

## **“A Study to Assess the Psychosocial Problems of Adolescents Residing at Selected Urban and Rural Areas of Sangli District.”**

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### **ABSTRACT**

A Cross-sectional comparative descriptive research design was adopted for this study. The study was conducted in selected Urban and Rural areas of Sangli district, to assess the psychosocial problems among adolescents of selected urban areas and rural areas, and to compare the psychosocial problems of adolescents between selected urban and rural areas. The sample comprised of 500 sample from urban area and 500 sample from rural area of Sangli district. Sample was selected using nonprobability purposive sampling technique. Data collected by Self-structured questionnaire to assess psychosocial problems of Adolescents and data was analyzed using descriptive and inferential statistics. The finding of the study showed that 4.8% of urban adolescents and 5.4% of rural adolescents have scholastic problems. In domain of emotional problems 14.4% adolescents from urban area and 15.2% from rural area facing emotional problems. 13.4% adolescents from urban area and 11.4% from rural area have communication problems. 22.2% adolescents from urban area and 18% from rural area facing the interdependent problems. And in the domain of social problems 19.2% adolescents from urban area and 17.8% from rural area facing the social problems. The study concludes that adolescents of urban area have slightly high percentage of communication, interdependent and social problems as compare to rural adolescents. Whereas adolescents from rural area has slightly high percentage of scholastic and emotional problems as compare to adolescents from urban area. Results showed that there is no significant difference in the average score of psychosocial problems between the urban and rural area adolescents.

**Keywords:** Adolescents, Psychosocial problems, Rural areas, Urban Areas

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### **Introduction:**

The word "adolescent" comes from the Latin word 'adolescere', which means "to grow up." That describes 'Adolescents' as people aged 10 to 19 years old, and 'Youth' as people aged 15 to 24 years old. 'Young People' refers to people aged 10 to 24. There are over 1.1 billion young people worldwide, which means that one in every five people on the globe is between the ages of 10 and 19. Young people aged 10 to 24 account for nearly 1.5 billion of the world's population currently, with developed nations accounting for 85 percent of them.<sup>[1]</sup>

In India, Adolescents aged 10 to 19 years account for roughly one-fourth of India's population, while young adults aged 10 to 24 years account for roughly one-third of the population.<sup>[2]</sup> According to the 2011 Census, 72.5 million adolescents lived in urban areas, accounting for 19.2 percent of the total urban population.<sup>[3]</sup>

During the developmental phase of adolescent, the individual exposes to various changes in his/her physical, mental, spiritual as well as in social context such as rapid urbanization, industrialization, westernization which direct or indirectly affects the growth and developmental tasks which may affect the physical as well as mental wellbeing.

The psychosocial problems results from the inadequate adjustment between the social context and mental response to that social phenomenon and different factors, for example, poverty, maltreatment or neglect, family relationships, influences of the peer groups, mental wellbeing, physical health, malnutrition etc. These psychosocial problems may lead to various mal-adaptive behaviour and non-acceptable personality, which may hinder the individual's and societal positive growth. These psychosocial problems are classified into scholastic problems, emotional problems, communication problems, interdependent problems and social problems.

Cross-sectional research was undertaken in teaching hospital, Pune, India, in the urban and rural field practice settings showed that among 2154 children, 328 were found to be at risk of psychosocial disorders with the prevalence rate of 15.2%.<sup>[4]</sup>

The study was conducted in Junior college students in Shirur Nagar Parishedage less than 20 years were enrolled in the study. It was seen that out of 180 boys 42(23.3%) had psychosocial problems and out of 180 girls 45 (25%) had psychosocial problems. In the adolescents it has been observed that the average frequency of psychosocial problems is 24.8%. The boys and girls independently showed prevalence of 23.3% and 25%.<sup>[5]</sup>

It is very necessary to detect these psychosocial problems in early stage, which can help to prevent complication arising from it.

