BEHAVIOURAL PROBLEMS AND SELF ESTEEM OF ADOLESCENTS- AN EMPIRICAL STUDY

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ABSTRACT:

Adolescence is a precious time period in one's life. But to pass through this period, everyone felt as a tunnel experience. Once passed and come out of this period every one might feel their life identity either positive or negative. If properly nurtured during this period, it would bear fruits in their later stage and if not, it will end up in utter chaos.

This study is being done among the Higher Secondary school children who are in the middle of adolescent ages. 60 samples were taken from different talukas of Ernakulam District, Kerala, India. Both standardized Behavior scale and Self Esteem scales were used to collect data from the population. The result showed that certain variables of behavior problems were very high among this particular age group of adolescent boys. In the same way, self esteem of this children were very pathetic, as it showed very low self esteem in this study. These data suggest urgency in bringing Targeted Intervention packages to cope with their day to day life.
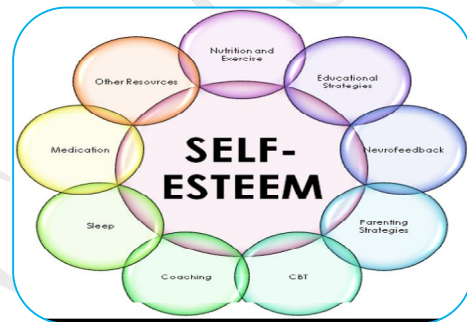
KEYWORDS: Adolescents, Behavioural problems and Self Esteem.

INTRODUCTION:

The term adolescence is a fascinating concept. Each human person on this earth has to pass through the period of adolescence in their life. In this passing period, many achieve success and many fail to cross successfully which in later life end up in miseries. Human behaviors changes in each and every moment of our life. It is not predictable. In the next moment what we are going to do, nobody knows. For us, it is very difficult to understand. Everyone has their own traits and it exhibits its personality or behavior. Behavioral problems are quite natural in adolescent period. When it crosses the limit, it becomes unhealthy for the person, the community and the society. If they can cope with these problems and get rid of from all those negativities, one can definitely attain success and make the society a heaven for all.

Behavior exhibits a great deal of self esteem in every individual. Just as the saying, from the fullness of heart mouth speaks, from a high self esteem, a proper behavior comes out. It is said that behavior problems are those forms of behavior which indicate that something is wrong with the child himself or with the environment in which he lives. In Verma's view behavior problem is nothing but a deviation from the accepted pattern of behavior on the part of an individual in society **(Devadas, P. & Jaya, N. 1996).** WHO estimate showed that up to 20 per cent adolescent have one or more mental or behavioral problems **(The World Health Report 2001)**. Studies conducted

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in different parts of the World showed that prevalence of behavioral and emotional problems in adolescents, ranges from 16.5 per cent to 40.8 per cent **(Robert 1998, & Jenson, 1995)**. In India, it is the range of 13.7 per cent to 50 per cent **(Mishra, 2001 & Belfer, 2005)**.

REVIEW OF LITERATURE

Pathak et al. (2011) conducted a study on behavioral and emotional problems in school going adolescents. This study was aimed at to explore the prevalence and patterns of behavioral and emotional problems in adolescents.   The study showed that the overall prevalence of behavioral and emotional problems across age and sex categories was 30.4%. On analysis of pattern of emotional and behavioral problems in adolescents, it was found that internalizing syndrome (28.6%) was the most common problem among them followed by neither internalizing nor externalizing (19.5%) group. In Internalizing group, most of the students (22.08%) were noted anxious/depressed. Social problems were observed to be the most frequent (9.3%) among neither internalizing nor externalizing group. Aggressive behavior was the commonest (11.8%) among externalizing group.

More boys (18.4%) than girls (12%) were found to suffer from externalizing disorders. 13.3% males had aggressive behavioral problem as compared to 9.7% females. Problem of rule breaking or delinquency was twice more in boys as compared to girls. Adolescents with low self esteem (30.7%) as judged from their opinion about their appearance, academic performance and over all opinion about self suffered more (65%) behavioral and emotional problems as compared to those who did not report feelings of low self esteem (14%). Finally, the researchers gave an important suggestion that there is an inevitable need for multipronged intervention to prevent behavioral and emotional problems among adolescents.

