



ISSN: 0975-766X

CODEN: IJPTFI

Research Article

Available Online through

www.ijptonline.com

MENTAL HEALTH STATUS OF ZABOL CITY HIGH SCHOOL STUDENTS AND THE FACTORS INFLUENCING IT DURING THE ACADEMIC YEAR 2014-2015

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Received on 09-08-2016

Accepted on 05-09-2016

Abstract

Introduction: Mental health is the ability to communicate harmoniously and congruously with others, personal and social modification and resolution of conflicts, and satisfying personal desires in a fair and logical way. One of the reasons for the success of the educational system of each country is having healthy students and physical and mental problems cause educational failure and school dropouts. Therefore, considering students' mental health is of utmost importance.

Materials and methods: In this cross-sectional study, 365 male and female students who were studying in high schools of Zabol city during 2014 were studied. For data collection, a questionnaire is provided including background questions, 28 multiple-choice questions that explore four basic factors, including somatic symptoms, anxiety symptoms and sleep disorder, social dysfunction, and depression scale. In addition, the questionnaire validity is confirmed by studies and view point of professors. The questionnaire reliability is estimated at 80 percent according to Cronbach's alpha coefficient.

Findings: Among the students participating in the study, mental health scores earned by students were assessed as the following: 15 cases (4.1%) poor, 293 cases (80.3%) average, and 57 cases (6.15%) good. According to the findings, a significant relationship is observed between mental health among students and gender, age, educational level, and field of study ($P < 0.05$); however, no significant relationship is observed with parents' education, parents' jobs, and household income ($P > 0.05$).

Conclusion: Despite the average health index measured in this study, its negative relationship with age can be alarming and indicates a lack of serious attention to this issue from home and school authorities and its irreparable consequences for the future young generation.

Keywords: mental health, adolescence, mental health questionnaire

Introduction: World Health Organization (WHO) has defined health as a state of complete physical, mental and social well-being. Human health has been an issue from its inception, but whenever it is mentioned, generally, its physical aspect has been considered and less attention has been paid to its mental aspect (1). According to WHO statistics, about 52 million people in the world in different ages suffer from severe mental illness and 250 million people have a mild mental illness, In Iran also, the statistics are no less than other countries according to the available information (2). Mental health of people in advancing national and ideal goals of communities is the most important factor in saving the spiritual and material costs. According to the available findings, mental disorders are one of the most significant of the total load of diseases and it is predicted that by 2020 the share of mental and neurological disorders from the total load of diseases will increase by 50% and reach 15 percent of the total load of treatment of diseases from the current 10.5 percent. The prevalence of mental disorders in adolescents in different cities of Iran has been reported from 10% to 40% and statistics indicate an increase in these disorders in adolescents. (4, 5 and 6). In these years, due to the industrialization and migration, half of the world population live in cities and suburbs and this has altered social and economic conditions and increased stress and social and psychological problems (7). The rate of mental disorders prevalence is rising and mental prevalence in Iran has been reported as 8-23% (8 and 7). Mental disorders of students will create a lot of problems in life and can affect family, school and community. Mental disorders cause educational failure of students and impairment of cognitive, emotional, moral and social development (8). Mental health is a specific state of psyche which improves growth and perfection of human personality and helps the individual to be compatible with himself, and others (9). Students make up a large part of the population of our community and this group will be the leaders of tomorrow's community. One of the reasons for the success of the educational system of each country is having healthy students and physical and mental and physical problems seriously affect the education of students and is sometimes followed by educational failure and school dropouts. Therefore, considering students' mental health is of utmost importance and mental health is an important and fundamental part in maintaining physical health. In order to prevent mental disorders at schools, studying for diagnosing the signs of mental health problems among students is essential and to deal with possible mental disorders,

access to information can reinforce mental health programs. Considering the issue of mental health at schools, social support program and mental health promotion have reached positive results in many studies. Attempts to improve health level of students and consequently helping to achieve the objectives of the educational system, increasing the collaboration between students and teachers, and reducing school dropouts and academic failure are essential and of overall objectives of this study is to evaluate the general health status of male and female high school students of Zabol City.

