Psychosocial Determinants And Their Impact On Mental Health Among College Students In Rajasthan

Sonam Verma[1*], Prof. (Dr.) Ankit Bhargava[2], Sheenam Popli[3], Jain Kapila[4], Vidhi Gupta[5]

[1*]PhD Scholar- Jyoti Vidyapeeth Women's University, Jaipur
[2]Dean/Director, Faculty of Physiotherapy and Diagnostics, Jyoti Vidyapeeth Women's University, Jaipur
[3]Assistant Professor, Department of Physiotherapy, SGVU, Jaipur.
[4]Assistant Professor, Department of physiotherapy, Jagannath university, Jaipur
[5]Assistant Professor, Department of Physiotherapy, MGUMST, Jaipur.

***Correspondence Author:** Sonam Verma
*Mail.Id: sonamv.674@gmail.com

ABSTRACT
This study examined how psychosocial variables influenced Rajasthan college students' mental health. A total of 317 college students aged 18–30 from rural and urban Rajasthan were studied (Mage = 20.9, SDage = 2.25). Online forms included a qualitative survey, the Satisfaction with Life Scale, and the Positive and Negative Affect Schedule. Students who had access to psychosocial programs and services reported better mental health. The qualitative study found that students linked mental health to social ties, academic success, and emotional well-being. Social support, family relationships, and leisure time affected their mental health, but academic demands and interpersonal disagreements caused stress. The findings show that Rajasthan college students struggle with social and academic demands and may benefit from targeted psychosocial and mental health therapies.

Keywords: Mental Health, Rajasthan, Psychological, Impact

INTRODUCTION

The unique pressures that students face while pursuing higher education, mental health has developed as an issue that is of significant importance for the youth of today. During their time in higher education, many students feel mental and emotional discomfort as a result of the many changes that are taking place in their life, the pressures of academics, the need to adjust to new social settings, and the pursuit of professional objectives. In recent years, there has been a higher level of recognition about the influence that psychosocial factors have on the mental health of college students. In addition to social and environmental factors, psychological factors are also included in these determinants. The results of students' mental health are influenced by a broad variety of circumstances, including as their interpersonal connections, the dynamics of their families, the stress they experience in their academic pursuits, the social support networks they have, and their general well-being.

Emotional and psychological challenges in students

In the context of the Indian state of Rajasthan, which is home to students from both urban and rural regions, the effect of these socioeconomic determinants on psychological well-being is particularly remarkable. This is because Rajasthan is home to students from both places. College students in Rajasthan encounter a number of emotional and psychological challenges, including change family dynamics, changing peer dynamics, and societal expectations. One of these challenges is the academic obligations that come from competitive exams. It is possible that children living in urban regions are subjected to a greater degree of academic pressure and competition, while pupils living in rural areas may have a more difficult time obtaining aid for mental health and participating in extracurricular activities. In addition, the cultural norms, economic realities, and overall educational environment in Rajasthan all have an effect on the mental health of the students.

Campaigns to raise awareness about mental health, and extracurricular activities

Academic stress continues to be a key effect on mental health difficulties, despite the fact that students usually place a higher priority on psychosocial factors such as the support they get from their families and the networks they have with their peers for their overall health. There are a number of mental health issues that may arise as a consequence of attempting to balance all of one's responsibilities at school with those at home and in social circles. Some of these issues include anxiety, depression, and emotional exhaustion. Supportive environments, such as the availability of counseling services, campaigns to raise awareness about mental health, and extracurricular activities, are all examples of environments that have the potential to significantly influence the stress resilience of students.

Despite the fact that there is obvious evidence that psychosocial factors have an effect on mental health, there is a dearth of research that specifically addresses college students in Rajasthan and the specific situations that they face. Once a more in-depth knowledge of the influence that these psychosocial variables have on the mental health of students has been achieved, it will be easier to develop individualized therapies and support systems that are tailored to meet the specific needs of these students. This study analyses the association between the mental health of college students in Rajasthan and major psychosocial determinants in order to fill the information gap that has been identified. The findings of this research will assist policymakers in both rural and urban areas of the state in developing effective strategies to enhance the mental health of children. These strategies will be based on the determination of which factors are most significant in the development of these adverse effects.

