

Self-Regulation as a Predictor of Mental Health among Adolescents



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ABSTRACT: Mental health difficulties in adolescence have an eternal impact, that does not only affect later adult mental health, but also impacts physical wellbeing, educational accomplishment, and workforce participation and contentment. ¾ of mental health problems start before the early 20s (Kessler et al, 2014). The stage of adolescence, the most important stage in human development is different from other developmental stages marked by challenges and transitions. Self-regulation may be related to mental health as it may help in controlling and managing actions upsetting emotions and impulses. The present study aims to examine self-regulation as a predictor of mental health. The research methodology employed for the study is a correlational. 76 adolescents were selected through a simple random sampling method. Standardized tools were used to collect data. Data analysis included descriptive statistic like Mean and SD. Multiple regression analyses were conducted to analyze the data. Results indicated a significant coefficient correlation between self-regulation and mental health (0.63). Self-regulation's sub dimensions were analyzed with mental health's sub dimensions.

KEYWORDS: Mental health, Self-regulation, Adolescents

INTRODUCTION

Emotional, psychological, and social well-being are the three important terminologies that describe mental health as a whole. Mental health is the adjustment of a human being to the world and one another with maximum effectiveness and happiness (Karl Menninger, 1947). One of the major contributors to the global burden of disease is mental health problems (Whiteford et al, 2013). 20% of girls aged 11-13 showed symptoms of emotional problems whereas 24% of the boys showed symptoms of conduct problems (Fink et al, 2015). Self-harming is also one of the major problems found among adolescents data showed that 32% of 15-year-old girls and 11% of 15-year-old boys report self-harming(brooks et al, 2015). Mental health difficulties in adolescence have an eternal impact, that does not only affect later adult mental health, but also impacts physical wellbeing, educational accomplishment, and workforce participation and contentment.¾ of mental health problems start before the early 20s (Kessler et al, 2014). Mental health disorders among adolescents are often unrecognized and untreated. Sadly, only 1 in 5 adolescents with mental health problems receive proper mental health treatment. Mental illness and mental health are distinct, but related, dimensions of two scales model proposed by Keyes (2005, 2013). There are three levels of positive mental health: flourishing, moderate, and languishing mental health in Keyes' Mental Health Continuum–Short Form (MHC–SF). Individuals with flourishing mental health are high in hedonic and positive functioning. On the opposite, individuals with languishing mental health report both low hedonic and positive functioning. Thus entirety languishes in the absence of mental health.

The stage of adolescence, the most important stage in human development is different from other developmental stages marked by challenges and transitions. In this transition period, there is the emergence of new cognitive abilities, including the capacity for metacognition and the ability to think abstractly which increase complexity and sophistication as they relate themselves to the world. Mental and emotional disorders are found among adolescents as they experience more social pressures and expectations from school and family. Due to profound changes adolescents are more vulnerable to addiction and drug abuse especially those who lack skills to control their emotions are more likely for addiction.

One of the most important personality traits that help individuals perform tasks and function successfully is self-regulation. To accomplish the set goals we need to stay focused on the tasks at hand, here self-regulation is one of the cornerstones that need to be developed from early childhood. Self-regulation supports a child to become independent, cope with hectic tasks, and get used to his/her environment. These attributes are important for every person to function successfully in all stages of life. Self-regulation skills have a huge impact on their school performance and peer relationships. Children and teenagers with well-developed self-regulation skills show positive outcomes, including academic achievement, healthy peer relationships, and avoidance of negative behavior as well as healthy eating patterns (Bandy & Moore, 2010).

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OBJECTIVE

1. To measure mental health among adolescents.
2. To measure self-regulation among adolescents.
3. To find out the relationship between self-regulation and its dimensions on mental health and its dimensions.

METHODOLOGY

PARTICIPANTS

In this correlational study, the tendency of self-regulation and its domains are considered predictors, and mental health and its domain as the criterion variable. The sample consisted of 150 students out of which 76 students (34 girls and 42 boys) of classes 11th and 12th between the ages ranged from 15 to 18 years were selected from the two well-known English medium CBSE school of Jaipur city in India through simple random sampling method.

INSTRUMENTS

Mental Health Continuum–Short Form (MHC–SF) - The original 14-item Mental Health Continuum–Short Form (MHC–SF; Keyes, 2005) was developed by Keyes. It was used to measure mental health. It consists of three components of well-being: emotional, social, and psychological. Each of the 14 items on the MHC- SF can be scored between 0 and 5, which means that the total score on the scale can range from 0 to 70 points.

The Self-Regulation Questionnaire -The Self-Regulation Questionnaire (SRQ) was developed by Brown, Miller, & Lawendowski, in 1999. It consists of 63 items. Responses are given on a 5-point Likert scale ranging from strongly disagree to strongly agree. It has seven dimensions. Sub dimensions are receiving, evaluating, triggering, searching, formulating, implementing, and assessing.

RESULT

Self-regulation as a predictor variable has been calculated as a whole to see its effect on mental health and its dimensions were measured individually to see how much boys' and girls' self-regulation independently correlated to mental health. Mean and standard deviation was also calculated. Overall mean and standard deviation of self-regulation was (Mean-217.70, SD-20.01) and mental health (Mean-45.66, SD-13.85).