The main aim to assess these psychosocial problems is to early identification of the psychosocial problem, preventing its consequences and promoting mental health

## MATERIAL AND METHODS

It is a Non-experimental cross-sectional comparative descriptive study conducted by using quantitative research approach. Ethical consideration obtains from Institutional ethical committee. To conduct the study permission obtained from the Educational Officer (secondary), Zillha Parishad, Sangli and from the chosen school principals to conduct the research. Selected schools situated at urban and rural areas of Sangli district used for data collection, the Target population were adolescents who is residing at urban and rural areas of Sangli district and the accessible population is school going adolescents belongs to 13 years to 16 years of age. Inclusion criteria were school going adolescents belongs to 13 years to 16 years of age and adolescent students studying in Marathi medium school. Exclusion criteria includes the students who are selected for pilot study. Sample size determined by using power analysis and non-probability, purposive sampling technique is used for selection of 1000 sample. Data collected by using self-structured questionnaire which consist, Section: I – demographical characteristics such as studying standard, age, gender and type of family and Section: II – Self-Structured questionnaire to assess psychosocial problems of Adolescent (25 items). The data analysed with the descriptive and inferential statistics in accordance with the objectives. Frequency and percentage used to analyse demographic variables. Comparison of the psychosocial problems of adolescents between selected urban and rural areas done by using inferential statistics.

## RESULTS AND DISCUSSION

Collected data is analyzed as follows;

**Section I:** Deals with analysis of demographic variables of the adolescents residing at selected urban and rural areas of Sangli district in terms of frequency and percentage.

**Table Number: 1-Frequency and Percentage distribution of the adolescents residing at selected urban and rural areas of Sangli district**

**n=500+500=1000**

Sr. No.	Variable	Groups	Urban		Rural	
			Frequency	Percentage	Frequency	Percentage
1	Age (in year)	13	18	3.60	2	0.40
		14	150	30.00	81	16.20
		15	221	44.20	199	39.80
		16	111	22.20	218	43.60
2	Gender	Male	250	50.00	250	50.00

		Female	25	5.00	250	50.00
3	Type of family	Joint Family	272	54.40	314	62.80
		Nuclear Family	228	45.60	186	37.20

Above table and following figure depicts that, in the urban adolescents group according to age, 3.6% were of age 13 years, 30% of age 14 years, 44.2% of 15 years and 22.2% of age 16 years. In the rural adolescents group according to age, 0.4% were of age 13 years, 16.2% of age 14 years, 39.8% of 15 years and 43.6% of age 16 years.

According to gender, 50% were male and 50% were females from urban adolescents

In the rural adolescent group, 50% were male and 50% were females.

In the urban adolescents group according to type of family, 54.40% of them were from joint families and 45.6% of them from nuclear families.

In rural adolescents according to type of the family, 62.8% of them were from joint families and 37.2% of them were from nuclear families

**Section II:** Deals with analysis of data related to assessment of the psychosocial problems of adolescents residing at selected urban and rural areas of Sangli district in terms of frequency and percentage.

**Table Number: 2-Frequency and Percentage distribution of Psychosocial Problems of Adolescent residing at selected urban areas**

Psychosocial Problems		Urban Area	
		Frequency	Percentage
Scholastic Problems	No (0-4)	476	95.2
	Yes ( $\geq 5$ )	24	4.8
Emotional Problems	No (0-4)	428	85.6
	Yes ( $\geq 5$ )	72	14.4
Communication Problems	No (0-4)	433	86.6
	Yes ( $\geq 5$ )	67	13.4
Interdependent Problems	No (0-4)	389	77.8
	Yes ( $\geq 5$ )	111	22.2
Social Problems	No (0-4)	404	80.8
	Yes ( $\geq 5$ )	96	19.2

**n=500**

The above table shows scholastic problems of adolescent, in the urban group, 95.2% had no scholastic problems and 4.8% had scholastic problems.

In the domain of emotional problems of adolescent, in the urban group, 85.6% had no emotional problems and 14.4% had emotional problems.

In the domain of communication problems of adolescent, in the urban group, 86.6% had no communication problems and 13.4% had communication problems.

In the domain of Interdependent problems of adolescent, in the urban group, 77.8% had no Interdependent problems and 22.2% had Interdependent problems.

In the domain of social problems of adolescent, in the urban group, 80.8% had no social problems and 19.2% had social problems.

**Table No. - 3 -Frequency and Percentage distribution of Psychosocial Problems of Adolescent residing at selected rural areas**

**n=500**

Psychosocial Problems		Rural Area	
		Frequency	Percentage
Scholastic Problems	No (0-4)	473	94.6
	Yes ( $\geq 5$ )	27	5.4

Emotional Problems	No (0-4)	424	84.8
	Yes ( $\geq 5$ )	76	15.2
Communication Problems	No (0-4)	443	88.6
	Yes ( $\geq 5$ )	57	11.4
Interdependent Problems	No (0-4)	410	82
	Yes ( $\geq 5$ )	90	18
Social Problems	No (0-4)	411	82.2
	Yes ( $\geq 5$ )	89	17.8

The above table shows in the rural group of adolescents, 94.6% had no scholastic problems and 5.4% had scholastic problems.

