study are as follows:

1. The first objectives of this study were to find out the impact of Yogic exercises on problem behaviors. It was hypothesized that variations, in Yogic exercisers, would cause variation in measures of problem behaviors.
2. The second objective of the study was to ascertain the relative efficiency of sex on problem behaviors. It was contended that males and females will vary on their scores in problem behaviors
3. The third objectives of this study were to explore the pattern of problem behaviors as affected by age. It was formulated that variation in age would cause variation in measure of problem behaviors

Keeping these views in consideration this study was planed in factorial perspective.

## Method:

**Sample :** Three hundred sixty participants in the age range 15-40 yrs were taken in consideration and they was arranged according to the requirement of 3x2x2 factorial design with 3 types of yogic interplay (yogic exercisers at institute, yogic exercisers at home and seldom exercisers). 2 types of sex (male, female) and 2 levels of age (15-25 yrs, 30-40 yrs) i.e. 30 participants per cell.

The schematic presentation of experimental design is given below:

**Table 1**  
**Schematic Presentation of Experimental Design**

A1	A2	A3
B	B	B
B1 B2	B1 B2	B1 B2
C1		
C2		

### Legends

- A = Yogic Exercises  
 A1 = Yogic exercisers at institution  
 A2 = Yogic exercisers at home

A3 = Seldom exercisers  
B = Sex  
B1 = Female  
B2 = Male  
C = Chronological age  
C1 = 15-25 yrs.  
C2 = 30-40 yrs.

**Tools:**

The details of the tools are as follows:

Problem behavior check list: Parent Rating from Achebe (1991). It was presented in Hindi guide & researcher. On this standardized instrument. Parents individual presence of 113 behavior problems using 0 to 2 point scale for each. The scale provided score on two brodbound dimensions. Externalizing Problems (aggressive, disruptive and anti-socio behavior) and internalizing problems (Anxiety depression and social with drawl).

Procedure: Data were gathered individual/ or in group and best attempts were made to external distractions.

**Results:**

Obtained data were analyzed by three way analysis of variance and interpreted of types of yogic exercises. Sex and age was found to vary with measures of problem behavior are presented in Table- 2

**Table: 2**  
**Summary table showing the impact of types of yogic exercisers, sex and age on well being.**

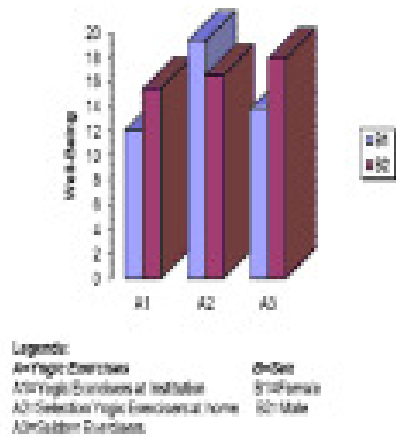
Sources of variation	Ss	Df	MS	F
A	8.99	2	4.49	5.69
B	6.29	1	6.29	8.86
C	4.39	1	4.39	5.56
AB	13.73	2	6.86	8.69
AC	15.23	2	7.61	9.64
BC	7.59	1	7.59	9.61
ABC	16.74	2	8.37	
Error (within)	274.92	348	0.79	9.64
		359		

The main effect of type of yogic exercises was significant ( $F_{2, 348}=5.69$   $P<.01$ ). Mean values pooled sex and age were 186.25, 265.0 and 358.75 respectively for yogic exercises at institute, at home and seldom exercisers. The next main effect of sex was also significant ( $F_{1, 348}=8.86$   $P<.01$ ). It was noted that males were

higher problem behavior ( $X= 306.66$ ) than females ( $X=233.33$ ). The third main effect of age was also significant ( $F1, 348=5.56 P<.01$ ). It was resulted that younger's were less in Problem behavior ( $X=260.00$ ) than their older counter parts ( $X=280.00$ ).

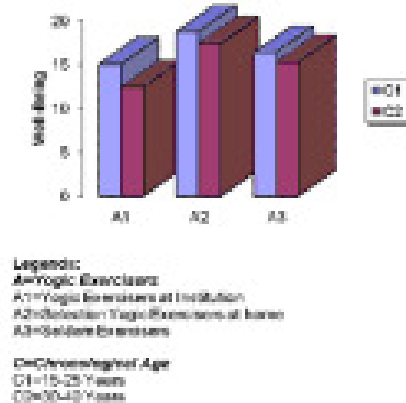
The two way interaction of types of yogic exercises X sex was significant ( $F2, 348=8.69 P<.01$ ) and its is presented in Fig.1 The next interaction of types of yogic exercises X age was also significant ( $F2, 348=9.69 <.01$ ) and it is appeared in Fig.2 The sex X age interaction was also significant ( $F1, 348= 9.61 P<.01$ ) and it is given in fig.3.

The last three way interactions types of yogic exercises X age X sex was also significant ( $F2, 348= 10.60 P<.01$ ) and it is appeared in fig. 4 It showed that all variables laid their impact on Problem behavior.