Table-1 Mean And SD Of Self-Regulation And Mental Health

VARIABLES	MEAN	SD
SELF-REGULATION	217.6974	20.01867
MENTAL HEALTH	45.65789	13.85598

Multiple linear regression analyses were conducted to examine the extent to which changes in each of the seven dimensions of self-regulation were related to changes in mental health. As per the result table, -2 indicated a significant coefficient correlation between self-regulation and mental health that is (0.63). About (40%) proportion of the variance of mental health was explained by self-regulation ($R^2 = .40$, adjusted $R^2 = 0.34$). Searching for options ($\beta=0.85$, $t=2.24$, $p<0.05$) and formulating the plan ($\beta=0.79$, $t=2.08$, $p<0.05$) only were found significant and best predictors of mental health among adolescents.

Table- 2 Multiple Linear Regression Between Self-Regulation And Mental Health

VARIABLES	COEFFICIENT	STANDARD ERROR	P-VALUE	R	ADJUSTED R ²
RECEIVING	-0.1558579	0.284709854	0.585877	0.63115905	0.33642839
EVALUATING	0.1258154	0.3405124	0.712911		
TRIGGERING	0.1785181	0.398445712	0.655551		
SEARCHING	0.85317509	0.381064635	0.028436		
FORMULATING	0.79263163	0.381497461	0.041516		
IMPLEMENTING	0.29749063	0.354088805	0.403764		
ASSESSING	0.41831563	0.401181473	0.300775		

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Table- 3 Multiple Linear Regression Between Self-Regulation And Mental Health's Sub-Dimension Emotional Well-Being

VARIABLES	COEFFICIENT	STANDARD ERROR	P-VALUE	R	ADJUSTED R ²
RECEIVING	0.032569941	0.08923462	0.71625	0.5775661	0.26498088
EVALUATING	-0.07107403	0.106724422	0.507691		
TRIGGERING	-0.05374267	0.124882055	0.668304		
SEARCHING	0.246136521	0.119434425	0.043145		
FORMULATING	0.315796795	0.119570083	0.010243		
IMPLEMENTING	-0.1163537	0.110979579	0.298155		
ASSESSING	0.094435351	0.125739505	0.45522		

Searching for options ($\beta=0.24$, $t=2.06$, $p<0.05$) and formulating the plan ($\beta=0.31$, $t=2.64$, $p<0.01$) only were found significant and best predictors of mental health among adolescents.

Table- 4 Multiple Linear Regression Between Self-Regulation And Mental Health's Sub-Dimension Subjective Well-Being

VARIABLES	COEFFICIENT	STANDARD ERROR	P-VALUE	R	ADJUSTED R ²
RECEIVING	-0.009066211	0.133940733	0.946232	0.4535840	0.1239763
EVALUATING	0.144485153	0.160192841	0.37027		
TRIGGERING	0.140582396	0.187447361	0.455852		
SEARCHING	0.099919832	0.179270495	0.579105		
FORMULATING	0.312724073	0.179474117	0.085951		
IMPLEMENTING	0.100659462	0.166579812	0.547674		
ASSESSING	0.090235902	0.18873439	0.634105		

As per the table-4 results indicate no dimensions of self-regulation were significant with subjective well-being.

Table- 5 Multiple Linear Regression Between Self-Regulation And Mental Health's Sub-Dimension Psychological Well-Being

VARIABLES	COEFFICIENT	STANDARD ERROR	P-VALUE	R	ADJUSTED R ²
RECEIVING	-0.1938613	0.101650366	0.060728	0.6853	0.4150
EVALUATING	0.05489794	0.121573629	0.653022		
TRIGGERING	0.07512479	0.142257642	0.599156		
SEARCHING	0.45831331	0.136052051	0.001247		
FORMULATING	0.07676947	0.136206584	0.574863		
IMPLEMENTING	0.3278541	0.126420832	0.011628		
ASSESSING	0.19503012	0.143234395	0.177814		

Searching for options ($\beta=0.45$, $t=3.37$, $p<0.00$) and implementing ($\beta=0.32$, $t=2.59$, $p<0.05$) only were found significant and the best predictor of psychological well-being among adolescents.

DISCUSSION

From the result, it is clear that self-regulation is important for mental health. Self-regulation embraces the ability to modulate emotions, thoughts, and behaviors that, over time, help to maximize adaptive adjustment (Williams et al. 2008). Results indicate that out of seven sub dimensions of self-regulation only searching for options and formulating a plan is significantly contributing to mental health. That means those who explore more options in the environment, think about alternatives, and stay focused on tasks

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rather than getting distracted, appraise events more positively, leading to less cognitive distortion related to higher psychological functioning and self-esteem. Those who formulate a plan by searching the options considering pros and cons found success in a variety of life domains, including the school settings and colleges, workplace, social relations, romantic relationships, mental and physical well-being, and healthy lifestyles. Other sub-dimensions of self-regulation that are receiving, evaluating, triggering, implementing, and assessing not significantly contributing to mental health. Self-regulation is only related to mental health subdimensions of emotional well-being and psychological wellbeing. Self-regulation is not related to subjective well-being. Baber & Nauman (2020) reported that self-regulation is an important determinant of academic success. Those parents who send their three-year-old children to good preschools had a satisfactory effect on developing their children's self-regulation skills.

CONCLUSION

It can be concluded that some of the aspects of self-regulation that are searching for options, formulating a plan, and implementation are related to mental health and its dimensions of emotional wellbeing and psychological wellbeing. Self-regulation is not related to subjective well-being one of the dimensions of mental health.

IMPLICATIONS

Self-regulation is important for mental health therefore from the child's early years of age self-regulation especially searching, formulating, and implementing skills should be developed in the family and school environment. Training can be organized for developing self-regulation skills among adolescents. Training may be provided by teachers and counselors. Parents' counseling should be organized so that parents can develop a habit of self-regulation among adolescents.

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