Dhal et al. (2015) conducted a study on emotional, behavioral, social and academic outcomes in adolescents born with very low birth weight. Very low birth weight boys reported less externalizing and internalizing behaviors and thought and attention problems and higher activity score, where as very low birth weight girls reported less externalizing behavior and less social thought and attention problems and higher activity score compared with normative adolescents. Since their findings were paradoxical they suggested intervention programmes for longitudinal studies.

Rao. N (1985) conducted a study on certain sociological background variable of self esteem in high school children. The study aimed to see the relation between certain sociological background variables and self esteem in children. The Researchers said that when they went through the study they understood that socio-cultural background had some influence on the self esteem of children.

RESEARCH METHODOLOGY

The Methodology used in this research was quantitative study. Similarly, the research design used in this was descriptive in nature. The universe of the population consists of school going adolescents studying (for Plus One and Plus Two) in Higher Secondary in Ernakulam district, Kerala, India.

There are seven Talukas in Ernakulam District, namely Aluva, Kanayannur, Kochi, Kothamangalam, Kunnathunadu, Muvattupuzha and Paravur. Simple Random Sampling was used. The Sample consisted of 8 each from Kanayannur, Kochi, Kothamangalam, Muvattupuzha and Paravur and 10 samples were from Aluva and Kunnathunadu respectively. So the total samples were taken 60.

OBJECTIVES
1. To study the socio-demographic profile of respondents.
2. To study and analyze the behavioral problems of respondents.
3. To understand the self esteem of respondents.

TOOLS OF DATA COLLECTION

The Researchers used two scales and one background profile to bring out the reality of research. First of all, the researchers operated Socio-demographic profile and then proceeded with the scales. The

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First scale Behavioral and emotional problems were assessed by the Self Report of Children developed by T.M. Achenbach in 2001. It is a questionnaire used widely to screen adolescents with psychiatric problems. The content, criteria and construct validity of this questionnaire has been supported by four decades of research consultation, feedback and revision, as well as by findings that all items discriminated significantly (P< .01) between demographically matched referred and non-referred children. In various studies conducted in world, the sensitivity and specificity of this questionnaire has been found to vary from 85%-100% and 30%-40% respectively. This questionnaire is valid for ages 11-18years. The Scale identifies emotional/behavioral problems in three groups (comprising of subgroups)–internalizing (withdrawn depressed, anxious depressed and somatic complaints) externalizing (rule breaking behaviors and aggressive behaviors) and neither internalizing nor externalizing (social problems, thought problems and attention problems).

The Second one the Researchers used was self esteem scale of Rosenberg developed in 1965.The Rosenberg Self Esteem Scale is a 10 item instrument to measure self- esteem. Scale Format - Likert type scale, ranging from strongly agree - strongly disagree. 10 items Scores are calculated as follows: For items 1, 2, 4, 6, 7: strongly agree=3, agree=2, disagree=1, strongly disagree=0. For items 3, 5, 8, 9, 10: strongly agree=0, agree=1, disagree=2, strongly disagree=3. The scale score ranges from 0-30, a higher score denotes higher self-esteem. Test-retest Reliability - Correlations range from .82 to .88. Internal Consistency - Cronbach's alpha range from .77 to .88.

RESULTS AND DISCUSSION

From the socio-demographic profile the researchers arrived at certain conclusion. 50% of the respondents were at the age of 16 years and 50% of them were 17 years of age. With regard to religion 90% of them were Hindus and only 10% were Christians. In the same way, 50% of them were in Plus One and the rest 50% were studying in Plus Two. Regarding their domicile 83.3% were from rural areas and only 16.7% were from urban areas. With regard to family type, all of them were nuclear family and nobody was there from joint family.

With regard to their birth order 53.3% were the first child in their family. 26.7% were last child in their home and hence 20% were middle birth order in their house. Considering the number of siblings, the respondents reported that 50% had two siblings in their home. 46.7% had only one sibling in their home. Likewise only 3.3% had four siblings in their home.