Method:

In this cross-sectional study, 365 male and female students who were studying in high schools of Zabol city during 2014 are studied. By using multi-stage cluster sampling method, after explaining the objectives of the study and ensuring the confidentiality of the information, students who were willing to cooperate entered the study and a questionnaire was given to each student to answer.

In order to assess the participants, General Health Questionnaire (GHQ28) whose validity and reliability are confirmed and Cronbach's alpha coefficient is estimated 80 percent, is used (10). The questionnaire contains 28 multiple-choice questions for data collection that explore four basic factors, including somatic symptoms, anxiety symptoms and sleep disorder, social dysfunction, and depression scale. For mental health score, 4 marks were assigned to each question and students are graded based on the accuracy of the answers from 1 to 4; then, by adding up the total scores, they are classified into three categories, less than 37 points as poor, 38 to 75 points as average, and higher than 76 points as good.

Reliability of the questionnaire which has been used in numerous studies is confirmed after entering data that is estimated 80 percent according to Cronbach's alpha coefficient. At the end, the data are analyzed by SPSS software version 21. By using t-test and ANOVA statistical tests and by considering $p < 0.05$ as the significant level, results are presented in the form of descriptive statistics (frequency, mean, standard deviation). For classification of mental health rate, the total points are divided into three parts; scores less than 33 percent are considered as poor, 33-66 percent as average, and scores higher than 66% as good.

For mental health score, 4 marks were assigned to each question and students are graded based on the accuracy of the answers from 1 to 4; then, by adding up the total scores, they are classified into three categories, less than 8 points as poor, 9 to 16 points as average and higher than 16 points as good and for mental health scores less than 37 as poor, 38 to 75 points as average and higher than 76 points as good.

Results:

Mean age of participants is 15.5.186 (51%) of respondents are male and 197 (0.54%) were studying the general field in the first grade. Also other demographic information of students under study is presented in Table 1.

Table 1: Demographic information of students under study.

P-value	Percent	Number			P-value	Percent	Number			
05.0>	54	197	1st	Grade	05.0>	51	186	Male	Gender	
	6.15	57	2nd			49	179	Female		
	8.20	76	3rd		05.0>	7.53	196	General	Major	
	6.9	35	4th			5.17	64	Humanities		
05.0<	1.36	132	Worker	Father's job	05.0<	8.28	105	Natural Science		Mother's job
	4.18	67	Employee			9	33	Employee		
	7.33	123	Self-employed		05.0<	9.90	332	Housewife	Mother's education	
	8.11	43	Unemployed			3.32	118	illiterate		
05.0<	51	186	Less than 0.5 million	Household monthly income	05.0<	4.61	184	Diploma and lower		Father's education
	3.29	107	to 1 0.5 million			3.6	23	Higher than diploma		
	2.11	41	to 1.5 1 million		05.0<	5.17	64	illiterate	Father's education	
	2.5	19	More than 1.5 million			9.69	255	Diploma and lower		
	3.3	12	More than 2 millions			6.12	46	Higher than diploma		

Based on the following results of the study conducted on the mental health of students, an average mental health is evaluated for most students. The results are presented separately in Table 2.

Table 2: Mental health rate in students under study.

Mental Health	Number	Percent
Poor	15	1.4
Average	293	3.80
Good	57	6.15
Total	365	0.100

According to the findings, based on one way ANOVA statistical test of analysis, a significant relationship is observed between mental health among students and gender, age, educational level, and field of study ($P < 0.05$); however, no significant relationship is observed with parents' education, parents' jobs, and household income ($P > 0.05$). Also, according to independent T-test, there is a significant relationship between mental health rate among students and gender ($P < 0.05$). Among students with poor mental health score (scores less than 37 are considered as poor, 38 to 75 points as average and higher than 76 points as good), 5 (33.33%) of them are 17-year-old, 12 of them (80%) were female; also, 7 of them (46%) were in the second grade of high school and 11 of them (33.73%) were studying humanities.

