

REVIEW OF RESEARCH



IMPACT FACTOR: 5.7631(UIF)

UGC APPROVED JOURNAL NO. 48514

ISSN: 2249-894X

VOLUME - 8 | ISSUE - 6 | MARCH - 2019

RELEVANCE OF MENTAL HEALTH RESEARCH: THE MAGNITUDE OF THE PROBLEM

Dr. Mohammad Saheel Khan

Associate Professor & Principal Maulana Azad National Urdu University, Hyderabad, College of Teacher Education, Badaun DarwazaDelhi Road, Sambhal UP.

ABSTRACT:

Mental health acquires an almost alarming attention in the face of tremendous changes ushered in as a result of the threatening pace of advances in science and technology. "More science and technological advances have been made in the past fifty years than in all previous recorded time; for many people, the pace of change is simply too fast, resulting in what has been termed "future shock", says Coleman (1976). This is exactly what is held in the anticipated future for the present generation more worries anxieties and insecurities. This is perhaps why the present



century has been termed as the "age of anxiety" (Coleman, 1976).

Psychologically, all these developments attest to a very rapid' acceleration of psychosomatic stresses and strains on an individual. Small wonder that on every side we see anxious, unhappy, bewildered people who miss the realization of their potentialities because they can not find satisfactory answers to their problems that seem just too great. The stress of modern life is indicated by the incredible amount of tranquilizers, sleeping pills, and alcoholic beverages consumed in most societies, by the emergence of heart attacks as leading cause of deaths, marked increase in suicide among youth and by the alarming increase in delinquency and crime. It is equally reflected in the widespread preoccupation with altered states of consciousness and para-psychology as well as the ample literature on dehumanisation and alienation.

This phenomenon is a universal worry. A large number of surveys have in fact been conducted, in many parts of the world, and prevalence rates of mental illness calculated. The World Health Organisation, in a review of these and other work, concluded that:

"Well conducted epidemiological studies in several parts of the world have shown no fundamental differences either in the range of mental disorders that occur or in the prevalence of seriously incapacitating mental illness. These studies indicate that such seriously incapacitating mental disorders are likely to effect at least one per cent of any population at any one time and at least ten per cent of some time in their life (World Health Organisation, 1975a, p. 8)"

KEYWORDS: Mental Health, Psychologically.

1. INTRODUCTION

According to Mac Pherson (1983), a number of studies have been carried out on patients attending curative health facilities (health centres, out-patient clinics), and these have found up to 20 per cent of patients with significant mental disorders (Giel, 1975). The general population have found prevalence rates of 10 per cent or more. It is of significance to note here that in many Third World countries, India being no exception, it is the more dramatic forms of mental illness, which gain public attention, rather than whole range of mental disorders.

Journal for all Subjects: www.lbp.world

From a review of the major surveys of mental illness in the Third World, the World Health Organisation concluded that: "... mental disorders constitute a very serious problem in the developing countries.

Although the range of mental illness in Third World countries had generally been established to be similar to that in the developed countries there are significant differences in patterns of illness. At a general level, the demographic characteristics of Third World countries are important; populations tend to be poor, rural, young, and to have a high incidence of organic disturbances, which predispose to psychopathology. In addition, rapid social change produces situations in which a proportion of the population is still essentially located in highly integrated traditional social organisations while others are more isolated and displaced often having left the rural areas and migrated to urban environments. Again at a general level, the massive scale of health problems in the Third World has frequently led to questioning the significance of mental illness as a social problem (Bean, 1983).

While we are experiencing the threats similar to the developed world, the sources of anxieties and tensions are much too great in a nation like ours. Our society is peculiar and so are its problems. We have been facing population explosion, poverty, illiteracy, unemployment and religious and caste conflicts. The increase in crime rate and suicides, drug abuse and alcoholism in our country are quite alarming. With the breaking of family ties one no longer feels economically and emotionally secure and the competitive rat race of the modern society has further aggravated the conditions for maintaining the mental equilibrium.

Characteristically we in India seem to be in a much more difficult situation than the developed world and it has become imperative to take care of the mental health of our people if human resources have to be geared to our national development. A country's leap in its progress depends on the springs of human potentials. This has prominently been emphasized in the preface of the policy document "Challenge of Education" in the words: "The new education policy will succeed to the extent it reflected the unfragmented and total commitment of the nation to accord priority to the development of our human resources." Further, it continues to be the main focus in the National Policy on ducation-1986. It becomes essential, therefore, that mental health be given a priority in the research areas in education and psychology as a healthy individual is not only a happy individual himself but can contribute enormously to take a nation ahead.

