

## Factors Influencing Adolescent Mental Health Especially in Terms of Self-Esteem and the Impact of Peer Pressure

<sup>1</sup>Sharma Bhawana, <sup>2</sup>Deshmukh Ajay, <sup>3</sup>Kshirsagar Sharad, Received: 12- February -2023

<sup>4</sup>Sachin Ghai, <sup>5</sup>Dr. Naveen Nandal

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<sup>1</sup>Department of Psychiatry,  
Krishna Institute of Medical Sciences,  
Krishna Vishwa Vidyapeeth (Deemed to be University), Karad,  
Email: sharad.kshirsagar@ymail.com

<sup>2</sup>Department of Psychiatry, Krishna Institute of Medical Sciences,  
Krishna Vishwa Vidyapeeth (Deemed to be University), Karad,  
Email: sharad.kshirsagar@ymail.com

<sup>3</sup>Department of Psychiatry,  
Krishna Institute of Medical Sciences, Krishna Vishwa Vidyapeeth (Deemed to be  
University), Karad,  
Email: sharad.kshirsagar@ymail.com

<sup>4</sup>Department of Management Studies,  
Graphic Era Deemed to be University,  
Dehradun, Uttarakhand, India, 248002,  
profsg.mba@geu.ac.in

<sup>5</sup>Assistant Professor,  
Sushant University, Gurugram.  
Email I'd: Naveennandal@sushantuniversity.Edu.in

### Abstract

About sixteen per cent of people are teenagers. Teenage years are a time of significant personal growth. Due to the rapid emotional, physical, and social shifts that take place during this period, adolescents are particularly prone to mental health problems. The protection of adolescents and young adults from risk factors, the creation of appropriate coping strategies, and the accessibility of psychological services are all necessary for the mental health of both adults and teenagers. In spite of the fact that these problems frequently get overlooked or treated incorrectly, it is estimated that 1 in 7 ( fourteen percent ) adolescents between their ages of ten and nineteen have mental health conditions globally. Adolescents with mental health issues are disproportionately affected by human rights violations, stigma and discrimination (which may reduce their desire to seek help), academic difficulties, hazardous conduct, and physical disease.

**Keywords:** adolescence, physical, emotional, social changes, vulnerable, health problems, psychological.

### Introduction

A crucial period for developing good psychological and social habits is adolescence. Examples include altering your sleeping and exercising routines, developing productive coping mechanisms for challenging circumstances, and developing emotional control. A secure and loving environment is essential at home, at school, and throughout the community. There are many factors that may influence someone's mental condition. In proportion to how many risk factors they are exposed to, adolescents' psychological well-being may suffer more from those variables. Adolescence may be stressful due to hardship, pressure from peers to fit in, and the quest for one's own identity. The combined impacts of media influence and gender norms may expand the gap that exists between an adolescent's current reality & their ambitions for the future. Their level of friendships and family life is another important consideration. Neglect, poverty, and abuse—especially sexual abuse and bullying—all pose substantial risks to mental health.

Poor living circumstances, social stigma, prejudice or exclusion, and a lack of access to quality services and support all put certain teenagers at a higher risk of mental health issues. Some examples are:

- a) Teenagers in unstable and aid-related environments.
- b) Teens dealing with long-term health problems.

- c) Conditions on the autism spectrum.
- d) A mental impairment.
- e) A different neurological disorder.
- f) Adolescent pregnancies.
- g) Teenage moms and dads.
- h) Those whose weddings were rushed or coerced.
- i) Orphans
- j) Teenagers who are members of racial, sexual, or other marginalised groups

### **Common Psychological Disorders among Adolescents**

Emotional issues have a disproportionately large impact on adolescents. In particular, older adolescents are more likely to have mental health problems, with anxiety disorders (such as anxiety attacks and excess worry) being the most common. Over 4.6% of people aged 15 to 19 and 3.6 percent of those aged 10 to 14 suffer from anxiety disorders. Depression is estimated to affect 1.1% of 10 to 14-year-olds and 2.8% of 15 to 19-year-olds. Both sadness and anxiety have the trait of abrupt and rapid mood changes.

