

Mental health stigma on adolescence with special reference to Lakshadweep

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MASTER OF SOCIAL WORK

Specialising in
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Submitted by

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Certificate

This is to certify that the dissertation titled “ mental health stigma on adolescents with special reference to Lakshadweep” is a record of genuine and original work done by Rahiya binhi ck(200011034684)of 4th semester master of social work course of this college under my guidance and supervision and it is hereby approved for submission.

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Declaration

I rahiya binhi c k hereby declare that the research work title “mental health stigma on adolescents with special reference to Lakshadweep” submitted to the M G University, Kottayam is a record of original work done by me under the guidance of Dr. sheena rajan philph, head of the department, Bharata Mata School Of Social Work, thrikkakara, and this research work is submitted in the partial fulfilment of the requirement for the award of the degree of Master of Social Work specialising in medical and psychiatry.

I hereby declare that the results embedded in this research have not been submitted to any other university or institute for the award of any degree or diploma, to the best of my knowledge and belief.

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Abstract

The World Health Organization (WHO) estimates that 450 million individuals worldwide experience mental problems (WHO, 2012). 80 percent of them reside in developing and middle-income nations (LMICs). Despite this, very little understood about how these countries stack up against those with richer incomes and more robust healthcare systems. This study will examine how individuals with mental health issues, unpaid carers, and local residents perceive and hold ideas about mental illness at four different Kerala, India, locations: Ernakulum, Palakkad, Calicut, and Malappuram. Despite rising income and literacy rates in India, 197.3 million persons have mental health issues in 2017. Even in tribal regions, there has been a noticeable increase in mental health issues, although awareness and treatment seeking are still low. The concept of mental wellness is not singular. It is impacted by a number of things. Mental health literacy is a crucial component that affects how people seek out healthcare. It's critical to determine how well-informed tribal residents are regarding psychological state, how they access care, and what obstacles they face when requesting assistance. Patients and their families are severely impacted by mental illness. Any family member, including children, parents, or grandparents, may be impacted. Since the family is dynamic due to the interdependence between its many members, the difficulties with mental health lead to organisational deterioration among multiple family domains like livelihood, happiness, relationships, authority, social mobility, and education, among others. Depending on status, circumstances, and capacity for adaptation, when mental illness enters a family through a person, whether it takes the form of psychosis, depressed mood, anxiousness, bipolar disorder, intense disorder, phobias, or any other, it can have devastating effects on the family members. The psychological environment of the family is impacted by the mental disease . This is due to the aggressive behaviour that those with mental health issues exhibit. Confusion, anxiety, and violence reflect on relatives and spark arguments among them, which leads to tension, discontent, stress, and other difficulties for everyone in the family. Because more time must be spent caring for the mentally ill person, mental health issues can have an impact on the family's finances and reduce productivity. Therefore, depending upon who is working or contributing, the family's income may be impacted. In addition, other members could experience emotional, social, behavioural, and psychological damage. They have a good likelihood of developing mental disease in the future. A family with a serious mental illness incurs more medical costs (including mental healthcare) and may have an impact on other family expenses. Because there is a lack of understanding among family members, the responsibility on the family to care for the sick and accept the patient's situation grows every day. The International Health Organization claimed that it is difficult to estimate and evaluate the cost on families in 2003. The caretakers struggle with social, emotional, and economical issues. Additionally, there is a strong correlation between negative attitudes and those with mental disorder and their family members, which has an effect on a variety of life areas like social mobility, relationships with family, and community.

With 8.6% of its entire population being tribal, India has the highest tribal population worldwide. There are 10.43 crore Scheduled Tribe (ST) people in India; 89.97% of them live in rural or tribal areas, and 10.03 percent do so in urban settings. The native people of the nation are known as tribal populations. They are reliant on the trees and live a unique way of life known as tribal society. To address their issues with their bodily and mental health, they have maintained their culture, traditional family values, or beliefs, including traditional therapeutic techniques. The original environment and cultural life of the tribe have been altered by the urban industrial boom. Tribals are experiencing serious health difficulties as well as financial issues as a result of their complex living patterns, urbanisation, acculturation, displacement, and dislocation. A growing but underappreciated critical issue is mental health [14], [15]. The most prevalent mental disorders were depression and anxiety disorders, according to epidemiological research conducted in a number of developing nations (including those that have urbanised) [16]. Indigenous people with such a distinct identity and culture are known as tribal people. They have their own medical procedures, once referred to as the "traditional health-care system," which mostly rely on herbs, faith healing, and dependent on the selected rites. It is clear that academics and politicians tend to focus more on the way of life, the arts, and the history of the tribal peoples than on the mental health problems that are prevalent among them. A study on the effects of mental disorder on families among the tribal community is therefore urgently needed.

