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Gender differences in the mental health, peer support and perceived problems of rural adolescents

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Abstract

This study investigates gender differences in mental health, peer support needs, and perceived problems among rural adolescents in India. A sample of 200 students (100 boys and 100 girls) from rural government schools was assessed using the Mental Health Battery, Peer Support Need Checklist, and Beck Youth Inventory. Findings revealed notable gender differences across multiple dimensions of mental health. Girls showed higher levels of emotional instability and poor overall adjustment, with significant differences in emotional stability and adjustment levels compared to boys. Boys demonstrated greater autonomy and self-concept, while girls reported more insecurity. Despite similar levels of intelligence, girls perceived a greater need for peer support across educational, emotional, and social domains. Although both genders mostly did not perceive problems like anger or disruptive behavior, girls reported higher scores in anxiety, depression, and anger. These results indicate that rural adolescent girls may be more vulnerable to emotional and psychological challenges than boys, possibly due to sociocultural expectations and restricted autonomy. The findings underscore the importance of gendersensitive mental health interventions and peer support systems in rural educational settings to promote adolescent well-being and development.

Keywords: Rural adolescents, gender differences, mental health, peer support, perceived problems, emotional stability, adjustment

Introduction

Adolescents constitute 16% of world's population (UNICEF, 2020) [2]. Though the proportion of adolescents is on the decline since 1980, the absolute number is on the rise. More than half of all adolescents live in Asia, especially South Asia. Of the 350 million adolescents from South Asia, about 243 million are from India; 21% of the Indian population (Sivagurunathan C. 2015) [1]. They represent the potential influencers of future economic growth and development and this period between 10 to 19 years of life is the ground for investment and provides a window of opportunity for laying a strong foundation to a brighter and healthier future. Due to lack of attention sometimes from parents, peers or teachers, adolescents may interpret their living situation as hopeless. They seem to be emotionally depressed which often distort their reasoning abilities. Most of the adolescents do not face any health issue, but there are still problems of early death, disease, and trauma among them. It becomes a hindrance to utilize their full potential. The global adolescent death rate was 101.37 per 100 000, mostly from preventable causes. Africa and Southeast Asia have almost 19% and 30% of the world's adolescent population, respectively. In 2015, nearly two-thirds of the global adolescent deaths and disability-adjusted life year (DALYs) lost are from these regions (WHO, 2020) [4]. It's an old saying that a healthy body resides a healthy mind. As lifestyle of Indians in general and rural people in specific is changing, so is lifestyle related problems has its manifestation in the form of diseases like hypertension, anxiety, cardiovascular disease (CVD), depression, etc. Mental illness is now recognized as public health issue. Initially in India identification of mental health issues and endeavor to mitigate the effects of same was at a slower pace but now every year more and more efforts are being put in by the stakeholders but still the situation is grim. The Government of India launched the National Mental Health Programme in 1982 and among its several thrust areas-creating awareness and reduce stigma related to mental health problems and providing data on future planning in improvement of services and research were primarily the focus.

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Punjab Agriculutural University, Ludhiana, Punjab, India Adolescent's main fear in relation to peers is that they may not be labels as "different" and their increased reliance on the peers actually makes them more vulnerable. If the peer support is good of adolescent many of the mental problems can be resolved. If an adolescent has a good company of friends than the state of mind will be good, constructive, and innovative. If an adolescent has a bad company and peers are supporting him to do the work which is suitably not preferred socially than that a create problem. A person may feel depressed and stressed all the time and it may also harm the social connections (family, relative or society). The findings of the research conducted by Shively *et al* (1989) also reflected that social isolation make adolescent's prone to mental illness.

The new virus named as novel corona virus (COVID-19) was recognized first in December 2019. The COVID-19 has spread rapidly throughout the globe. People were suffering from many health consequences and it has also devastating socio-psychological and economic uncertainty. Adolescence is a particularly vulnerable period. It is the period when a children experience heightened stress because at this age child adapt to the many changes such as physical maturation, brain development, social expectations and increased salience of peer interaction. The lockdown during COVID-19 had multifaceted consequences on the mental health of adolescents. Sudden school closures, limited physical activity and lack of peer interaction may be detrimental to the overall

wellbeing of children.

