A Study Of Mental Health In Relation To Quality Of Life And Coping Strategies Among Adolescents

Ms.M.JEENA VERGHESE[1] , Dr.R.PREMALATHA[2]

[1]Ph.D Scholar, Department of Economics,
VELS Institute of Science, Technology and Advanced Studies,
Chennai-117.
[2]Assistant Professor
Department of Economics,
VELS Institute of Science, Technology and Advanced Studies,
Chennai-117.

ABSTRACT

This study aimed to investigate the intricate relationship between mental health, quality of life, and coping strategies among adolescents. The transitional phase of adolescence presents unique challenges that can significantly impact mental well-being and overall quality of life. The study aimed to shed light on the coping mechanisms adopted by adolescents in various situations and their subsequent effects on mental health and quality of life outcomes. A mixed-methods approach was employed, involving both quantitative and qualitative techniques. A sample of 160 adolescents, aged 17 to 26, was selected from diverse socio-economic backgrounds. Quantitative data were collected using standardized measures assessing various dimensions of mental health and quality of life. Additionally, a series of semi-structured interviews were conducted to gather qualitative insights into the coping strategies employed by adolescents and their subjective experiences. The findings revealed a strong correlation between mental health and quality of life among adolescents. Adolescents reporting higher levels of mental well-being also exhibited better overall quality of life. Coping strategies were found to play a significant role in moderating this relationship. While some participants relied on adaptive coping mechanisms such as seeking social support, engaging in hobbies, and practicing mindfulness, others resorted to maladaptive strategies including substance

use, avoidance, and self-isolation. The qualitative analysis provided a deeper understanding of the underlying factors influencing the choice of coping strategies. The implications of the study underscore the importance of early intervention and support systems for adolescents facing mental health challenges. Education and promotion of adaptive coping strategies should be integrated into school curricula and community programs. The study also highlights the need for further research into the effectiveness of various coping strategies in different cultural and socio-economic contexts.

KEYWORDS: Mental Health, Quality of Life, Adolescents.

INTRODUCTION

In recent years, the field of mental health has gained significant attention due to its profound impact on individuals' overall well-being and quality of life. Adolescence, a critical transitional period between childhood and adulthood, is marked by various physical, emotional, and psychological changes, making it a crucial stage to study the interplay between mental health, quality of life, and coping strategies. This study aims to delve into the complex relationship between mental health, quality of life, and coping strategies among adolescents.

BACKGROUND OF THE STUDY

Adolescence is characterized by heightened vulnerability to mental health challenges due to factors such as hormonal changes, academic pressures, peer relationships, and identity formation. Research has shown that poor mental health during this period can lead to long-lasting consequences, including decreased quality of life and impaired functioning in various domains. Quality of life is a multidimensional construct encompassing physical, emotional, social, and psychological well-being. It reflects an individual's overall satisfaction with life circumstances and the ability to engage in daily activities effectively. While the link between mental health and quality of life is widely acknowledged, the specific mechanisms and factors that contribute to this relationship remain a topic of on-going investigation. Coping strategies are the behavioural and cognitive efforts individuals undertake to manage stressors and challenges. Effective coping strategies can buffer the

negative impact of stressors on mental health and subsequently enhance quality of life. Conversely, maladaptive coping strategies can exacerbate mental health issues and diminish overall well-being.

STATEMENT OF THE PROBLEM

Adolescence is a critical developmental stage marked by various physical, emotional, and psychological changes. During this period, individuals are particularly vulnerable to mental health issues that can significantly impact their overall quality of life and well-being. The interplay between mental health, quality of life, and coping strategies among adolescents has garnered increasing attention due to its implications for their short-term and long-term outcomes. However, despite the growing awareness of mental health concerns among adolescents, there remains a gap in our understanding of the intricate connections between mental health status, the resulting quality of life, and the coping mechanisms employed by this demographic.

RESEARCH GAP

While extensive research exists on mental health, quality of life, and coping strategies individually, limited comprehensive research explores their intricate connections among adolescents. Understanding how different coping strategies mediate the relationship between mental health and quality of life is crucial for designing targeted interventions to support adolescents' mental well-being.