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List of contents

Title	pageno
Titlepage	
Certificate	
Declaration	
Abstract	
Acknowledgment	
Contents	
Chapterization	
Chapter-1 – introduction	
Chapter -2- review of literature	
Chapter – 3 – research methodology	
Chapter -4- findings	
Conclusion	
Implication of professional social work practice	
Bibliography	

Chapter 1 – introduction

2.1 Mental health stigma on adolescents

Less than one third of children and adolescents who experience mental health problems at any given time seek help. Untreated mental illness puts a tremendous public health burden on society and makes people more prone to long-term problems. Large-scale efforts to lessen stigmatisation of mental illness, which has been identified as a major barrier to treatment, have proved ineffective. This suggests that in order to implement interventions that are more successful, a better knowledge of the stigmatising processes that young people experience is required. To determine target demographics and cultural factors for upcoming anti-stigma initiatives, differences in the stigma associated with mental illness (MI) among teenagers were explored cross-sectionally across colour, ethnicity, and gender. Sixth graders (N 667; mean age 11.5) from a variety of racial and socioeconomic backgrounds self-reported on their awareness of MI, attitudes toward classmates with MI, and behaviours toward them, as well as on teenage vignettes featuring bipolar (Julia) and anxiety symptoms (David) symptoms. Six intersectional composite variables were created from self-reported data on race, ethnicity, and gender: Semi (NL) Black boys, NL-Black girls, NL-White boys, and NL-White girls are distinct from Latino boys and Latina girls. Utilizing distinct and combined race, religion, and gender variables, linear regression models controlling for personal and familial factors explored disparities in stigma. Mental health is one of the most pressing issues of the modern world. SAMHSA found that increased numbers of people are struggling with mental health issues, with 26.3% of adults aged 18 to 25 reporting a mental illness between 2017 and 2018 (SAMHSA, 2019). Adolescents are especially vulnerable, which is evident in their rising rates of mental illness and levels of treatment. SAMHSA reported that the rate of teenagers receiving mental health services in “specialty mental health settings” and in “education settings” have been rising steadily for the past several years. According to Corrigan and Watson, stigma often consists of three components: stereotypes, or unfavourable views of an individual or group; prejudice, or “negative emotional reactions;” and discrimination, or the behaviours taken in response to stigma (Corrigan & Watson, 2002). Silke et al. (2016) developed the seven-factor model, which divides mental health stigma into seven variables based on how adolescents answered surveys, to further investigate these three dimensions from an adolescent perspective. Ages 10 to 19 make up one in six of the population. The adolescent years are special and influential. Adolescents are more susceptible to mental health issues due to physical, emotional, and social changes, such as experiencing poverty, abuse, or violence. Adolescents' health and wellbeing during adolescence and into adulthood depend on safeguarding them from harm, fostering socio-emotional learning or mental health, and providing access to care. The prevalence of mental health issues among 10 to 19-year-olds is estimated to be 1 in 7 (14%) worldwide, although these conditions are usually undiagnosed and untreated. Adolescents with mental health issues are especially susceptible to social isolation, discrimination, stigma (which can impair their willingness to seek care), academic challenges, risk-taking behaviours, physical ill-health, and human rights violations.