Objectives

To assess gender differences in mental health, peer support and perceived problems among rural adolescents.

Methodology

The study was conducted on 200 adolescents studying in classes 9th, 10th, 11th and to 12th in rural government schools. Total sample was comprised of (n1= 100 girls and n2=100 boys.). To collect information about the sociopersonal characteristics of the selected respondents, a general information sheet was prepared. Mental health of adolescents was assessed by administering Mental Health Battery (MHB) developed by Singh and Gupta (2000). This battery comprised six dimensions namely: 'Emotional Stability', 'Adjustment', 'Autonomy', 'Security-Insecurity', 'Self-concept' and 'Intelligence'. Self-structured Peer Support Need Checklist was used to collect information on perceived need of peer-support by the respondents. It consisted of total 52 items divided into three dimensions like educational (=13), social (=22) and emotional (=17). Beck youth inventory was used to assess the perceived problems of the respondents.

Gender differences in mental health among rural adolescents

Table 1: Gender differences in per cent distribution of adolescents across various 'dimensions of mental health'.

		Proportions of Adolescents (n=200)		
Dimensions of Mental Health	Levels of Mental Health	Boys (n1=100) Girls (n2=100)		
		%	%	Z-test
	Very Poor	20.00	22.00	0.34
	Poor	12.00	14.00	0.42
Emotional Stability	Average	34.00	31.00	0.45
•	Good	8.00	21.00	2.61*
	Excellent	26.00	12.00	2.52*
	Very Poor	20.00	19.00	0.17
	Poor	36.00	20.00	2.51*
Overall Adjustment	Average	19.00	22.00	0.52
	Good	17.00	24.00	1.22
	Excellent	8.00	15.00	1.55
	Very Poor	21.00	20.00	0.17
	Poor	27.00	26.00	0.16
Autonomy	Average	11.00	16.00	1.03
•	Good	22.00	15.00	1.27
	Excellent	19.00	23.00	0.69
	Very Poor	31.00	21.00	1.61
	Poor	22.00	28.00	0.97
Security- Insecurity	Average	13.00	22.00	1.67
	Good	13.00	15.00	0.40
	Excellent	21.00	14.00	1.30
	Very Poor	16.00	23.00	1.24
	Poor	18.00	17.00	0.18
Self-Concept	Average	31.00	19.00	1.95
	Good	12.00	21.00	1.71
	Excellent	23.00	20.00	0.51
	Very Poor	29.00	29.00	0
	Poor	18.00	14.00	0.77
Intelligence	Average	28.00	22.00	0.97
	Good	12.00	15.00	0.62
	Excellent	13.00	20.00	1.33
	Very Poor	31.00	28.00	0.46
	Poor	25.00	17.00	1.38
Total	Average	18.00	23.00	0.87
	Good	13.00	19.00	1.15
	Excellent	13.00	13.00	0

^{*} Significance at 0.05

^{**} Significance at 0.01

Table depicted that Large proportion of girls (34%) and boys (31%) had an average level of emotional stability. Significant differences were observed in the proportions of boys (21%) and girls (8%) in "good and excellent level (girls 26% and boys 12%) of emotional stability. It may be concluded that boys did not feel anger when criticized by someone but they feared when slightly reprimanded by their parents, they did not feel bad when could not reply to a question by the teacher. Girls reported that after losing in games they never blamed their friends and never thought about suicide if failed in one subject or the other. Large number of girls had poor (36%) and very poor (20%) level of 'Overall Adjustment' in comparison to other levels. Whereas 17 percent and 8 percent fall in the category of good and excellent level of adjustment. With respect to dimension "adjustment" girls reported that they don't feel good when they have to remain at home and could not attend the school, they have to think a lot before expressing themselves be at school or at home, they could not take initiative in taking social responsibility, often felt constipated, frequently complain of indigestion, felt helpless, could not participate in school competitions. Almost the same proportion of boys had good (24%), average (22%), poor (20%) level of 'Adjustment' and 19% boys had very poor adjustment whereas only 15% had excellent level of adjustment from the table, it may be concluded that in comparison to boys (20%) large proportion of girls (36%) had poor level of 'Overall adjustment and the proportion of boys (15%) having excellent level of adjustment was almost double than their counterparts (8%). Boys reported that they would like to meet with people, they quickly make people their friends, they like to be a leader in any social activities. Results showed significant gender differences (Z =2.51, p<0.05) in the proportion in 'poor' level of adjustment. In the dimension 'Autonomy' almost same proportion of boys (20%) and girls (21%) had 'very poor' level and similarly proportions of both boys (26%) and girls (27%) were almost same in 'poor' level of autonomy. Proportion of boys (23%) was more in comparison to the girls (19%) in the excellent level of autonomy. Boys reported that when they were with their friends most of the time they take decisions of their friends and ignore their parents' decisions whereas girls reported that they hesitate to take any decision without their parents' consent.