Anxiety and sadness may have disastrous impacts on student performance and attendance at school. More loneliness typically occurs from withdrawing from society. Suicide thoughts is more likely to occur while depressed.

Adolescents who are younger are more prone than older ones to have behavioural problems. ADHD, which is typified by impulsivity, hyperactivity, and inattentiveness, affects 3.1% of kids between the ages of 10 and 14. 2.4% of teens between the ages of 15 and 19 are affected by this condition. Conduct disorder, which is typified by disruptive or problematic behaviour, affects 3.6% of children aged 10 to 14 or 2.4% of those aged 15 to 19. Teenagers with behavioural issues may struggle academically, and individuals with conduct disorders may start committing crimes.

**1) Eating disorders:** Early adulthood or adolescence are dangerous years for the onset of eating conditions including bulimia and anorexia. A person with an eating disorder has abnormal eating patterns and a focus on food, which is occasionally accompanied with an obsession with one's looks. The greatest mortality rate of any kind of mental illness is associated with anorexia nervosa, generally as a consequence of health issues or suicide.

**2) Psychosis:** For a number of reasons, psychotic symptoms often start to manifest in late adolescence or early adulthood. Delusions and hallucinations are potential symptoms. The stigma or human rights abuses that come from these circumstances may significantly restrict an adolescent's ability to participate in daily life and academics.

**3) Suicide and self-harm:** Suicide was the fourth leading cause of death among older adolescents (ages 15 to 19) (2). Only a few of the numerous risk factors of suicide include harmful alcohol use, early trauma, stigma against getting assistance, barriers to accessing care, and easy access to suicide methods. Digital platforms, like traditional media, may help or hurt efforts to prevent suicide.

**4) Risk-taking behaviours:** Many detrimental risk-taking activities, such drug misuse and sexual experimentation, start in adolescence. When adolescents turn to risk-taking behaviours to deal with emotional pain, their physical and mental well-being may suffer.

a. Boys were more likely than girls to participate in excessive, irregular drinking in 2016, making up 13.6 percent of those aged 15 to 19.

b. Other alarming behaviours include marijuana use and cigarette smoking. Many adult smokers nowadays began their habit before turning 18 years old. With a rate of 4. of all 15- to teenagers reporting using cannabis at least once in 2018, it's evident that this age group prefers cannabis over other drugs.

c. An increased chance of dropping out of school, being hurt, becoming involved in criminal activity, or even dying is associated with violent acts. One of the biggest killers of teenage males in 2019 was interpersonal violence.

### **Promotion of Awareness on and prevention Of**

In order to strengthen people's emotional regulation abilities, provide them more healthy coping strategies, boost their capacity for resilience when faced with of stress and adversity, and increase their access to social support, interventions for improving mental well-being and avoiding mental illness aim to do these things.

These interventions must use a multifaceted strategy and a variety of delivery channels (such as online platforms, social or healthcare settings, schools, and the community) in order to successfully reach teens, particularly those who most at risk.

### **Short Term and Long Term Therapy**

“Adolescent mental health concerns must be addressed with urgency. Adolescent mental health may be improved by the prevention of institutionalisation and over-medicalization, the promotion of non-pharmacological treatments, and the protection of children's rights in accordance with the provisions of the United Nations Convention on the Fundamental Rights of the Child as well as other human rights documents.”  
Teens' poor self-esteem is often brought on by these factors:

- a) Parents or other significant adults in their lives who aren't supportive.
- b) Peer pressure from friends is real.
- c) Upsetting life changes, such when parents split up or when you have to move around a lot.
- d) The poverty and other difficulties impede development.

People with poor self-esteem tend to avoid challenges they see as posing a high probability of failure, humiliation, or error. These might include the normal adolescent activities of studying, socialising, and exploring new interests.