In the domain of emotional problems of adolescent, 84.8% had no emotional problems and 15.2% had emotional problems.

In the domain of communication problems of adolescent, 88.6% had no communication problems and 11.4% had communication problems.

In the domain of Interdependent problems of adolescent, 82% had no Interdependent problems and 18% had Interdependent problems.

In the domain of social problems of adolescent, 82.2% had no social problems and 17.8% had social problems.

**Section III:** Deals with analysis of data related comparison of the psychosocial problems of adolescents residing at selected urban and rural areas of Sangli district.

**Table No. - 4 - Comparison of the Scholastic Problems of Adolescent residing at selected urban and rural areas**

**n=24+27=51**

Scholastic Problems	Size	Mean	S.D.	t	p
Urban	24	6.00	1.50	1.51	0.140
Rural	27	5.48	0.80		
* p value more than 0.05, shows the no significant difference in the average					

The unpaired t test was used to compare scholastic problems of adolescents residing at selected urban and rural areas of the Sangli district. The urban group's average scholastic problem

score was 6.00, with a standard deviation of 1.50. The rural group's average scholastic problem score was 5.48, with a standard deviation of 0.80. The Unpaired t test statistics value was 1.51 with the p value 0.140.

**Table No. - 5 - Comparison of the Emotional Problems of Adolescent residing at selected urban and rural areas**

**n=72+76=148**

Emotional Problems	Size	Mean	S.D.	t	p
Urban	72	5.85	1.13	0.17	0.86
Rural	76	5.82	1.17		
* p value more than 0.05, shows the no significant difference in the average					

The unpaired t test was used to compare emotional problems of individuals residing in selected urban and rural areas of the Sangli district. The average score for emotional problems in the urban group was 5.85, with a standard deviation of 1.13. The rural group's average score for emotional problems was 5.82, with a standard deviation of 1.17. The Unpaired t test statistics value was 0.17 with the p value 0.86.

**Table No. - 6 - Comparison of the Communication Problems of Adolescent residing at selected urban and rural areas**

**n=67+57=124**

Communication Problems	Size	Mean	S.D.	t	p
Urban	67	5.73	0.94	0.51	0.610
Rural	57	5.64	0.85		
* p value more than 0.05, shows the no significant difference in the average					

The comparison of the communication problems among adolescents residing at selected urban and rural areas of Sangli district was done by the unpaired t test. The average score for communication problems in the urban group was 5.73, with a standard deviation of 0.94. The rural group's average score for communication problems was 5.64, with a standard deviation of 0.85. The Unpaired t test statistics value was 0.51 with the p value 0.610.

**Table No. - 7 - Comparison of the Interdependent Problems of Adolescent residing at selected urban and rural areas**

**n=111+90=201**

Interdependent Problems	Size	Mean	S.D.	t	p
Urban	111	5.89	1.05	0.58	0.560
Rural	90	5.81	0.91		
* p value more than 0.05, shows the no significant difference in the average					

The comparison of the interdependent problems among adolescents residing at selected urban and rural areas of Sangli district was done by the unpaired t test. The average score for interdependent problems in the urban group was 5.89, with a standard deviation of 1.05. The rural group's average score for interdependent problems was 5.81, with a standard deviation of 0.91. The Unpaired t test statistics value was 0.58 with the p value 0.560.

**Table No. - 8 - Comparison of the Social Problems of Adolescent residing at selected urban and rural areas**

**n=96+89=185**

Social Problems	Size	Mean	S.D.	t	p
Urban	96	5.79	0.93	0.45	0.650
Rural	89	5.85	0.93		
* p value more than 0.05, shows the no significant difference in the average					

The comparison of the social problems among adolescents residing at selected urban and rural areas of Sangli district was done by the unpaired t test. The average score for social problems in the urban group was 5.79, with a standard deviation of 0.93. The rural group's average score for social problems was 5.85, with a standard deviation of 0.93. The Unpaired t test statistics value was 0.45 with the p value 0.650.