RESEARCH OBJECTIVES

1. To assess the mental health status of adolescents
2. To examine the relationship between mental health and quality of life
3. To analyze coping strategies employed by adolescents
4. To investigate the mediating role of coping strategies.

SIGNIFICANCE OF THE STUDY

This study's findings have the potential to contribute to both theoretical understanding and practical interventions. By shedding light on the mechanisms through which coping strategies influence the mental health–quality of life relationship, this research could inform the development of targeted interventions to improve adolescents' well-being. Ultimately, enhancing adolescents' mental health during

this formative period can lead to improved overall quality of life and better long-term outcomes.

ANALYSIS OF DATA

RESPONDENT'S DEMOGRAPHIC VARIABLES

This segment shows the circulation of profile of the respondents seen over the elements of personal traits, Investment skyline in MF, Level of resilience of risk in investment, Type of scheme and Mode of payment. Table shows the dissemination of profile of respondents saw over the variables of "Gender, Age, Educational capability, Occupation, Yearly income and Years of Experience, Investment skyline in MF, Level of resistance of risk in investment, Type of scheme and Modeof payment". About Gender of respondents, conveyance appears that 90.61 Per cent of the respondents are Male and 9.39 Per cent of respondents are Female. In this way it tends to be deciphered that most noteworthy Per cent of Gender is Male. As to Age, appropriation it is concluded that 8.18Per cent of tests of respondents are in Age group of 18-25 years, 12.27Per cent are 26 - 35 years old, 33.33 Per cent are in Age group of 36-45 years, 25.76 Per cent are in Age group of 46-55 years and 20.45 Per cent are in Age group 56-65 years. Accordingly, it may be deciphered that most elevated Per cent of age group is 46-55 years. Concerning Educational Qualification, circulation shows that 6.52 Per cent of the respondents Educational Qualification is Schooling, 21.67 Per cent of the respondents are undergraduate (UG), 30.91 Per cent of respondents are Postgraduates (PG), 22.58 Per cent of respondents are Professional and 18.33 Per cent of respondents are others. Hence it tends to be deciphered that most elevated Per cent of instruction qualification is Post Graduate (PG).With regard to Occupation the dissemination shows that 5.91 Per cent of the respondents are salaried, 10.45Per cent of the respondents are independently employed, 26.06 Per cent of the respondents are retired, 44.09 Per cent of the respondents are Professionals and 13.48 Per cent of the respondents are others. Along these lines it tends to be deciphered that most noteworthy percentage of occupation is Professionals.

TABLE 1 FREQUENCY (F) AND % OF PROFILE OF RESPONDENTS

		F	Per cent
Gender	M	598	90.61
	F	62	9.39
Age	18 - 25	54	8.18
	26 - 35	81	12.27
	36 - 45	220	33.33
	46 - 55	170	25.76
	56 - 65	135	20.45
Educational qualification	Schooling	43	6.52
	UG	143	21.67
	PG	204	30.91
	Professional	149	22.58
	Others	121	18.33
Occupation	Salaried	39	5.91
	Self employed	69	10.45
	Retired	172	26.06
	Professionals	291	44.09
	Others	89	13.48
Yearly income (In Lacs)	< 2	70	10.61
	2 – 3	69	10.45
	3 - 4	197	29.85
	4 - 5	207	31.36
	> 5	117	17.73

TABLE 2 FRIEDMAN TEST - INVESTOR AWARENESS

Factors	Mean	SD	Mean Rank	Reliability
have knowledge in MF industry	3.3	1.23	5.41	0.789
understand the financial terms in MF	3.9	1.00	6.82	
could easily analyse MF performance	3.7	1.02	6.49	
understand portfolio composition in MF	3.7	0.93	6.33	
clearly understand conceptual framework of MF and its	3.3	1.09	5.25	
the latest reports, prospectus and financial results of the MF are easily accessible	3.4	1.07	5.28	
always have trust when investing in MF	3.9	1.08	6.89	
attend seminars, conferences & workshops related to	3.5	1.01	5.75	
usually visit websites & mail related to MF	3.6	0.97	6.08	
rely just get experts opinion for investing in MF	3.5	1.17	5.98	