### **Behaviour Patterns of those with Low Self esteem**

A youngster with poor self-esteem is likely to have negative beliefs about who they are and what they contribute to the world. Your kid may have poor self-esteem if you see any of the following symptoms:

- a) Refusing to try new things or seize chances
- b) Unwanted and unloved
- c) Making excuses for one's own shortcomings
- d) being incapable of handling even mild irritation
- e) Disparaging internal dialogue and external comparisons
- f) Embarrassment or the fear of failing
- g) Finding it hard to make friends
- h) Disinterestedness and lack of drive
- i) Rejects praise and displays signs of nervousness or tension.

### **Attractions for the Adolescents**

a) Attractiveness based on outward appearance is especially strong throughout the teen years. Because of the hormonal shifts that occur at this time, this is quite normal. A young adult's sense of self is severely damaged when his peers reject him because of his appearance. Teens who have impairments sometimes feel alone since their peers don't make an effort to form friendships with them. It's crucial that parents never go out

without their kids. Get it through to them that their inner potential is more important than their exterior appearance in the eyes of the world.

b) Encouragement from loved ones - adolescents want companions who will make them happy and like being the centre of attention. A parent's job is to make their house a place where their child feels safe enough to tell them anything. Your child should never have to feel ashamed in front of his peers. Even while some children may feel awkward when their parents lavish attention on them, doing so is ultimately beneficial.

c) The parent's role is to assist the teenager in honing in on achievable objectives. Adolescents may not be able to see their own potential, thus it is up to their parents to assist them see it. Improve those skills and talents in that field of interest and try to bring out the best in you. Friends' admiration and the teen's own sense of accomplishment both contribute to the teen's sense of worth.

Many parents fear their children will succumb to the pressures of their classmates, which raises the issue of how much control they will have over their children's lives.

However, it is important to remember that there is an unbroken relationship between the impact of peers and the formation of an adolescent's own particular sense of self and identity, despite the fact that peer pressure is most commonly connected with dangerous or harmful activities. This begins in early childhood and continues throughout one's whole life.

Early adolescence is a time of intense peer and group pressure due to maturing personality traits. At that age, kids are torn between clinging to their parents for support and security and striking out on their own to discover who they are and earn their own respect.

Many of the previous peer pressure research (Brown et al., 2008) focused on situations in which the influenced party resisted the pressure. Because of the two-way nature of peer impact, many issues, causes, and methods emerge, as does the connection between social pressure and various characteristics of adolescents' personalities. All of these elements contribute to the societal shifts and environmental conditions that shape the adolescent's daily life.

The ability to pinpoint areas of vulnerability in young people's conduct when they are subjected to peer pressure would be useful for:

- ✓ Efforts made to improve people's quality of life
- ✓ Coordinating community-wide preventative efforts

### **Conclusion**

Most research has shown that young people who are more vulnerable to the effects of peer pressure also tend to suffer from a greater prevalence of emotional issues including anxiety and despair. They have a harder time making and keeping friends, which raises their levels of social anxiety (i.e., fear of rejection and abandonment) among their peers and lowers their sense of overall self-worth. Peer connections are an important indicator of adolescent health, as shown by research by Armsden and Greenberg (1987). Anxiety has a substantial correlation with the ability to discriminate between similar situations, suggesting that anxiety in peer interactions is an important element in identifying adolescents who are vulnerable to peer pressure, especially among females. In contrast, teenagers' autonomy, as shown in their capacity for stable connection, may serve as a buffer against the pervasive influence of their peers. Teens who are struggling emotionally would benefit greatly from an intervention programme that teaches them to stand up for themselves amongst their peers.

Therefore, future research should not only focus on the effects of peer pressure but also on the relationship between the aforementioned variables, such as how secure attachment affects how children view their parents' parenting styles and how they feel about themselves. These connections are expected to be two-way given the interplay of biological, psychological, and social variables in shaping an individual's personality.

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