

A Study on Common Psychological Problems in Intermediate College Students in the Perspective of Bangladesh

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Received: 27 November 2017; **Accepted:** 21 Decemebr 2017; **Published:** 15 January 2018

Abstract:

The present study is an attempt to explore an empirical investigation on the search for psychological problems among the students in Bangladesh. The sample was composed of 300 respondents. A $2 \times 2 \times 2$ factorial design involving 2 levels of gender (male vs. female), 2 levels of residence (urban vs. rural) and 2 levels of students category (science vs. humanities) were used. It was to study the psychological problems of 17 to 18 years old students. Four psychological problems such as anxiety, depression, obsessive compulsive disorder and eating disorder were found. These four problems are related with mentioned six categories at $P < 0.01$ level and ANOVA were significant at $P < 0.05$ level. It was found that students of humanities group were more vulnerable with these problems as compared to the students of science group. The findings of the present study were interpreted in the light of existing literature. It was concluded that these psychological problems could be addressed through proper counseling. Moreover, special emphasis on food and nutrition and yoga could bring the solution to these problems.

Keywords:

Anxiety, Depression, OCD, Eating Disorder

1. Introduction

1.1 History

The subject psychology deals the mind of human being which comes from the higher intellectual function of human brain. The mind is expresses its activity through electric impulses and network of the brain. Mind is always re-established for its different functioning. This is biological systems which differ from robotic system. For the mind activity the DNA is highly charged. If mind is in good condition the ageing of human may delay. Mind activity is controlled by gene [9]. Psychological problem refers to a large and heterogeneous collection of disorders ranging from anxiety, depression, OCD and eating disorder. These psychological problems

represent exaggeration, deficits or disabling combinations of feelings attitudes and behavior [6]. Ancient civilizations described and treated a number of mental disorders. The term stress, having emerged from endocrinology work in the 1930s, was increasingly applied to mental disorders. Advances in neuroscience, genetics and psychology led to new research agendas. Schizophrenia commonly reports some type of religious delusion. Electroconvulsive therapy was widely used between the 1930s and 1960s. The social stigma associated with mental disorders is a widespread problem. Risk factors for mental illness include genetic inheritance, such as parents having depression. The causes of anxieties are family history, temperament, and parental rejection, lack of parental warmth, high hostility, harsh discipline and drug-abusing behaviour. Traumatic brain injury may increase the risk of developing certain mental disorders.

1.2 Global information

Mental disorders and its treatments were developed in Persia, Arabia and in the medieval Islamic world. The mentally ill are stigmatized in Chinese society and can't legally marry. An Australian study found that having a mental illness is a bigger barrier to employment than a physically disable person. A 2015 review found that in the United States, about 4% of violence is diagnosed with mental illness and a 2014 study found 7.5% of crimes committed by mentally ill people were directly related. Depression affects about 400 million, dementia 35 million and schizophrenia affects 21 million people globally. In the United States 46% qualifies for a mental illness at some point. A review of anxiety disorder surveys in different countries found average lifetime prevalence estimates of 16.6%, with women having higher rates on average. A review of mood disorder surveys in different countries found lifetime rates of 6.7% (higher in women) and 0.8% for bipolar I disorder. In the United States the frequency of anxiety disorder (28.8%), mood disorder (20.8%) and substance use disorder (14.6%). A 2004 cross-Europe study found that approximately one in four people reported mood disorders (13.9%), anxiety disorders (13.6%) or alcohol disorder (5.2%). An international review of studies on the prevalence of schizophrenia was found in poorer countries. Studies of the prevalence of personality disorders have been fewer and smaller-scale, but one broad Norwegian survey found a five-year prevalence of almost 1 in 7 (13.4%). Each year 73 million women are affected by major depression, and suicide is ranked 7th as the cause of death for women between the ages of 20–59. Psychotropic medications are available in Bangladesh but psychotherapy is hardly available. In Dutch higher students they have study-related stress a lot. During 1990s the physical and mental health of students in Europe and the United States were an emergent subject of research [12, 16, 23]. Students feel limited in their daily activities of stress that cause their study to decline [3, 17, 22]. Suicide, which is often mental disorder, is a leading cause of death among teenagers and adults under 35. There are an estimated 10 to 20 million attempted suicides every year worldwide.

1.3 Types of psychological disorders

There are lot of psychological disorders are- anxiety/fear, phobia, obsessive-compulsive disorder, post-traumatic stress disorder, mood disorder/ depression, bipolar disorder/depression/mania, thought disorder/hallucinations, schizophrenia, personality disorder, eating disorders, sleep disorders (insomnia), sexual disorders,

gambling addiction, identity disorder (amnesia/dementia), autism spectrum disorders, somatization disorder and relational disorder.