2.2 Mental health determines

Adolescence is a critical time for forming emotional and social habits that are necessary for mental health. Develop coping, issue, and interpersonal skills as well as appropriate sleep and exercise routines. Learn how to control your emotions. It is crucial to create safe and encouraging conditions in the home, at school, and in the larger community. Some teenagers are more susceptible to mental health issues because of their living circumstances, stigma, exclusion or discrimination, or an absence of availability to high-quality services and support. Adolescents who reside in humanitarian and precarious environments, those with chronic illnesses, autism spectrum disorders, intellectual disabilities, or other neurological conditions, orphans, adolescents with young children, adolescents who are parents themselves, even those in initial or forced marriages, are just a few of these groups. The majority of adolescents experience emotional issues. The most common problems in this age group are anxiety disorders, which might include panic attacks or overly worrying. Older adolescents experience these diseases more frequently than younger adolescents. Anxiety disorders are thought to affect 3.6% of 10 to 14-year-olds and 4.6% of 15 to 19-year-olds. According to estimates, 2.8% of teenagers aged 15 to 19 and 1.1% of teenagers age 10 to 14 experience depression. Rapid and unexpected mood fluctuations are among the symptoms that both depression and anxiety share. School attendance and academic performance can be significantly impacted by anxiety and depressive disorders. Isolation and loneliness may become worse if social retreat occurs. Suicide can result from depression. Younger adolescents are more likely than older teenagers to suffer from behavioural disorders. 3.1% of 10–14-year-olds and 2.4% of 15–19-year-olds have attention deficit disorder (ADHD), which is characterised by problems paying attention, excessive activity, and behaving without thinking about the consequences (1). 3.6% of 10 to 14-year-olds and 2.4% of 15 to 19-year-olds experience conduct disorder (characterised by signs of destructive or difficult behaviour) (1). Adolescents with conduct issues may struggle academically and may engage in criminal activity. Adolescent mental health issues are a serious issue that can be treated or prevented. They are also rather frequent. Adolescent patients of obstetricians and gynaecologists are far more likely to present with one or even more mental health problems. Some of these illnesses may make it difficult for a patient to comprehend or express her health issues and properly follow treatment recommendations. Anovulatory cycles and different menstrual abnormalities can be brought on by conditions that disrupt the hypothalamic-pituitary-gonadal axis or the therapies used to treat them. Teenagers with psychiatric problems may be receiving psychopharmacological medications that might lead to galactorrhoea and menstrual irregularities. Adolescents with mental illnesses frequently act out or use drugs, which raises their chance of engaging in risky sexual behaviour that could lead to pregnancy or STDs. The task of weighing the possible risks of foetal injury with the potential hazards of insufficient treatment is especially difficult when treating pregnant teenagers who use psychopharmacologic medications. The obstetrician-gynaecologist has the chance to lower mortality and morbidity from mental illnesses in teenagers by earlier detection, appropriate and equal frequency, and care coordination, whether they are providing preventive healthcare for women or specific labour and delivery or gynaecologic treatment. (17 June)

2.3 Mental health and adolescents

Although many teenagers have good mental health, it is estimated that 49.5% of teenagers have experienced mental health problems at a certain time in their lives. 1 The good news would be that encouraging strong mental health can help to avoid some issues. Early treatment and therapy can

assist young individuals with mental health disorders lessen the burden on their life. Teenagers commonly go through a wide variety of emotions as part of their regular developmental process. Teenagers frequently experience anxiety over their schoolwork and friendships, as well as depression after the loss of a family member or close friend. However, persistent symptoms that have an influence on a young person's feelings, thoughts, and behaviour are a hallmark of mental illnesses.(vikaspedia)