OBJECTIVE

1. To analyze the differences in mental health outcomes between urban and rural college students in Rajasthan based on the identified psychosocial factors.
2. To study on Emotional and psychological challenges in students

RESEARCH METHODOLOGY

This study's sample was produced from a range of Rajasthan-based residential and non-residential collages using a technique called purposive random sampling. From the two types of collages mentioned before, 317 students from different collages in Rajasthan (U.T.) were selected as subjects in an equal proportion. This was done during the 2004–2005 collages year. As an added note, half of these students had participated in interscholastic sports and games, whereas the other half had never done anything like that. We did this so that the students could compare their experiences. Furthermore, great care was taken to guarantee that the subjects of both sexes were allocated fairly

Selection of Test: To measure mental health of the subjects, Mental Health Battery constructed by Singh and Gupta (2000) was used

To evaluate the psycho-social conflicts of the subjects, Youth Problem Inventory constructed by Verma (1996) was used.

Youth Problem Inventory (YPI)

In order to determine the participants' social and psychological concerns, the Youth Problem Inventory was administered. The inventory had eighty statements that pertained to the four sub-areas: personal, social, collages, and family issues. The first subscale dealt with family issues and had 32 items; the second subscale dealt with collages problems and contained 20 statements; the third subscale dealt with social problems and contained 5 statements; and the fourth subscale dealt with personal problems and contained 24 statements. True, partially true, and false were the three options offered to the participants for each statement. In order to show that they understood the various choices, participants were asked to mark the appropriate box with a checkbox (/) and provide their reply to each sentence. Even though there was no time limit on the inventory, it still took me around fifteen minutes to complete it. The scoring was executed according to this pattern:

For True = 2 Marks

For Partially True = 1 Mark

For False = Zero

To begin, we calculated the ratings separately for each sub-area to see how bad things were in that specific segment. Next, the student's overall psycho-social difficulties were calculated by adding the scores from all four domains.

Table 1. Classification On The Basis Of Raw Scores

Area	Very Few	Below Average	Average	Above Average
Family	0-7	8-16	17-21	22-34
Collages	0-2	3-9	10-13	14-19
Social	0-1	2-3	4	5-6
Personal	0-7	8-16	17-21	22-31
Overall	0-21	22-46	47-56	57-98

The reliability of the Youth Problem Inventory had been found out through test-retest method.

Table 2. The reliability coefficient of the inventory was found to be:

Sr. No.	Area	Reliability Coefficient
1	Family Problems	0.85
2	Collages Problems	0.86
3	Social Problems	0.76
4	Personal Problems	0.81
5.	Entire Inventory	0.80

To find the inventory's validity coefficient, we used a number of standardised tests and a few additional suitable approaches. The next paragraphs give these methods:

Table 3. A battery of standardised tests determined the inventory's validity coefficient.

Sr. No	Tests/ Techniques	Sample size	Validity Coefficient
1	Problem check list Dr. N. Bhagia	764	0.75
2	Adjustment Inventory Prof. H.S. Asthana	450	0.72
3	Youth Adjustment Analyzer km Mehru D. Bengali	400	0.68
4	Mooney Problem check list	632	0.69
5	Affirmative answers of the questions concerning coverage of problems	720	87%
6	Known cases	45	Range of scores 69-152

Mental Health Battery (MHB)

To evaluate the participants' mental health in its whole, the researcher used the Mental Health Battery, an instrument created by Singh and Gupta (2000). Emotional steadiness, general adjustment, independence, security-insecurity, self-concept, and intellect are the six domains of mental health that this battery probes. Included in the battery were 330 items that addressed every facet of mental health.