In dimension of 'Security- Insecurity' results revealed that combined proportion (very poor and poor level) of girls (53%) in the dimension of security was more in comparison to the combined proportions of boys (49%) and similarly combined proportion (good and excellent level) of girls in the dimension of autonomy was more (35%) in comparison to their counter parts (boys 29%). Respondents with good and excellent level of autonomy revealed that they have good trust on their friends, they were independent in meeting new people, people often appreciated them and they did not fear competition whereas respondents with poor level of autonomy revealed that they felt lonely even with friends, they could not go out all alone, they fear in the absence of their parents, they could not express freely to others and they felt as if they were devoid of happiness and they often felt sad. In dimension of 'self- concept', results revealed that the combined proportion of boys (40%) in poor and very poor level of self-concept was comparatively more than the girls (24%) whereas proportion of girls (31%) in average level was comparatively higher than the boys (19%). Similarly, the combined proportion of boys in good and excellent (41%) level of self-concept was comparatively more than the girls (35%). Respondents with good and excellent level of self-concept revealed that they perceived themselves to be mature, possessed good knowledge, they were problem solvers, often faced challenges while progressing in life, they perceived their success had always been effective. Respondents with poor and very poor self-concept revealed that they often felt they could achieve very less despite hard work. Their personal habits were hindrances in their achievements and their achievements were definitely not appreciable.

Equal proportion of both boys (29%) and girls (29%) had very poor level of 'Intelligence'. Proportion of girls (18%) who were poor in the 'intelligence' dimension in comparison to boys (14%) was more and similarly more number of girls (28%) were in the average level of intelligence in comparison to boys (22%) whereas large proportion of boys (35%) had good and excellent level of intelligence in comparison to their counterparts (25%). Overall data revealed large proportion of girls in comparison to boys had poor (25%) to very poor (31%) level of mental health whereas large proportion of boys in comparison to girls had average (23%) to good (19%) level of mental health.

Table 2: Gender differences in mean scores of adolescents across different dimensions of mental health.

Dimensions	Adolescents (n=200)			
of Mental Health	Girls (n1=100)	Boys (n2=100)	t-value	
of Mental Health	Mean±SD	Mean±SD		
Emotional Stability	10.34± 2.64	10.00± 2.41	0.94	
Adjustment	26.76±3.72	27.74±4.79	1.61	
Autonomy	10.39±2.50	10.43±2.51	0.11	
Security-Insecurity	10.11±2.44	10.22±2.10	0.34	
Self-Concept	10.30±1.76	9.79±2.18	0.85	
Intelligence	19.97±4.85	20.54±5.18	0.80	
Overall Mental Health	87.70±13.27	88.65±13.88	0.49	

Data presented in table 2 revealed that in two dimensions 'emotional stability' and 'self concept' of mental health, mean scores of the girls were comparatively more than their counter parts whereas in rest of the dimensions like adjustment, autonomy, security-insecurity boys had higher mean score than the girls.

Overall mental health depicted non-significant gender differences across different dimensions of mental health which includes 'emotional stability', 'adjustment', 'autonomy', 'security-insecurity', 'self-concept' and 'intelligence'.