With regard to their habits, 93.3% did not have the habit of thumb sucking. 86.7% did not have crying habits. 93.3% did not have screaming habits. Similarly, 80% of the respondents did not have the habit of nail biting. All the respondents reported that they do not have bed wetting. 40% reported anger outburst where as 60% did not have anger outburst. 36.7% reported that they have the habit of sleeplessness. 80% did not have the habit of nightmares.

With regard to substance use of the respondents, 70% of them was using alcohol. 80% reported that they are not using Chewing Tobacco. Only 10% of them were using Panmasala. Nobody was using sniffing Glue as substance. 83.3% were not using any type of drugs. 36.7% had the addiction of smoking in their life. 83.3% were not using any kind of solution as a substance.

With regard to the overall behavioral problems, the lower score of the respondents were 53.3% and the higher score of respondents were 46.7%. So this result is in line with the findings of Mishra and Belfer that the prevalence of behavioural and emotional problems among adolescents ranges from 13.7 per cent to 50 percent. Now let us see the Distribution of respondents by the various dimensions of their level of behavioral problems.

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Table 1
Distribution of respondents by the various dimensions of their level of behavioral problems.

Dimensions	N= 60	%
Withdrawn		
Low	34	56.7
High	26	43.3
Somatic Complaints		
Low	34	56.7
High	26	43.7
Anxious/Depressed		
Low	4	6.7
High	56	93.3
Social Problems		
Low	26	43.3
High	34	56.7
Thought problems		
Low	22	36.7
High	38	63.3
Attention problems		
Low	10	16.7
High	50	83.3
Delinquent Behavior		
Low	18	30.0
High	42	70.0
Aggressive Behavior		
Low	38	63.3
High	22	36.3

As far as withdrawn variable is considered the low percentage of the respondents were 56.7% and high percentage of respondents were 43.3%. For somatic complaints low percentages of respondents were 56.7% and high percentage of respondents were 43.3%. Likewise Anxious/Depressed variable showed low as 6.7% and high as 93.3%. Social problems showed low 43.3% and high as 56.7%. With regard to thought problems low was 36.7% and high was 63.3%. In the same way, for Attention problems low was 16.7% and high was 83.3%. For Delinquent behavior, low was 30.0% and high was 70.0%. So, this is in line with Pathak et al (2011) that Delinquent behavior is very much high among adolescent boys. Hence Aggressive behavior of respondents was low as 63.3% and high was 36.3%.

Total behavioral problems of the respondents were 53.3 percent as low and 46.7 percent as high. Total internalizing score which comprised of Withdrawn, Anxious/Depressed and Somatic Complaints of the number of respondents were 63.3% as low and 36.7% as high. In the same way, total externalizing score which comprised of the variables such as Delinquent Behavior and Aggressive behavior, the low score was 66.7% and high score was 33.3% respectively. Apart from this neither internalizing nor externalizing score was brought out which comprised of the Social problems, Thought problems and Attention problems and thus the low score was 53.3% and high score was 46.7%. Behavior problem scale has 112 items and in this 20 items do not constitute behavioral problem and they are termed as other problems. For Other problems of respondents the low score was 60.0% and high score was 40%.

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Table 2
Distribution of respondents by the levels of self esteem

Dimensions	N= 60	Percent
Low	34	56.7
Average	16	26.7
High	10	16.7

With regards to the level of self esteem of respondents 56.7 percent had the low level of self esteem and average level was 26.7 percent. Hence only 16.7 percent had high self esteem. This finding is similar to that of Pathak et al (2011) that adolescents have very low self esteem with behavioural problems.

Table 3
Relationship between self esteem of the respondents and overall behavioral problems

Variables	Correlation Value	Statistical Inference
Self esteem and	-.159	P>0.05
Behavior problems		Not Significant

Table 3showed that there was no significant relationship between self esteem and over all behavior problems and P>0.05 level.

Table 4
Difference between Educational qualification of the respondents and Self esteem

Self esteem variable	N	M	SD	t	Sig
Plus One	30	16.53	2.649	.851	P>0.05
Plus Two	30	16.07	1.413	df=58	Not Significant

Table 4 showed that irrespective of educational qualification there was no significant difference between self esteem and them. The Number of respondents was divided into 30 each. The Mean value was 16.53 and 16.07 respectively. And 't' score was .851 and df was 58. Thus, P value was greater than 0.05 levels. This finding is in sharp contrast to Pathak (2011) study that educational qualification influence self esteem.