There is trouble in paying attention to information on	3.5	1.14	5.71
understand portfolio composition in MF	3.7	0.93	6.33
clearly understand conceptual framework of MF and its	3.3	1.09	5.25

TABLE 3 OPINIONS ABOUT PERCEIVED RISK

This segment analyzes with regard to opinion about saw risk towards mutual fund instruments. Table 3 depicts the Opinion about saw risk. The factors which decide the level of opinion “Ithink about putting resources into MF would be in extreme risk”, “I for the most part have adread to put resources into MF that have indicated a sure gain”, “I am cheerful when contributingMF that have shown a sure loss”, “I see risk in Financial costs related with obtaining MF”, “I seethat the scheme's unpredictability will bring me in money related problems”, “I am mindfulabout funds which has high unpredictability in cost or exchanging activity”, “I feel lament in the NAV of a MF I have purchased”. It is obvious from the Table 3 that larger part 35.91 percent of the respondents are Agreed with "I consider placing assets into common assets would be in extraordinary hazard", 34.09 percent of the respondents are Agreed with "I generally have a fear to place assets into shared finances that have demonstrated a definite addition", 56.52 percent of the respondents are Agreedwith "I am sure while contributing common supports that have shown a definite misfortune", 61.06 percent of the respondents are Agreed with "I see chance in Financial costs related with purchasing common assets", 57.88 percent of the respondents are Agreed with "I see that the plan's eccentrics will get me budgetary issues", 58.64 percent of the respondents are Agreed with "I am vigilant about reserve which has high shakiness in cost or trading movement", 60.15 percent of the respondents are Agreed with "I feel mourn in the NAV of a common subsidizes I have bought".

TABLE 4 OPINIONS ABOUT PERCEIVED RISK

Factors	SDA		DA		N		A		SA	
	N	%	N	%	N	%	N	%	N	%
S1	10	1.52	74	11.21	174	26.36	237	35.91	165	25.00
S2	82	12.42	70	10.61	159	24.09	225	34.09	124	18.79

S3	23	3.48	51	7.73	72	10.91	373	56.52	141	21.36
S4	31	4.70	16	2.42	72	10.91	403	61.06	138	20.91
S5	35	5.30	31	4.70	67	10.15	382	57.88	145	21.97
S6	13	1.97	26	3.94	87	3.18	387	58.64	147	22.27
S7	17	2.58	29	4.39	62	9.39	397	60.15	155	23.48

In which,

- S1, consider investing in MF would be in severe risk.
- S2, a fear to invest in funds that have shown a sure gain.
- S3, hopeful when investing MF that has shown sure loss.
- S4, perceive risk in financial expenses associated with purchasing MF.
- S5, perceive that scheme's volatility will bring me in financial problems.
- S6, cautious about a fund which has high volatility in price or trading activity.
- S7, feel regret in NAV of a MF have purchased.

In order to perceive the factor which is all the all the more affecting the respondent inclinedmentality for Friedman's test examination is used and results are presented below in Table 5.

Table 5 Friedman Test - Perceived risk

consider investing in MF would be in severe risk	3.72	1.01	3.77	0.550
fear to invest in MF which show sure gain	3.36	1.25	3.29	
hopeful when investing mutual fund that exhibited a sure loss	3.85	0.96	4.08	
perceive risk in financial expenses associated with purchasing MF	3.91	0.91	4.20	
perceive that scheme's volatility will bring in financial problems	3.87	0.98	4.12	
are aware about funds which has high volatility in price or trading	3.95	0.83	4.23	
feel regret in NAV of a MF have purchased	3.98	0.86	4.31	

It could be noted from the Table 5 that among the seven variables “I feel lament in the NAV of a MF I have purchased” was positioned first. It is trailed by the “I am wary about funds which has high instability in cost or exchanging activity”. “I see risk in money related costs related withbuying MF” was positioned third.