Multiple items' validity coefficients were found to be statistically significant at the.01 level. The dependability of the questionnaire was determined by studying both its internal consistency and its temporal stability. The following is the arrangement of the data in the table:-

Table 4. Reliability Coefficient of MHB

Psychological Variables	Mean Age	N	Test-retest reliability	Odd-even (whole length) reliability
Part-I : Emotional Stability	15.6 Yrs	102	rtt = .876	rtt = .725
Part-ll : Over-all Adjustment			rtt = .821	rtt = .871
Part-Ill : Autonomy			rtt = .767	rtt = .812
Part-IV : Security - Insecurity			rtt = .826	rtt = .829
Part-V : Self-Concept			rtt = .786	rtt = .861
Part-VI : Intelligence			rtt = .823	rtt = .792

Note: All correlation values were significant (P<.01)

Method of Scoring

We scored the response sheets for each topic using the key that came with the test. For correct responses, one point was granted, while for incorrect ones, zero points were deducted. We were able to conduct a thorough assessment of the respondents' mental health by utilising their total scores across all six dimensions of mental health. The exam booklet also featured a five-point qualitative criterion that was created. In order to categorise the sample according to their general mental health, these criteria were utilised. Good, medium, bad, and very poor were the criteria that were used.

RESULT

When looking at the results of the 2x2x2 factorial design in Table 5. in reference to the variable Family Problems, the values for the residential and non-residential groups were Ss=300.164, df=1, and Ms=300.164, respectively. These values were found in relation to the variable. A result that was statistically significant (p<0.01) was obtained from the F-value that was calculated, which was 7.334.

Table 5. 2x2x2 Anova Results Regarding Residential And Non-Residential, Sports And Non-Sports, Boys And Girls On The Variable Family Problems

Sources of Variance	**Ss**	**df**	**Ms**	**F-Value**
Residential and Non-Residential	300.164	1	300.164	7.334**
Sports and Non-Sports	57.716	1	57.716	1.410
Boys and Girls	699.529	1	699.529	17.092**
(Residential and Non-Residential) x (Sports and Non-Sports)	491.607	1	491.607	12.012**
(Residential and Non-Residential) x (Gender)	443.507	1	443.507	10.836**
(Sports and Non-Sports) x (Gender)	39.822	1	39.822	0.973
(Residential and Non-Residential) x (Sports and Non-Sports) x (Gender)	72.032	1	72.032	1.760
Within	12646.690	316	40.002	—

* p<0.05* p<0.01

For the two performance groups, the sports group and the non-sports group, the findings were as follows: the SS value was 57.716, the df value was 1, the Ms value was 57.716 and the F-value was 1.410. In a similar vein, there were no significant outcomes seen.
The results indicated that the two gender groups had achieved the values of Ss=699.529, df=1, and Ms=699.529. These values were determined to have been accomplished by the subjects. The F-value at 17.092 ($p<0.01$) was found to be statistically significant.
When the residential and non-residential groups, as well as the sports and non-sports groups, interacted with one another, the results showed that Ss=491.607, df=1, and Ms=491.607 were obtained. After doing statistical analysis, it was concluded that the F-value of 12.012 achieved was statistically significant ($p<0.01$).
Ss=443.507, df=1, Ms=443.507, and F-value=10.836 were the significant values that were revealed by the data regarding the interaction between the residential-nonresidential groups and the two gender groups ($p<-0.01$).
The results of the interaction between the two gender groups and the sports and non-sports groups were as follows: Ss=39.822, df=1, Ms=39.822. As a result of the F-value being calculated to be.973, the same was not considered to be significant.
The interaction between the three categories—residential-nonresidential, sports-nonsports, and the two gender groups—resulted in the following outcomes: Ss=72.032, df=1, Ms=72.032, and an F-value of 1.760, which was not considered to be statistically significant. In terms of within-groups, the values for Ss=12646.690, df=309, and Ms=40.928 were established.