2.4 Mental health important

If young people are to grow up to be autonomous, self-assured adults, their mental health is just as crucial as their physical health. A healthy adolescent development requires good mental health because it helps young people develop positive social, emotional, intellectual, and communication skills and abilities. It also builds the groundwork for later in life to have better mental health and well-being. One in six young persons in school age has a mental health issue. From one in ten in 2004 to one in nine in 2017, this is a concerning increase. The most prevalent mental problems that young people face are emotional disorders like anxiety and depression. Boys and females experience mental problems at similar rates among younger adolescents (ages 11 to 16). However, girls are more likely than boys to experience mental problems during older teenagers (17–19), with 1 in 3 girls (23.9%) suffering one compared to 1 in ten males (10.3%). According to the Children's Society, women between the ages of 17 and 22 are currently the group very much at risk of experiencing mental health issues. More than half of all mental health issues begin before the ages of 14, and 75% manifest by the time a person is 24 years old. The varied severity degrees of mental health issues are referred to by the categories mild, moderate, and severe. A person is said to have a moderate mental health issue if they just experience a few symptoms that barely affect their daily lives. When someone experiences more symptoms than usual, it may be indicative of a moderate mental illness. When a person experiences numerous symptoms that really can make daily life exceedingly challenging, they may have a significant mental illness. A person may go through many degrees at various times. For both children and adults, mental health is indeed a crucial component of total health. Many adults with mental problems had signs during their childhood and adolescence, but they were frequently ignored or untreated. The effect is stronger is begun for a young individual who exhibits signs of a mental disease, more the successful it may be. Early intervention can help avert more serious, long-lasting issues as a kid matures. Mental illness can affect many facets of health, especially emotional stability and social growth, making it difficult for young people to maximise their social, professional, and personal societal contributions. They may also feel socially excluded and stigmatised. [4] Early intervention for mental health issues can reduce functional impairment, emotional and behavioural issues, and contact with all types of law enforcement. Additionally, it can enhance behavioural and social development, academic performance, and learning outcomes. There are vast gaps in our understanding of the best ways to treat mental disorder in children and adolescents. The funding for research into the origins of mental diseases, developmental neurobiology, and the most efficient, secure, and well-tolerated therapies is insufficient. The neglect of our culture is obvious when the stigma associated with mental illness and the antiquated approaches of child and adolescent mental healthcare are added. (bisma anvar)

2.5 Mental health

Adolescent mental illness involves more than just being depressed. A teen's life might be affected in a variety of ways. Teenagers with poor mental health may have problems with their academic performance, decision-making, and physical well-being. Youth mental health issues frequently coexist with additional health and behavioural hazards, such as a higher chance of using drugs, experiencing violence, and engaging in riskier sexual activities that could result in HIV, STDs, and unwanted pregnancy. It is crucial to support children's mental health development because adolescence is when many healthy habits and behaviours are formed that will last into adulthood. About 50 million Indian children face mental problems at any given moment, and this number would rise if the teenage population is taken into account. [5] The present literature reveals significant discrepancies in the frequency of several CAMH illnesses. According to a study done in Lucknow, the incidence of adolescent and child mental illnesses is 12.1%, although the prevalence of individual diseases such as nocturnal enuresis, pica, conduct disorders, and developmental disorders is 4.16%, 2.38%, 1.78%, and 1.26%, respectively. [6] Similar research carried out in Bangalore found that the prevalence rate was 12.5% overall, 12.4% in rural areas, 10.8% in townships, but 13.9% (highest) in urban areas of the metropolis. It was shown that the incidence varied between urban and rural locations. Our social, cognitive, and social well-being are all parts of our mental health. It influences our thoughts, emotions, and behaviours. Additionally, it influences how we respond to stress, interact with others, and make decisions. Every period of life, from adolescence and childhood to maturity, is vital for mental health. Mental health refers to a state for mental wellness that enables individuals to cope with life's stressors, develop their potential, study and work effectively, and give back to their communities. It is a crucial element of health and very well that supports both our individual and group capacity to decide, form connections, and influence the environment we live in. A core human right is access to mental health. Additionally, it is essential for socioeconomic, communal, and personal development. The absence of psychological diseases is only one aspect of mental wellness. It has variable degrees of difficulty and suffering, is experienced differently by each individual, and may have very different social and therapeutic implications. It exists on a complicated continuum. Mental health issues include psychosocial impairments, mental illnesses, and other mental states linked to high levels of suffering, functional limitations, or danger of self-harm. Although this is not always or always the case, people with mental health disorders are more likely to have decreased levels of mental well-being. Numerous individual, social, and structural factors may interact throughout our lives to support or undermine our psychological health and cause a change in where we fall on the psychological health care continuum. People may be more susceptible to mental health issues due to personal psychological and biological characteristics like emotional intelligence, substance use, and heredity. People are more likely to develop mental health issues when they are exposed to adverse social, economic, geopolitical, and environmental conditions, such as poverty, violence, inequality, and environmental squalor. Risks can appear at any stage of life, however those that happen during developmentally vulnerable times, particularly early childhood, are most harmful. For instance, physical punishment and strict parenting are known to harm children's health, and bullying is a major risk factor for psychological issues. Similar protective factors persist throughout your lives and help us be more resilient. They comprise, among other things, our unique social and emotional capacities and characteristics as well as satisfying interpersonal relationships, high-quality education, respectable employment, secure neighbourhoods, and cohesive communities. At various scales, society contains both threats and safeguards for mental health. Risk for individuals, families, and communities is

increased by local threats. Global risks, which include downturns, communicable diseases, humanitarian crises, forced displacement, and the escalating climate issue, raise the risk for entire populations. In order to lower risks, foster resilience, and create environments that are supportive of mental health, promotion and preventive interventions first identify the individual, societal, and structural factors of mental health. Interventions may be created for single people, particular groups, or entire communities.