PRESENT TRENDS

It is satisfying to note that in our country with the opening of general hospitals, medical colleges and primary health centres and sub-centres in the rural areas, we have made sufficient progress in physical health. But it is equally disturbing to perceive that mental health has been escaping our attention not only in terms of facilities but also as an area of research. This is particularly true regarding the study of mental health problems in the general population with a view to find out factors contributing to mental health.

A review of research investigations conducted abroad and in India reveals that in most of these studies only the clinical cases have been investigated for one variable or the other. The fact that the subjects of clinical studies are confined to institutionalised cases is clearly reflected in the review of some researches by Yadav (1980) on personality and mental health conducted abroad (Cattell, Schier and Lev, i962; Warburton, 1965; Glesser and Gottschalk,, 1967; Cattell and Tarto, 1966; Cartell, Komboz and Tarto, 1968; Raymond and Eleanor, 1976; Blatt Afflitti and Quinlan, 1976; Fadal, 1977; Johnson et al., 1978; Hirschafeld and Klerman, 1979; Stone, 1979). A review of research studies conducted in Indian cultural context regarding the relationship of personality and mental health (Mukhopadhyay, 1965; Murthy, 1965; Bose, 1966; Roy, 1971; Pasricha, 1974; Mohan and Dubey, 1976; Rao and Sen, 1979; Malik, 1980; Shambhuji and Sen, 1984) also leads to a similar observation (Yadav, 1980).

Apart from the researches on personality and mental health a number of researches on various other factors relating to mental ill health in the Indian cultural context reveal a similar trend of using clinical samples (Bhaskaran and Saxena, 1970; Kala and Wig, 1978; Sharma and Gupta, 1979; Gupta et

al., 1982; Chatopadhyay and Das, 1983; Mishra 1983; Jain and Kumar, 1983; Kaur and Kapur, 1983; Pathak and Mishra, 1986; Sharma and Agnihotri, 1986; Chauhan et al., 1986; Chaturvedi, 1986).

It is encouraging to note; however, that recently some researchers have made attempts to investigate samples from general population with a view to study their mental health problems, (Bakshi, 1977; Yadav, 1980; Singh and Broota, 1983; Singh et al., 1983; Rastogi and Nathawat, 1983; Bhatt, 1983; Dubey, 1983; Barnes and Pai 1983; Srivastava, 1983; Razzack. 1983; Barnes, 1984; Mehra and, Bakshi, 1985: Broota and Singh, 1986).

OBJECTIVE OF THE STUDY

The present research was planned to study the variation in burnout tendency among the school and college teacher. The aim was also to study whether there exist any relation between the burnout tendency of school and college teacher and their Occupational Stress, Mental Health and Locus of Control. Thus the objectives of this study can be summarized as follows.

- 1. To explore the influence of Occupational Stress on Burnout tendency of school and college teacher.
- 2. To explore the impact of Mental Health Status on Burnout tendency of respondents belonging to different Educational Level.
- 3. To investigate the influence of locus of control on Burnout tendency of school and college teachers.
- 4. To make a comparative account of Burnout tendency of teachers working at different level of education.

2. RESEARCH QUESTIONS

Kerlinger has indicated that the best way to represent the Research Problem is to express them in question form. "A problem, then is an interrogative sentence or statement that asks: What relation exists between two or more variables" (Kerlinger, 1969)

- 1. Investigator has thus tried to present the research problems of this study in the form of research questions, which are as follows:
- 2. Whether Occupational Stress have any impact on the burnout levels of school and college teacher.
- 3. Is there any difference in the Burnout tendency of teachers belonging to good, average and low mental health levels?
- 4. Whether there exist any difference in the Burnout tendency of teachers belonging to Internal and External Locus of control?
- 5. Does the teacher of different level of education differ in their Burnout level?

3. HYPOTHESES

A scientific research needs a planned line of action based on the hypothesis of the investigation. According to Kerlinger (1969), a hypothesis is a conjectural statement of the relation between two or more variables.

It is shrewd guess or inference that adapted to explain observed facts or conditions and to guide in further investigations (Goode and Hatt, 1952)

The investigator keeping in view, the different variables used in this study, following hypothesis have been formulated.

- 1. There will be significant difference in the burnout tendency of school and college teachers belonging to three levels of Occupational Stress.
- 2. There will be significant difference in the burnout tendency of school and college teachers belonging three levels of mental health
- 3. There will be significant difference in the burnout tendency of school and college teachers belonging to Internally and Externally oriented groups.
- 4. There will be significant difference in the Burnout tendency of different levels of teachers.