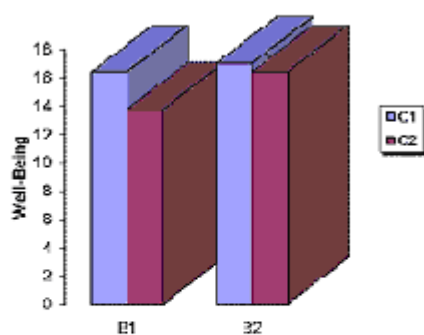
**Fig. 1**

Impact of Yogic exercisers and sex on Problem behavior

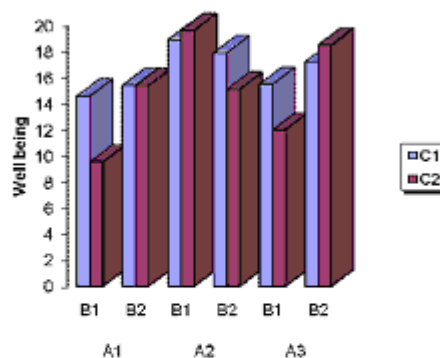


**Fig. 2**

Impact of Yogic exercisers and age on Problem behavior



Legende:  
B=Sex  
B1=Female  
B2=Male  
  
C=Chronological Age  
C1=15-25 Years  
C2=30-40 Years



Legende:  
A=Yogic Exercisers  
A1=Yogic Exercisers at Institution  
A2=Selection Yogic Exercisers at home  
A3=Seldom Exercisers  
  
B=Sex  
B1=Female  
B2=Male  
  
C=Chronological Age  
C1=15-25 Years  
C2=30-40 Years

Fig. 3

Fig. 4

Impact of sex and age on Problem behavior      Impact of types of yogic exercisers, Sex and age on Problem behavior

**Discussion:**

Obtained data were analyzed by three way analysis of variance and Interpreted in terms of types of yogic exercisers, sex and age as determiners of problem behavior, prior to the study some hypothesis formulated and the findings will be discussed accordingly.

- **Variation in the types of yogic exercisers would be cause variation in problem behavior:** Our first objective was concerned with the impact of types of yogic exercisers on problem behavior. It was proposed that variation in problem behavior would caused by variation in the types of yogic exercisers. Our hypothesis was conformed and we found that yogic exercisers of Ins. displayed most problem behavior followed by yogic exercisers at home and seldom exercisers. It may be due to the environmental effect that prevailed in the Ins. Possibly it has influenced our finding.

- **Variation in the sex would cause variation in problem behavior:** Our second notion was related with the impact of sex on problem behavior. It was claimed that females and males would exhibit difference in problem behavior. It was found that differential in the magnitude of problem behavior was caused by sex. Females were higher in well being than males. It may be due to their more spirituality and religion orientation.
- **Variation in the age would cause variation in problem behavior:** The last notion was concerned that variation in age would cause variation in problem behavior. It was concluded that variation in age would cause a variation in the level of problem behavior. The level of problem behavior among younger people was more as compared to older people. The reason for this could be attributed to the frustration arising from an employment and non-settlements.

Thus findings clearly reveal the Impact of types of yogic exercisers, sex and age on problem behavior.

#### References:

- Andrew & Stuanway, P. (1979). *Pears Encyclopedia Choparedia of Child Health* London, Penham books.
- Backull, D. & Lebovice, S. (1960). *Child guidance*, Geneva World Health Organization.
- Bem, S.L. (1985). *Androgyny and gender Scheme theory, A Conceptual and Empirical integration*, In. T.B. Sondereggor (Ed.). *Review of Child Development Research*, Vol. I New York Russel, Sege.
- Chiland, C. (1988). *Minimum brain days function, Fact or Fiction?* In E.J. Anthony and C. Childand (Eds.). *The Child in his family*, Vol.8 New York Wiley.
- Campbell, S.B. (1983). *Development perspective in Child Psychopathdogy*. In T.H. Often dick & M. Herson (Eds.) *Handbook of Child Psychopathology* pp. 13-14 , New York Plenum.
- Cameron, N. (1947). *The Psychology of behaviour disorders*, Boston: Houghton Mifflin.
- Faingold B.F. (1975). *Why young Child's hyperactive*, New York Randem House.
- Goldenson, B. & Roshnthal, T.L. (E.ds.) 1984. *Application of Cognitive development theory*. Development, F.L. Academic Press.
- Himsice & Campbell, M. (1970). *Psychiatric dictionary*. (4<sup>th</sup> Ed.) New York, Oxford University, Press.
- Inguam, R.E. & Scott, W.D. (1990). *Cognitive behaviour therapy*. In A.S. Ballalk, M. Hersenend A.E., Kazdin (Eds.) *International Handbok of behaviour Modification and therapy*, (2<sup>nd</sup> Ed.) New York, Plenum.

*Jensen, P.S., Bloedav, L. Degrou, J. Ussery, T. and Davis, H. (1990) Children at risk I. Risk feactors and child Sympomatology. Journal of the American Academy of Child and Adolescent Psychiatry, 29, 51-59.*

*Kanner, L. (1960). Do behaviour Symptoms always in dicates. Psychopathology? Journal of Child Psychology and Psychiatry 1, 17-25.*

*Mitchell, J.E. (1986). Anorexia Nervosa; Medical and Physiological aspects in K.D. Brownell and J.P. Foreoyt (Eds.) Handbook of Eating disorders' Physiology, Psychology and Treatment of obesity, anorerad and bulimia, New York: Basic Book.*

*Rickard, K.M. Forehard, R., Well S., K.C., (Griest, D.L. and Memechan, R.J. (1981). Factors in the refernce of Children for Behavioural treatment. A Comparison of mother of clinic refered devaiant, Clinic Refound non clinic children. Behaviour Research and Therapy (19, 201-205)*