1.4 Related chemicals with psychology and disorders

Usage of a number of drugs has been associated with development of the disorder, including cannabis, cocaine, and amphetamines. Neurotransmitters, also known as chemical messengers, are endogenous chemicals that enable neurotransmission. Neurotransmitters are released from synaptic vesicles. Their more than 100 chemical messengers have been uniquely identified. Otto Loewi is credited with discovering acetylcholine, the first known neurotransmitter. There are mainly seven groups of neurotransmitter- Amino acids: glutamate (excitatory 90%), aspartate, D-serine, γ -aminobutyric acid (GABA) (more than 90%), glycine. Gasotransmitters: nitric oxide (NO), carbon monoxide (CO), hydrogen sulfide (H₂S). Monoamines: dopamine (DA), norepinephrine, epinephrine (adrenaline), histamine, serotonin (SER). Trace amines: phenethylamine, *N*-methylphenethylamine, tyramine, 3-iodothyronamine, octopamine, tryptamine. Peptides: somatostatin, cocaine and amphetamine regulated transcript, opioid peptides, β -endorphin. Purines: adenosine triphosphate (ATP), adenosine. Others: acetylcholine, anandamide. Glutamate is used at the great majority of fast excitatory synapses in the brain and spinal cord. Excitotoxicity has been implicated in certain chronic diseases including ischemic stroke, epilepsy, amyotrophic lateral sclerosis, Alzheimer's disease, Huntington disease, and Parkinson's disease. GABA is used at the great majority of fast inhibitory synapses in virtually every part of the brain. Many sedatives/tranquilizing drugs act by enhancing the effects of GABA. Dopamine has a number of important functions in the brain. Parkinson's disease has been linked to low levels of dopamine and schizophrenia has been linked to high levels of dopamine. Serotonin controls appetite, sleep, memory, learning, temperature, mood, behaviour, muscle contraction, and function of the cardiovascular and endocrine system. It is speculated to have a role in depression. As students are our next potential leader for the nation so it's very important to solve their psychological problems. After detecting their problems it's easy to solve it through suggestions.

1.5 Zoopsychology

In non-human primates has been studied since the mid-20th century. Over 20 behavioral patterns in captive chimpanzees have been documented as abnormal for frequency. In some cases such behaviors are hypothesized to be equivalent to symptoms associated with psychiatric disorders in humans such as depression, anxiety, eating disorder and post-traumatic stress disorder.

2. Materials and Methods

2.1 Students

Students are suffering from their boredom education system. From dawn to dusk to evening till night they engage with education and then mid night by using internet mainly facebook. Students are using internet wrongly.

2.2 Quality assessment

40 questions were divided into four groups (10-10-10-10) for anxiety, depression, OCD and eating disorder. If the answer is 'No' student will get 1 mark, if 'Neutral' this is 2 and for 'Yes' this is 3. Out of total 30 numbers (in each group 10×3 (maximum number for 'yes') = 30) if a student gets the mark ranging 1-13 this is considered by such psychological problems, if 14-16 is going to affect and for 17-30 this is normal. Mentioned psychological problems were detected in male-female, science-humanities and urban-rural group respectively (Table 1).

Table 1. Questionnaires for psychological problems of intermediate students in three groups

Male/Female----- Science/Humanities----- Urban/Rural-----				
No.	Questions	No=1	Neutral=2	Yes=3
1	Do you have experience of fear?			
2	Did you go to physician for anxiety?			
3	Do you find avoiding situations for anxiety?			
4	Do you get panic on road/outside?			
5	Do you find washroom in a new place?			
6	Do you worry same things again and again?			
7	Are you impatient?			
8	Do you feel overwhelmed?			
9	Do you accept people's request?			
10	Are you an anxious person?			
11	Sometimes laugh sometimes cry			
12	Do you have little interest on anything?			
13	Trouble asleep?			
14	Move slowly so that other people notice you			
15	Do you feel problems at home or institution?			
16	I am talkative			
17	More active			
18	Self-confidence is great			
19	I have great variations of work			
20	Sometimes optimism and sometimes pessimism			
21	Concern with germ contamination			
22	Over-concern with keeping objects			
23	Fire, burglary and flooding the house			
24	Losing something valuable			
25	Excessive washing			
26	Checking door lock			
27	Collecting useless object from the rejected materials			
28	Repeating routine actions			
29	Do you face any road accident?			
30	Think on death			
31	Have you fear for gaining weight?			
32	Do you face often common illness?			
33	Do you refuse eat?			
34	Do you feel low-esteem?			
35	Do you think you should change your eating behavior?			
36	Have you damage your teeth, gum, mouth and throat?			
37	Are you eating when you are not hungry?			
38	Are you feeling depressed for over eating?			
39	Are you thinking about food all the time?			