Table 3: Gender differences in per cent distribution of adolescents across various areas of peer support

Peer Support Need		Proportions of Adolescents (n=200)			
Areas	Level of Peer Support Need	Girls (n1=100)	Boys (n2=100)	Z-test	
	Mostly	23.0	25.0	0.33	
Educational	Occasionally	76.0	74.0	0.32	
	Never	1.0	1.0	0	
	Mostly	22.00	28.00	0.97	
Social	Occasionally	73.00	70.00	0.46	
	Never	5.00	2.00	1.15	
Emotional	Mostly	4.00	10.00	1.66	
	Occasionally	34.00	34.00	0	
	Never	62.00	56.00	0.86	

In the table 3, assessment of peer-support-need of adolescents results indicated that majority of the boys and girls and almost equal proportion of girls (76%) and boys (74%) expressed that they occasionally needed peer support in 'educational' area like to excel in studies, to choose career, to participate in extra-curricular activities, to improve academic skills, to present their assignments effectively and to clear their doubts. Similarly, almost equal proportions of girls (23%) and boys (25%) reported that they needed support of their friends, classmates mostly in overcoming difficulties related to their studies, to complete assignments, to improve study habits. Only one percent of girls and one percent of boys reported that they never felt the need for support from their peers in educational activities.

In 'social' area of peer- support -need, majority of girls (73%) and boys (70%) expressed that they needed support of their peers on occasional basis and 22 percent of girls and 28 percent of boys expressed that most of the time they felt the need for support of their peers and very less proportion of girls (5%) and boys (2%) reported that they did not feel the

need of any support related to the social issues from their peers. Overall results indicated that comparatively more number of boys felt the need for the support from their peers than their counterparts in the social sphere like connecting to others through social media, to pass their time and to enjoy, to improve social status, to participate in social activities, to improve skills to communicate with opposite gender.

In 'emotional' area, majority of girls (60%) expressed that they did not feel the need for the emotional support from their peers, though majority of boys (56%) also felt the same but their proportion was comparatively less than the girls. Almost equal proportion (34%) of boys and girls (34%) expressed their need for emotional support from their peers but on occasional basis. Very less proportion of girls (4%) in comparison to the boys (10%) expressed the need for emotional support from their peers. Girls reported that during emotional crisis they relied on their parents and siblings rather than peers and others. Overall results indicated that girls were more emotionally resilient than boys.

Table 4: Gender differences in the mean scores of adolescents across different areas of peer support need.

	Adole		
Areas of Peer Support Need	Girls (n1=100)	Boys (n2=100)	t-value
	Mean±SD	Mean±SD	
Educational	81.59±16.32	77.61±22.74	1.42
Social	138.83±30.56	132.51±36.95	1.31
Emotional	99.69±19.96	95.71±23.85	1.27
Total	315.99±63.10	305.13±75.12	1.10

Table 4. In all the areas of peer -support need, mean scores of girls were comparatively higher than the boys which means girls expressed more need for support from their peers in

educational, social and emotional areas than boys. Though statistical differences were found to be non-significant.

 Table 5: Gender differences in Perceived Problems of rural adolescents.

		Proportions of Adolescents (n=200)		
Dimensions of Beck Youth Inventory		Girls (n1=100)	Boys (n2=100)	Z test
	-	%	0/0	
	Never	3.00	7.00	1.29
C-16 C	Sometimes	21.00	20.00	0.17
Self-Concept	Often	40.00	36.00	0.58
	Always	36.00	37.00	0.14
	Never	51.00	54.00	0.42
	Sometimes	42.00	37.00	0.72
Anxiety	Often	4.00	6.00	0.64
	Always	3.00	3.00	0
	Never	71.00	65.00	0.90
Depression	Sometimes	19.00	29.00	1.65
	Often	7.00	4.00	0.93
	Always	3.00	2.00	0.45
Anger	Never	63.00	76.00	1.99*

	Sometimes	34.00	19.00	2.40*
	Often	1.00	3.00	1.01
	Always	2.00	2.00	0
	Never	93.00	86.00	1.61
Diametiva Pahaviar	Sometimes	4.00	9.00	1.43
Disruptive- Behavior	Often	1.00	3.00	1.01
	Always	2.00	2.00	0
Overall	Never	39.00	47.00	1.14
	Sometimes	56.00	45.00	1.55
	Often	4.00	8.00	1.19
	Always	1.00	0.00	1.00