## DISCUSSION

The current study conducted to assess the psychosocial problems faced by the adolescent and to compare the psychosocial problems between urban and rural area adolescents to see whether any geographical or cultural effects on the adolescents. Surprisingly it is found that many adolescents



belong to the joint family both in urban and rural area. It is also found that adolescents from the rural area are more interested and curious about the study as comparing to the urban adolescents. The positive result revealed that the adolescents from both urban and rural area have less percentage of scholastic problems as compares to the other psychosocial problems, this indicated that adolescents have positive attitude towards the education. But more emphasis to be given on the urban adolescents as they have higher percentage of scholastic problem as compare with urban adolescents. It is found urban adolescents have higher percentage of the psychosocial problems as compare to the adolescents of rural area.

The study conducted on 1000 adolescent which consist of 500 from urban and 500 from rural area. The result showed that urban adolescents have higher percentage in communication problems (13.4), interdependent problems (22.2%), and social problems (19.2%) as compare with rural adolescents respectively communication problems (11.4%), interdependent problems (18.0%), and social problems (17.8%). Whereas rural adolescents have higher percentage of scholastic problems (5.4%), emotional problems (15.2%) as compare with urban adolescents respectively scholastic problems (4.8%), emotional problems (14.4%).

The finding of emotional problems (15.2% in rural & 14.4% in urban) supports the study conducted by KelhouletuoKeyho, Nilesh Maruti Gujar, Arif Ali on Prevalence of Mental Health Status in Adolescent School Children, findings showed that 13.5% participants had borderline and 17.1% abnormal scores for emotional problems.<sup>[6]</sup> The findings of social problems in this study (19.2 in urban & 17.8 in rural) supports the study conducted by Mumthas, N. S & Muhsina, M has similar findings of social problems (23.56).<sup>[7]</sup>

## CONCLUSION

Based on the study's findings, the following conclusions were obtained:

- The mean scholastic problems score was slightly high in the urban adolescents (6.00) than in the rural adolescents (5.48).
- The mean communication problems score was slightly high in the urban adolescents (5.73) than in the rural adolescents (5.64).
- The mean interdependent problems score was slightly high in the urban adolescents (5.89) than in the rural adolescents (5.81).
- The mean emotional problems score was slightly high in the urban adolescents (5.85) than in the rural adolescents (5.82).
- The mean social problems score was slightly high in the urban adolescents (5.73) than in the rural adolescents (5.64).

- There was no significant difference in average found in psychosocial problems.

The study concludes that adolescents of urban areas are facing more psychosocial problems than the adolescents from rural areas. So, there is need to give more attention on the adolescents of urban area to prevent and manage the psychosocial problems.

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#### **CONFLICT OF INTEREST**

No conflict of interest

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#### **REFERENCES:**

1. Orientation Programme on Adolescent Health for Health-care Providers, Department of child and adolescent health and development, World Health Organization, publication 2006,
2. "Adolescents in India: A desk review of existing evidence and behaviours, programmes and policies." 2013. New Delhi: Population Council & UNICEF. A Profile of Adolescents and Youth in India
3. A Profile of Adolescents and Youth in India, Census of India, 2011, United Nation Population Fund – India, Available at; [https://india.unfpa.org/sites/default/files/pubpdf/AProfileofAdolescentsandYouthinIndia\\_0.pdf](https://india.unfpa.org/sites/default/files/pubpdf/AProfileofAdolescentsandYouthinIndia_0.pdf)
4. Bhosale, S., & Khismatrao, D. (2015). Study of psychosocial problems among adolescent students in Pune, India, Al Ameen J Med Sci 2015; 8(2) :150-155
5. Ramakant M Gokhale, Sandhya Gokul Ingole. A study of psychosocial problems among junior college students. MedPulse International Journal of Community Medicine. September 2019; 11(3):58-64. <https://www.medpulse.in/>
6. Keyho, Kelhouletuo & Gujar, Nilesh Maruti & Ali, Arif. (2019). Prevalence of mental health status in adolescent school children of Kohima District, Nagaland. Annals of Indian Psychiatry, 2019; 3:39-42.

7. Mumthas NS, Muhsina M. Psycho-social problems of adolescents at higher secondary level. Guru Journal of Behavioral and Social Sciences. 2014;2(1):252-257.