40	Are you feeling ashamed and irritated during eating?			
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On the other hand there some symptoms were found. For anxiety (panic and fear, sleep disorders, to stay calm and still, tingling hand and feet, shortness of breath, heart palpitation, dry mouth, Nausea), for depression (sad and empty mood, hopelessness, feeling helplessness, loss of interest or pleasure in hobbies and activities, decreased energy, for obsessive compulsive disorder (fear of being contaminated by germs, harming yourself or others, violent thoughts, excessive focus on religious and moral ideas, fear of losing or not having things you might need) and for eating disorder (weight loss due to excessive exercise or dieting, anorexia bulimia/anorexia nervosa, binge eating disorder) were common.

2.3 Instrument

Psychological problems checklist (Kabir 2017) was used for data collection. The scale contained 40 items which were selected on the basis of open-end questionnaires. Students are requested to fill-up the questionnaires without consulting anyone. They were also assured that their responses to the questionnaires would be kept strictly confidential and would be used for research purpose only.

Statistics: For measuring correlation and ANOVA SPSS software (version 23) were used.

3. Results

This study was based on 300 college intermediate students where their age from 16-19 years. Out of 300 students' highest anxiety were found in rural students whereas in male students there were no anxieties. Depression was highest in science and rural students and in female not. Students said that they can't express their problem to their parents, friends and teachers and this can lead to prevalence of depression. At present this world is very competitive so males are always depressed to overcome such problems and get themselves in a suitable place. Obsessive compulsive disorder was noticed higher in male and humanities students but this is equal in female, science, urban and rural students. There were no eating disorder in males but this is higher in humanities students. Humanities students don't know about their health, food and nutrition. Their knowledge is very poor on digestion and nutrition. So, they suffer overnutrition or malnutrition which leads eating disorder (Table 2; Figure 1).

Table 2. Four psychological disorders in intermediate students (each section 50 students)

category	anxiety	depression	obsessive compulsive disorder	eating disorder
male	0	1	2	10
female	1	0	1	8
science	1	2	1	1
humanities	1	1	2	12
urban	1	1	1	9
rural	2	2	1	4
total 300 students	6 (2%)	7(2.33%)	8(2.67%)	44(14.67%)