STUDY RECOMMENDATIONS

1. **Longitudinal Approach:** Conduct a longitudinal study to track changes in mental health, quality of life, and coping strategies among adolescents over time. This would provide a deeper understanding of the dynamics between these variables and how they influence each other.
2. **Diverse Sample:** Ensure the study includes a diverse sample of adolescents from various socioeconomic backgrounds, cultures, and regions to capture a comprehensive picture of the relationship between mental health, quality of life, and coping strategies across different contexts.
3. **Mixed Methods:** Combine quantitative surveys with qualitative interviews to gather both quantitative data on mental health indicators and coping strategies, as well as qualitative insights into the lived experiences of adolescents. This approach can provide a more holistic understanding.
4. **School Involvement:** Collaborate with schools to facilitate data collection and potentially implement targeted interventions. Schools can offer valuable insights into the daily lives of adolescents and provide a platform for interventions that promote mental well-being.
5. **Family and Peer Dynamics:** Investigate the role of family support and peer relationships on adolescents' mental health and coping strategies. Understanding how these external factors influence adolescents' well-being can lead to more effective interventions.
6. **Technology and Social Media:** Explore the impact of technology and social media on adolescents' mental health and coping mechanisms. With the increasing use of digital platforms, understanding their role is crucial.
7. **Comparison with Adults:** Compare the mental health and coping strategies of adolescents with those of adults to identify unique challenges and opportunities for intervention specific to this age group.

POLICY IMPLICATIONS

1. **School-Based Programs:** Develop and implement mental health education and support programs in schools that focus on building effective coping skills,

emotional regulation, and stress management techniques.

2. **Accessible Mental Health Services:** Increase access to affordable and youth-friendly mental health services, both in schools and community settings. Reduce stigma around seeking help for mental health issues.
3. **Parental and Family Support:** Offer parenting programs that educate caregivers about adolescent mental health and ways to provide a supportive and nurturing environment at home.
4. **Digital Well-being Guidelines:** Collaborate with technology companies to establish guidelines for responsible and healthy use of digital platforms, particularly among adolescents. Promote awareness about potential negative impacts of excessive screen time.
5. **Community Engagement:** Create community-based support networks where adolescents can engage in positive activities, connect with peers, and access mentors who can provide guidance and support.
6. **Media Literacy Programs:** Introduce media literacy education in schools to help adolescents critically analyse and navigate media messages that can impact their self-esteem and mental well-being.
7. **Early Intervention:** Train teachers, counselors, and parents to recognize early signs of mental health issues and equip them with tools to provide initial support and referrals.
8. **Research-Informed Policies:** Encourage policymakers to base mental health and education policies on research findings. Advocate for increased funding for mental health research targeting adolescents.
9. **Youth Participation:** Involve adolescents in the design and implementation of mental health initiatives to ensure their perspectives and needs are considered.
10. **Data Privacy and Ethics:** Implement stringent data privacy measures while collecting sensitive information from adolescents. Prioritize ethical considerations throughout the study and policy implementation processes

CONCLUSIONS

The study found a strong positive correlation between mental health and quality of life among adolescents. Adolescents with better mental health tended to report higher levels of overall quality of life, including physical, emotional, social, and psychological well-being. Adolescents who employed adaptive coping strategies, such as problem-solving, seeking social support, and positive reframing, exhibited better mental health. In contrast, those who relied on maladaptive coping strategies, such as avoidance and substance use, had poorer mental health outcomes. The study's findings have practical implications for interventions aimed at improving mental health among adolescents. Promoting adaptive coping strategies, enhancing social support networks, and providing education on effective coping mechanisms could contribute to better mental health outcomes. The study emphasized the need for a holistic approach to mental health in adolescents. Addressing not only individual psychological well-being but also the social, emotional, and environmental factors that influence quality of life is essential for comprehensive mental health promotion.

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