^{*} Significance at 0.05

The data in the table 5 indicated that in the 'Self-Concept' dimension, more number of girls (40%) in comparison to boys (36%) often perceived problems related to their self-concept. On contrary, more number of boys (7%) in comparison to girls (3%) never perceived problems. Similarly, in 'Anxiety' dimension also comparatively more number of boys (54%) in comparison to girls (51%) never perceived problems related to anxiety. Though equal but small proportion of both boys (3%) and girls (3%) always perceived problems related to anxiety. On assessment of 'Depression' dimension, data figures revealed that majority of respondents never perceived problems related to depression though girls (71%) proportion in comparison to boys' (65%) was more followed by large proportion of boys (29%) in comparison to girls (19%) who sometimes perceived problems related to depression. A very small proportion of boys and girls reported that they often and always perceived problems related to dimension 'depression'. In 'Anger' dimension, it was found that majority of respondents, boys (76%) and girls (63%), never perceived problem related to anger. whereas almost double of the boys' proportion (19%), the girls (34%) sometimes perceived problems related to anger. Results found to be statistically significant in never and sometimes category of perceived problems related to anger. In 'Disruptive behavior' dimension also depicted similar results like majority of respondent's girls (93%) and boys (86%) never perceived problems related to disruptive behavior. Whereas very small proportions and equal proportion of boys (2%) and girls (2%) always perceived problems related to 'disruptive behavior'. Similarly, very small proportions of boys and girls sometimes (9% and 4% respectively) and often (3% and 1% respectively) perceived problems related to 'disruptive behavior'.

Overall results indicated higher proportion of boys (47%) in comparison to the girls (39%) either never perceived problems similarly large proportion of boys (8%) in comparison to their counterparts (4%) often perceived problems whereas higher proportion of girls (56%) in comparison to the boys (45%) sometimes perceived problems. It may be concluded from the results that either girls were more resilient or they could not express their problems as clearly as boys as reflected in their selection of option (sometimes) rather than always or never.

Table 6: Gender differences in mean scores of adolescents across different dimensions of perceived problems of adolescents.

	Adolescents			
Dimensions of perceived problems	Girls (n1=100)	Boys (n2=100)	4 walna	
	Mean±SD	Mean±SD	t-value	
Self-Concept Self-Concept	41.78 ± 10.41	42.02 ± 11.76	0.15	
Anxiety	18.05 ± 10.02	17.11 ± 11.60	0.62	
Depression	15.08 ± 11.60	13.26 ± 11.84	1.09	
Anger	13.35 ± 10.88	11.70 ± 11.71	1.03	
Disruptive-Behavior	6.42 ± 8.86	8.15±10.88	1.23	
Overall	91.21 ± 32.02	87.90±31.28	0.73	

Results from the table 6 revealed that mean scores of girls were higher than the boys in the dimensions of 'anxiety', 'depression', and 'anger' whereas mean scores of boys were higher than girls in the dimensions 'self-concept' and 'disruptive-behavior' dimension of perceived problems among adolescents. However, the total mean scores of girls were found to be more than the boys. Overall Results statistically found to be non-significant.

Conclusion

Overall data revealed large proportion of girls in comparison to boys had poor (25%) to very poor (31%) level of mental health. Overall mental health mean scores depicted non-significant gender differences. Of all the dimensions, across two dimensions (emotional stability and self-concept) of mental health, mean scores of girls were comparatively more than their counter parts. Majority of girls and boys expressed that they occasionally felt the need for support from their peers in educational, social and the emotional areas though the mean scores of girls were comparatively higher than the

boys in all of the three areas which indicated that they perceived more need for the peer support in comparison to the boys. Majority of boys and girls often perceived problems related to self-concept only and in rest of the dimension's majority of both boys and girls never perceived problems. Mean scores of girls were higher than the boys in the dimensions of 'anxiety', 'depression', and 'anger' whereas mean scores of boys were higher than girls in the dimensions 'self-concept' and 'disruptive- behavior' dimension of perceived problems. Results indicated that overall mean scores of girls found to be statistically significant in never and sometimes category of perceived problems related to anger.

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