Table 6. Mean And Sd Values Regarding Residential And Non-Residential, Sports And Non-Sports, And Boys And Girls On The Variable Family Problems

Values	Residential	Non-Residential	Sports	Non-Sports	Boys	Girls
Mean	17.063	19.032	18.472	17.614	19.531	16.529
SD	5.627	7.763	6.350	7.290	6.471	6.887

As can be seen in Table 6., the mean scores for residential subjects were 17.063, whereas the mean scores for non-residential topics were 19.032. This is in connection to the family difficulties variable. The standard deviations for the two categories were 5.627 and 7.763, respectively. The two categories were in the same range.
By way of comparison, the mean for the sports category was 18.472, while the mean for the non-sports group was 17.614. The standard deviations for these two categories were 6.350 and 7.290, respectively.
As a result of comparing the two genders, we discovered that the men had an average score of 19.531 points with a standard deviation of 6.471, whilst the females had an average score of 16.529 points with a standard deviation of 6.887 overall.

Table 7. 2x2x2 Anova Results Regarding Residential And Non-Residential, Sports And Non-Sports, Boys And Girls On The Variable Collages Problems

Sources of Variance	Ss	df	Ms	F-Value
Residential and Non-Residential	84.055	1	84.055	2.803
Sports and Non-Sports	103.859	1	103.859	3.463
Boys and Girls	139.137	1	139.137	4.640*
(Residential and Non-Residential) x (Sports and Non-Sports)	110.000	1	110.000	0.004
(Residential and Non-Residential) x (Gender)	3.410	1	3.410	0.114
(Sports and Non-Sports) x (Gender)	66.697	1	66.697	2.224
(Residential and Non-Residential) x (Sports and Non-Sports) x (Gender)	44.591	1	44.591	1.487
Within	9266.522	316	29.330	—

* $p<0.05$

A significant link was found between the residential and non-residential groups, as shown by the outcomes of the 2x2x2 ANOVA on the variable Collages Problems, which were presented in Table 7.. The df value was equal to one, and the Ms value was equal to 84.055. It was concluded that the F-value was 2.803, which was not significant.
Despite the fact that the results for the sports and non-sports categories were Ss=103.859, df=1, Ms=103.859, and a Fvalue of 3.463, it was concluded that none of these variables were statistically significant.
Following the breakdown of the results according to gender, the values that resulted were as follows: ss=139.37, df=1, and Ms=139.137. The F-value of 4.640, which was determined, had a consequence that was statistically significant ($p<0.01$).
There was no interaction that was statistically significant between the residential and non-residential groups, nor was there any interaction between the sports and non-sports groups (Ss=.110, df=1, Ms=.110, and F-value=.004).
Ss=3.410, df=1, Ms=3.410, and the F-value that was obtained was.114; hence, the interaction between the residential and non-residential groups as well as the two genders was not considered to be significant.
The values that resulted as a result of the interaction between the sports-non-sports categories and the two gender groups were as follows: Ss=66.697, df=1, and Ms=66.697. It was discovered that the F-value was 2.224, which was not significant. The following values were discovered within each group: Ss = 9266.522, df = 309, and Ms = 29.989.

The three-way interaction between the two gender groups, the residential and non-residential groups, and the sports and non-sports groups produced the findings of Ss=44.591, df=1, and Ms=44.591. These values were obtained by comparing the two groups. The F-value that was calculated, which was 1.487, was found to be negligible.

Table 8. Mean And Sd Values Regarding Residential And Non-Residential, Sports And Non-Sports, And Boys And Girls On The Variable Collages Problems

Values	Residential	Non-Residential	Sports	Non-Sports	Boys	Girls
Mean	11.629	10.601	10.535	11.702	11.769	10.452
SD	5.220	5.821	5.411	5.629	5.811	5.100

The findings for the Collages Problems variable are shown in Table 8. The results indicate that the residential group of respondents had a mean of 11.629 and a standard deviation of 5.220, while the nonresidential category of individuals had a mean of 10.601 and a standard deviation of 5.821. Furthermore, the data revealed that the sports group had a mean value of 10.535 and a standard deviation of 5.411, respectively. On the other hand, the group that did not participate in sports had a mean score of 11.702 and a standard deviation of 5.629. The facts shown in this table make it abundantly evident that the average score for the females was 5.100, and the standard deviation was 10.452. On the other hand, the average score for the men was 11.769, and the standard deviation was equal to 5.811.