4. VARIABLES TO BE STUDIED

The independent and dependent variables incorporated in this study are as follows.

Independent Variables

- 1. Occupational Stress
- 2. Mental Health
- 3. Locus of Control

Dependent Variables

1. Burnout tendency

Plan of Study

The present investigation is design to study the Teacher Burnout in relation to Occupational Stress Mental health and Locus of Control. The study also comprises the comparative Burnout tendency of Teachers working at different level of Institution. Sample of 640 Teachers (Male and Female) of different schools and colleges will be studied. After the selection of the sample, firstly standardized test will be administered over them. These tests are Mithila Mental Health Status Inventory, Teacher Occupational Stress Scale, Locus of Control Scale.

On the basis of obtained scores, they will be categorized into – Good, Average, and Poor mental health levels; Low, Average and High Occupational Stress and Internal and External Locus of Control. On these groups and subgroups, Burnout Inventory will be administered.

Obtained raw scores on Burnout Inventory will be sujected to various statistical techniques – Mean, Median, Mode, Standard Deviation and t-test. For a comparative graphical study of Burnout tendency of various groups and subgroups, Bar diagrams will be drawn.

Delimitations of the study

The present study due to its nature had certain delimitations. Since the study was focused on the teachers working at different level of institution.

The sample was chosen from educational institution and respondents belong to academic institution not professional institution.

The respondents were selected from Western Uttar Pradesh. Poorvanchal is a blend of our ancient and modern culture. The poorvanchal has been known for its culture and heritage and recently it has been a part of the modernization plans.

In this region new educational institutions are establishing. These institutions are attracting the teacher from all parts of the state as well as from state of the country, thus enabling for a better study of variables.

The study focussed on teachers teaching at different level of institution only because a review of preceeding investigations revealed a dearth of study of Burnout tendency on teachers. To study the Burnout tendency among teachers is a need of the our because teacher is a nation builder. He is teaching and training the future of the nation. Teacher must be physically mentally, socially, economically healthy so he will teach effectively and efficiently. This study will be helpful to know the causes of Burnout among the teachers teaching at different level of Institution.

5. CONCLUSION:

This is particularly true regarding the study of mental health problems in the general popula tion with a view to find out factors contributing to mental health.

Apart from the researches on personality and mental health a number of researches on various other factors relating to mental ill health in the Indian cultural context reveal a similar trend of using clinical samples .

The aim was also to study whether there exist any relation between the burnout tendency of school and college teacher and their Occupational Stress, Mental Health and Locus of Control.

Is there any difference in the Burnout tendency of teachers belonging to good, average and low metal health levels?

There will be significant difference in the burnout tendency of school and college teachers belonging three levels of mental health

REFERENCES

- Allport, G.W. and Allport. F.H. (1921). Personality Traits: Their classification and Measurement, Journal of Abnormal Social Psychology, VI. 16, 6 40.
- ♣ Ameerjan, M.S.; Girija, P.R. and Bhadra, B.R. (1978). Academic achievement and its relationship to General Mental ability, Academic adjustment and Neuroticism. Journal of Educational Psychology, 36(3), 107 112.
- ♣ Bergman, B.; Ahmad, F. and Stewart, D.E. (2003), Physician health, stress and gender at a university hospital. Journal of Psychosonatic Research, 54(2),171 178.
- Berkeley Planning Associates (1979). Evaluation of child abuse and neglect demonstration projects.
 9: Project Management and worker burnout. Springfield VA: National Technical Information Service.
- Cherniss, C. (1980a). Professional burnout in human service organizations, New York: Praeager Stevenson.
- Cherniss, C. (1980b). Staff burnout: Job stress in the human services. Sage studies in Community Mental Health, Beverly Hills, CA: Sage publication.
- ♣ Densten, lain L. (2001). Re-thinking burnout. Journal of Organizational Behavior. 22(8), 837 847.
- ♣ Etzion, Dalia. (2003). Annual vacation: Duration of relief from job stressors and burnout. Anxiety, Stress & Coping: An International Journal, 16(2), 213 226.
- Freudenberger, H.I. (1974). Staff burnout, Journal of Social Issues, 30, 159 -165.
- Guilford, J.P. (1964). Progress in discovery of intellectual factors in trailors (Eds.) Widening Horizon in Creativity. New York: Wiley.