Table 5
Difference between Educational Qualification of the respondents Overall behavior Problems

Variables	N	M	SD	t	Sig
Plus One	30	53.60	11.708	.658	P>0.05
Plus Two	30	56.67	22.684	df=58	Not Significant

Table 5 showed that there was no significant difference between Educational Qualification of the respondents with overall behavioral problems. 't' value was 0.658 and df was 58 and hence P>0.05 level.

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Table 6
Relationship between Ages of the respondents with regard to self esteem.

Variables	Correlation Value	Statistical Inference
Age and Self esteem	-.111	P>0.o5
		Not Significant

Table 6 showed that with regard to age of the respondents and self esteem there was no significant relationship.

Table 7
Relationship between Ages of the respondents with regard to overall behavioral problems

Variables	Correlation Value	Statistical Inference
Age and Overall	.086	P>0.05
Behavioral problems		Not Significant

From table 7 anyone could understand that there was no significant relationship between age and Overall behavior problems of the respondents.

Table 8
Association between Domicile of the respondents and Self Esteem

Domicile of the Respondents	Self Esteem Category			Statistical Inference
	Low	Average	High	
Rural	28(56.0%)	12(24.0%)	10(20.0%)	$x2 = 2.824$
Urban	6(60.0%)	4(40.0%)	0(0.0%)	df = 2
				P>0.05
				Not Significant

Table 8 showed the domicile of the respondents with self esteem. It inferred that with regard to self esteem category there was no significant association between domicile and self esteem. So, the P>0.05 level.

Table 9
Association between Birth Order of the respondents and Self Esteem

Birth Order of the Respondents	Self Esteem Category			Statistical Inference
	Low	Average	High	
First	14(43.8%)	12(37.5%)	6(18.8%)	$x2 = 5.415$
Last	12(75.0%)	2(12.5%)	12(12.5%)	df = 4
Middle	8(66.7%)	2(16.7%)	2(16.7%)	P>0.05
				Not Significant

Table 9 showed that association between birth order and self esteem. It had no association with self esteem irrespective of birth order.

From the Behavior problem dimension the researchers comes to know that the anxious/depressed problems were very high among this particular population. Similarly attention problems were very high when considering other problems. Considering the self esteem of the respondents more than half has got very low self esteem. When the researchers made the relationship between self esteem and overall behavioral problems, there is not at all a significant relationship the researchers could find. When compared the educational qualification and self esteem, there is no significant difference between them. Similarly the overall behavior problems and educational qualification shows no significant difference at all.

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      Another important thing the researchers found out that the age does not make a significant relationship between self esteem and over all behavior problems. The Association between the domicile and self esteem shows that the self esteem is very low for rural respondents. Thus, there is no significant association between these two variables. Likewise, association of birth order and self esteem of respondents, it does not affect at all between these two variables. Irrespective of birth order more than half of the respondents fall into very low self esteem. Rao N. (1985) conducted study that socio-cultural background had some influence on the self esteem of children. But in this study, socio-demographic background had no influence on the self esteem of children

CONCLUSION

      From this study the researchers understand that certain variables of behavior problems among adolescents are very high such as anxious/depressed, social problems, thought problems and delinquent behavior. All these problems should be addressed in a proper manner. Adolescence is the peak period where child starts to feel his identity as something precious in their life. During this time proper attention should be given from the elders. A Well planned intervention is needed to reduce the behavior problems among this sizeable population. When compared the internal problems and external problems, the internal problems are high among adolescents of this particular age. Self esteem of these children are very low. So to say, they should be given a kind of moral support to boost their worthiness in a special way. Their problems and worries should be well addressed. Then only these children can grow as a true citizen of the society. Society has the sole responsibility to bring up the children, especially this particular age group of adolescent children, for the betterment of tomorrows world. Hence the researchers feel that to increase their self esteem and reduce behavior problems, effective meticulous plan can be brought out by the counselor, researchers and all those who are working in the field of adolescent children. A lot of studies have been done on adolescents still we lack something to improve their life. We need to do a thorough check that where is the real problem in this system to address their issues in a proper way. If the system is corrupt, first we need to change that and then only there will be greater level of adolescent development can take place.

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