Promotion and prevention initiatives should encompass the school, labour, justice, transportation, environment, home, and welfare sectors since changing the determinants of psychological health frequently requires action outside the health sector. By integrating promotion and preventive initiatives into health services, as well as by advocating, starting, and, when necessary, supporting multisectoral collaboration and coordination, the health sector may make a substantial contribution. Globally important and covered under the Development Goals is the prevention of suicide. Limiting access to resources, responsible media coverage, emotional and social learning for teenagers, and early intervention can all result in significant progress. A very low-cost and cost-effective technique for lowering suicide rates is banning highly dangerous chemicals. Another objective is to support caregivers in providing nurturing care. This can be done by enacting laws and policies that support and safeguard mental health, developing school-based programmes, and enhancing social and online environments. Programs for social and emotional development that are taught in schools are among the best ways for nations of all income levels to advance their economies. Growing interest in the promotion and protection of mental work-related health can be supported by laws and regulations, organisational tactics, manager training, and worker interventions. should be carried out through society mental health treatment, since it is more readily available and accepted than institutional care, contributes to the prevention of human rights violations, and provides better recovery results for those who suffer from mental health issues. Community mental health services, which may include community mental health centres and teams, psychosocial rehabilitative services, peer support services, and supported living services; mental health care that are incorporated in healthcare, typically in medical centres and through assignment with non-specialist care professionals in healthcare system; and services that deliver psychiatric care in social and non-health settings, like child protection, social work, and Countries must also come up with creative ways to vary and scale up care for prevalent mental health illnesses like depression and anxiety due to the enormous care gap, such as through non-specialist psychiatric treatment or digital self-help. increase the importance placed on mental health by people, communities, and governments, and match that importance with dedication, participation, and investment from all parties, across all fields .strengthen mental care to ensure that the full range of mental health issues is met through a community-based system of accessible, affordable, and high-quality services and supports; and reshape the physical, social, and economic characteristics of environments — in homes, schools, workplaces, and the larger community — to better protect health and preventing mental health conditions. Protecting and advancing human rights, empowering those with lived experience, and guaranteeing a multisectoral and multistakeholder approach are all priorities for WHO. In order to strengthen a group response to mental wellbeing and facilitate a change toward improved mental health for all, WHO continues to work on a national and international level, especially in humanitarian circumstances, to offer authorities and stakeholders with the evidence, tools, and technical support.

Chapter 2 – review of literature

2.1 Introduction

When someone perceives you negatively due to a distinctive attribute or personal trait that is seen to be, or is truly, a disadvantage, this is known as stigma (a negative stereotype). Unfortunately, there are many people who have unfavourable attitudes and ideas about people who have mental health issues. Discrimination may result from stigma. Discrimination can be overt and direct, such when someone disparages your mental condition or your therapy. It could also be unintended or covert, such when someone avoids you because they believe you might be violent, unstable, or otherwise dangerous because of your mental illness. You might even evaluate yourself. Get medical help. You might be hesitant to acknowledge your need for treatment. Do not hesitate to seek assistance because you are worried about receiving a diagnosis of a mental disorder. By figuring out what's wrong and lessening symptoms that conflict with your career and personal life, treatment can offer relief. Don't let stigma lead to shame and self-doubt. Stigma comes from a variety of sources. You can erroneously think that you are weak or that you ought to be able to manage your illness on your own. You can build self-esteem and get rid of negative self-judgment by going to counselling, learning more about your illness, and making connections with other people who are also struggling with mental illness. Ask for assistance at your school. Find out what plans can be helpful if you or your kid suffers from a mental disorder that interferes with learning. It is illegal to discriminate against students due to a mental condition, and teachers at all levels—primary, secondary, and college—must make every effort to make accommodations for these kids. Ask professors, administrators, or teachers for advice on the most effective strategies and tools. Lack of knowledge about a student's impairment by a teacher may result in prejudice, obstacles to learning, and subpar grades. Be vocal about stigma. Think about sharing your ideas at gatherings, in letters addressed to the editor, or online. It can encourage those suffering same difficulties and inform the public on mental disorder.