Table 9. 2x2x2 anova results regarding residential and non-residential, sports and non-sports, boys and girls on the variable emotional stability

Sources of Variance	Ss	df	Ms	F-Value
Residential and Non-Residential	26.834	1	26.834	6.407*
Sports and Non-Sports	39.599	1	39.599	9.455**
Boys and Girls	19.826	1	19.826	4.734*
(Residential and Non-Residential) x (Sports and Non-Sports)	34.799	1	34.799	8.309**
(Residential and Non-Residential) x (Gender)	1.350	1	1.350	0.322
(Sports and Non-Sports) x (Gender)	2.276	1	2.276	0.543
(Residential and Non-Residential) x (Sports and Non-Sports) x (Gender)	5.980	1	5.980	1.428
Within	1294.108	316	4.188	—

$p<0.05$

With regard to the residential and non-residential groups, the 2x2x2 ANOVA results for the variable Emotional Stability are reported in Table 9. The findings reveal that Ss=26.834, df=1, and Ms=26.834. The significance threshold ($p<0.05$) was obtained using an F-value of 6.407.

The calculated F-value was 9.455, and the obtained values were Ss=39.599, df=1, Ms=39.599, and $p<0.01$ for both the sports and non-sports groups. Ss=19.826, df=1, and Ms=19.826 were the values that resulted from the research relative to the two gender groups. A significant result ($p<0.05$) was reached with an F-value of 4.734. The results of the interaction between the residential-nonresidential groups and the sports-nonsports groups indicated a significant ($p<0.01$) Ss=34.799, df=1, Ms=34.799, and F-value=8.309. Ss=1.350, df=1, Ms=1.350, and the resulting F-value was.322, which suggests that the interaction between the residential-nonresidential groups and the two gender categories was not judged significant. With df=1 and Ms=2.276, the results of the interaction between the sports-non-sports and gender groups were as follows. There was no statistical significance evidenced by the F-value of.543. Ss=5.980, df=1, and Ms=5.980 were the outcomes of the three-way interaction between the two gender groups, the residential and non-residential groups, and the sports and non-sports groups. The calculated F-value of 1.428 was considered to be non-significant. We found Ss=1294.108, df=309, and Ms=45.188 for the groups.

Table 10. Mean And Sd Values Regarding Residential And Non-Residential, Sports And Non-Sports, And Boys And Girls On The Variable Emotional Stability

Values	Residential	Non-Residential	Sports	Non-Sports	Boys	Girls
Mean	9.610	9.038	9.673	8.975	9.569	9.076
SD	2.071	2.141	2.127	2.066	2.106	2.117

Table 10. presents the results of the investigation into the variable known as Emotional Stability. The persons who lived in residential areas had a mean value of 9.610 and a standard deviation of 2.071, respectively. In comparison, the group of participants that did not dwell in residential households had a mean value of 9.038 and a standard deviation of 2.141, respectively. The results of the study showed that the mean and standard deviation values for the sports group were 9.673 and 2.127, respectively. In comparison, the group that did not participate in sports had an average score of 8.975 and a standard deviation of 1.066. According to the information shown in this table, the average score for men was 9.569, with a standard deviation of 2.106. On the other hand, the average score for females was 9.076 with a standard deviation of 2.117.