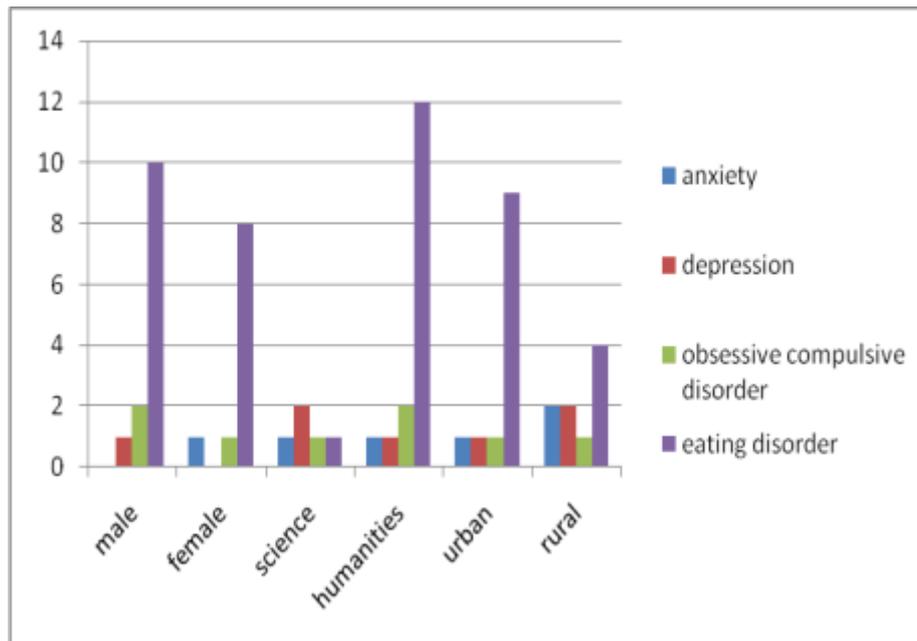


Figure 1. Common psychological disorders in students

4. Discussion

In our society there lot of encouraging and discouraging factors which are related with several psychological disorders. In adolescent stage we should observe the abnormality in students. In this case parents may play a role on psychological lesson. Parents should observe the right use of internet to their children. In identical twin their psychological problems are more or less same (or 100%) but in fraternal twin this is 50%. So, in case of twin it should carefully maintain. Mental health constitutes a major public health contributes 13% of the global burden [13]. Low and mid income countries have higher burden of mental disorders [2]. Serious mental disorder may reduce life expectancy about 20 years [5]. A community based rural study reported 3.6% psychiatric disorders and 2.9% both psychiatric and physical disorders with depression and anxiety [4]. In urban community 28% psychiatric disorders were found [8]. Among 12.2% respondents females are higher than males (13.9% vs. 10.2%) [11]. Primary school going children revealed 13.4% behavioural disorder, with boys being twice more than girls (20.4 vs. 9.9%) [18]. Another more recent community-based study reported that mental disorder among children with 18.4% [19]. An urban facility-based study reported that the depression in one in every three diabetic patients [20]. Overall prevalence of psychiatric disorders in Bangladesh varied from 6.5 to 31% among adults and from 13.4 to 22.9% among children. Older people are more prone to these mental disorders [8]. There is a significantly higher prevalence of mental disorders among economically poor respondents, and women from large families by Hossain et al [14]. High burden of mental disorders in Bangladesh were found in the year 2003 and 2005 [15]. Childhood psychiatric disorders were significantly associated with malnutrition [11]. The referral is also hampered due to superstitious belief related to psychiatric disorders. Health problem in Netherlands showed 49% mental health problem. Physical activity, taking rest and enjoying the life is very important for a student. Also as mental health could be a sensitive topic for students, it was considered important to invest in a confidential setting to build rapport. 33% students get solution for mental illness from internet [21].

Another study suggested that 25% anxiety and 23% depression still found in children and adolescents [1].

5. Conclusions

Positive coping of students are prayer, pursuing yoga, music, television watching, hobby, proper sleep, and in negative coping when they spend more time in networking, smoking and using drugs. Academic stress or education load of the students are very common. Moreover, they have social, financial and emotional stress also [26]. Parents help, school program and mass media campaign are more effective on mental health of the students. Especially in adolescent period we should extra care on students. Antidepressants for depression, anxiolytics (including sedatives) are used for anxiety disorders and related problems such as insomnia. Mood stabilizers are used primarily in bipolar disorder. Electroconvulsive therapy (ECT) is sometimes used in severe cases. Creative therapies are sometimes used (music therapy, art therapy, drama therapy). If any uncontrolled anxiotic patients not in controlled need to provide insulin shock. This shock decrease glucose from the patients' body then he/she goes into coma. After getting sense they feel good. Urban people are constituted of rural population and as such they share many things. In general social injustice, racial discrimination, unequal distribution of resources is the problem. Thus the structural as well as functional changes depend on education, residence and gender should be recognized by social workers, political thinkers, anthropologists, sociologist and psychologists [7]. For removing anxiety, depression, OCD and eating disorder counseling is must. Bipolar disorders are removing with excellence from USA [24]. Mental disorders are increasing in Bangladesh day by day. To improve the mental health service in Bangladesh, we need well-designed epidemiological and clinical research [25]. Students should free to expose their problems to parents and teachers. Knowledge of basic science should apply in humanities and rural students. Students need to know the bad impact of fast food. Moreover different yoga is helpful for eliminating psychological disorders. For anxiety (supine, triangle, shoulder-stand), depression (breathing, spinal twist, cobra, locust, plough, shoulder-stand), OCD (kundalini yoga) and eating disorder (plough, bow, head, mountain, pigeon) poses are very effective. In any education institution need to provide psychiatrist and psychologist and for recruitment process we need to call a clinical psychologist.

Conflicts of Interest

The author declares that there is no conflict of interest regarding the publication of this article.

Acknowledgments

Author is giving special thanks to Dr M Kamal Hossain, Assistant Professor of Psychology of Saidpur Cantonment College for his guidelines and providing one of his articles on tribal population. He supplied questionnaires for the psychological problems among the students. Tania Zaman, Assistant Teacher in English version of the same institution delivers the idea of this paper. Her continuous support was really appreciable to finish this article. Author is impressed to his brother Md. Akramul Kabir, Group Product Manager of UniMed and UniHealth Mfg. Pvt. Ltd., Dhaka. He is well-known about his company's psycho drugs. Some months ago he went to Pabna Mental Hospital, Bangladesh to join in a seminar on depression. He gave me an idea on common psychological problems in Bangladeshi people.

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