Among students with average mental health score, 108 people (36.86%) were 15-year-olds, 152 people (51.87%) were female and 156 (53.58%) were studying the general field in the first grade.

Among students with good mental health score, 24 people (42.1%) were 15-year-olds, 42 people (73.68%) were male and 39 people (68.42%) were studying the general field in the first grade.

Discussion and conclusion:

In this study, mental health of students is evaluated that 4.1% of students have poor mental health and are at risk, While 80.3 percent have average mental health and 5.6 percent have good mental health. In other studies, including Zarepour et al., 43.1 percent of students are suspected of mental disorders and 56.9 percent are healthy, such difference might be due to the limitation of Zarepour's study to the fourth year high school students (11).

In our study, there is a significant relationship between puberty (age period) and students' mental health ($P < 0.05$) and by increasing age they will decrease that the results of the study conducted by Romezpour et al. also considered puberty period as affecting the students' mental health, not their field of study, among the reasons for which we might consider the weakness of educational system in educational counseling and motivation sectors for students in levels of education in first and second grades of high school (12). In this study, mental health of students is linked to their academic major ($P < 0.05$) and it is not linked to parental employment status and household income ($P > 0.05$), these results are consistent with the study by Soltanian et al. The weakness of mental health in the field of humanities might be due to lack of attention of the educational system and parents to this field and its place in society and as for the lack of relationship between employment status and household income, one must bear in mind that students may not have provided correct information in this case and there is a need for closer inspection in future (13). In our research, a significant relationship is observed between mental health and gender ($P < 0.05$); however, no significant relationship

is observed with parental educational level and their jobs ($P>0.05$). In a study conducted by Masoudzadeh et al., the weakness of mental health in girls and the need for consult are shown and no relationship is found between mental health and the mother's education and it can be said that similarities between these two studies might be due to the urban population of students under study (14). In our study, age and school grade of students are linked to their mental health but with increasing age, mental health reduces; however, the study results conducted by Mousavimoghadam et al. showed that with increasing age, general health increases. The cause of this difference with our study is on the one hand the weakness of parents and educational system in academic and psychological guidance during the puberty period, and on the other hand, unclear employment and social status of students make them more likely to have emotional problems (10). In this study, no significant relationship is observed between the mental health of students with parents' educational level, occupation and household income ($P>0.05$) while in the study conducted by Zarepour et al., the results indicated a significant relationship between these variables. This might be due to the difference between the views of parents and children and lack of proper communication even among the educated and affluent class of society. But the high ratio of the number of female students to male students in both studies concerning poor mental health indicates the need for more attention to mental health status of female students because these people are one of the principles in forming a family in the future and this would help them to play the role of a mother better (11).

Conclusion

Finally, with regard to the results obtained in this study and the similarities it sometimes has with some of the research in this area, necessity of attention to mental health during puberty period, particularly among female students that will be effective in promoting public health is of much more importance.

Also, the results obtained and mental health decline with increasing age of students, especially among the students of the third and fourth grade who are determining the direction of their future lives, imply that educational system should play its effective role in correct routing and suitable guidance through public and private consultation with students and their parents at these ages. But since most of the students participating in the study had average mental health, in order to prevent mental health in this age group tend toward weakness, the mental health strategies that are mentioned earlier are recommended.

But another point that must be mentioned is that lack of a relationship between the parents' job, level of education and household income with mental health status of students that might be due to a hidden lack of awareness among

parents regarding this issue that is worthy in order to inform and raise awareness by school authorities to students' parents through communicating with them either directly or indirectly to investigate and fix this issue. Therefore, creating a supportive environment at home and school by parents, friends and teaching how to deal with anxiety, especially facilitating anxiety to promote the mental health of students are essential. Also running workshops and training programs for students, parents and teachers can be useful in this regard.

Acknowledgments:

In the end, it is necessary to thank the Education Management in Zaboland especially the security department because of their full cooperation in conducting this study.

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