DISCUSSION

Based on the results of the Emotional Stability, Adjustment, and Autonomy evaluations, it was discovered that there were no statistically significant differences between the sexes when it came to participating in non-residential sports. There were no differences in the mental health characteristics of either group. In contrast, the Security-Insecurity variable showed significant differences, with females rating 9.325 and men scoring 7.825, with a p-value of less than 0.01, indicating that the differences were statistically significant. It was also observed that females had a higher mean score for self-concept; however, this difference did not approach the level of statistical significance being considered. On the Intelligence exam, women got significantly higher scores than males did, with a mean of 21.575 over 18.025, with a p-value of less than 0.01. In spite of being classified as having "average" mental health, females exhibited higher mental health in comparison to males (87.025 against 79.825, at a significance level of $p<0.01$). The average score for girls was 14.700, while the average score for boys was 21.700. This indicates that there were significant gender differences in terms of the problems that families face. On the basis of this, the boys were classified as belonging to the "Average" group, whereas the girls were placed in the "Below Average" category ($p<0.01$). Those in the male and female groups who fell into the "Below Average" category expressed concerns about their academic performance that were quite comparable. When compared to girls, who reported "Very Few" social difficulties (1.300), men reported greater levels of social problems (2.450). Likewise, with a p-value that was lower than 0.05, it was shown that guys experienced considerably more personal concerns than girls (15.675 vs 11.825). Generally speaking, it was seen that females had a lower level of psycho-social conflicts (mean score 37.350) compared to boys (mean score 50.125). Girls were characterised as having challenges that were "Below Average," whereas boys were labelled as having "Average" concerns ($p<0.01$).

CONCLUSION

Psychosocial factors including academic pressure, family, peer, and support networks affect Rajasthani college students' mental health. Academic stress is a key cause of students' mental health concerns, although family support and peer interactions are also crucial. Urban schools have greater academic and peer pressure, whereas rural schools may have less mental health resources and extracurricular activities. Comprehensive mental health programs that address academic stress, healthy relationships, emotional wellbeing, and mental health treatment are needed, according to the report. Counselling, mental health awareness, and peer support programs may assist college students cope with psychological and social issues. These issues are key to improving Rajasthani college students' mental health and providing a more conducive learning environment.

REFERENCES

[1.] Frost, R.B. (1971). Psychological concept applied to physical education and coaching. Addison Wesley, Massachusetts.

[2.] Gakhar, S., and Luthra, Sushma (1974). Serial verbal learning as function of anxiety. Ind.J. Appl. Psychol. II (2), 39-42.

[3.] Gardiner, A., Porteous, N. and Walker-Smith, J.A. (1972). The effect of celiac disease on the mother-child relationship. Australian Paediatric Journal, 8, 39-43.

[4.] Garlington, W.K., and Cottier S.B. (1968). Systematic desensitization of test anxiety. Behavioural Res. and Theory, 6(3), 247-256.

[5.] Gaudry, E., and Bradhsaw, C.D. (1971). The differential effect of anxiety on performance in progressive and terminal school examinations. In Gaudry and Spielberger, 1971), pps 107-110.

[6.] Gaudry, E., and Spielberger, C.D. (1971). Anxiety and educational achievement. John Weiley, New Jersy.

[7.] Gautam, A., Bala S., and Singh, R. (1992). Certain Personality Correlates of Intellectual Giftedness among Navodaya Vidyalaya students of Himachal Pradesh. In General Psychology, Mohanty, G., (1996). Kalyani Publishers, Ludhiana.

[8.] Gejesme, Torgrim. (1972). Sex differences in the relationship between test anxiety and school performance. Psychol. Rep. 39(3), 907-914.

[9.] Izard, C.E. (1981). Differential emotions theory and the facial feedback hypothesis of emotional activation: Comments on Fouranzeau and Ellsworth's. The role of Facial response in experience of Emotion. Journal of Personality and Social Psychology, 40, 350-354.

[10.] Jackson, A., and Krane, V. (1993). Adjustment to college life by freshmen male basketball playes. Research Quarterly. 83,125-131.

[11.] Joe, V.C. (1971). Review of the internal-external control construct as a personality variable. Psychol. Rep. 28(2), 619-640.

[12.] Johnson, James E., and Honson, Karen McChesney (1994). The applicability of developmental^ appropriate practice for children with diverse abilities. Journal ofEarly Intervention. 343.

[13.] Johnson, W.R. (1951). Psychogalvanic and word association studies of athletes. Research Quarterly, 22: 427-433.

[14.] Jones, M.B. and Offord, D.R. (1989). Reduction of Antisocial Behaviour in Poor Children by Non-School Skill Development. Journal of Child Psychology, 30, pp 737-750.

[15.] Judge Baker Guidance Center (1958). A research progress report to the United States Public Health Service. Studies in Child Development