2.2 summary of review of literature

2.2.1 Stigma and discrimination among adolescents

The stigma and discrimination among adolescents towards the mental health issues continue in the society. Mental is one of the important factors to lead good quality of life. Support was needed. Mental illness in Lakshadweep has been varyingly increasing. The main reason is caused by this is lack of knowledge. People do not take any treatment due to the stigma and the myths around it. Society mostly biased with the people who with mental health issues due to the stigmatization and lack of knowledge, family issues are the common factor. Social

prejudice can increase the social distance such factors are social knowledge and education about the mental health issues. The person who with severe mental health issues not only cope up with the symptoms but also social and the self-stigma. Attitude of societal towards the mental illness led to opportunities for education and social stereotypes about themselves. The person who suffering mental health issues can result loss of self-esteem and hesitation in participating in the society. Mental health stigma and reducing the stigma among adolescents the growing literature will be helpful. Adolescents were high risk of mental health problems and suicidal tendencies. The help seeking behaviour among them are low. It will stigmatise confidence of the person. The unmet mental health issues were one of the significant problems for adolescents. Stigma is a one of the main barriers in mental health. Positive mental health knowledge contributes positive attitude among adolescents. The negative attitude towards the help seeking behaviour may result from the family members, peers and teens. Mental health education is the key factor for help seeking behaviour. Mental health difficulties help to reduce the stigma, teaching them about mental health issues is very important. Reducing stigma can help the positive attitudes towards the mental health issues. The young people thinking about their physical attitude towards mental health are different. The adolescent's mental health disorder is very much present in population. Mostly parent and children do not talk openly about the mental health issues and not take professional help. A reason also that society, negative attitude view about the mental health issues leads the stereotypical views, next reason low acceptance also a reasonable issue. The negative attitudes about mental health issues, public thinking. Children may learn very young age about the psychiatric problems and it's a personal issue. Stigma and feeling one of the biggest challenges in the adolescent's mental health issues. The possessive and negative attitudes towards mental health also lead the stigma in adolescents. Feeling of guilt and shame also present in young people. The negative attitudes towards mental health also effect in the peer groups and also avoiding the emotional problems. The embarrassment from the surrounding leads to such problems and denial also comes. Sometimes the young ones deal the such problems in unsophisticated way and also it effects in the eating, sleeping behaviours. The impact and interventions improve the adolescent's mental health. It also taught the empathetic towards the people who have the mental health difficulties. The help seeking behaviour also important. The mental health issues and depression, disorders develop in young age and in adolescents and not tend to seek the professional help. The ethnic minority group also not tend to seek professional help some mental health stigma. The young people not seek professional help mostly not much knowledge about the mental health issues, feeling emotional, not that much trust from other people provide. The

young people may seek help from the people if they experience the suicidal thought or depressive symptoms, negative past experience and some mental health issues were facing. Another way of adolescents seek help from the family and friends by talking and sharing the emotions. The next help seeking behaviour comes from the school-based counsellors and also the internet-based information's used to know about the symptoms and knowledge about the mental health issues. The studies describe how the adolescents perceive the mood disorders they have and also the mental health issues. The perception and attitudes. How the positive and negative attitude towards mental health issues. The adolescent's mental health problems were widely reported. And it has also become problem with the peer relationship. Stigmatisation is one of the important factors. Depression and ADHD. In the rural area children and adolescents face barriers and obtaining help seeking behaviour, seeking professional help the poor availability of services, delay of seeking help in mental health problems. It can lead several problems and poor treatment outcome. The increasing rate of mental health problems among the adolescents is a concern. They much needed the health attention. The help seeking behaviour is needed to filling the gap. The young people present the highest rate of mental health issues as compared any other age group. The 30% adolescents may experience differ kind of mental health issues in life time. A state of wellbeing is important to every human being, realising the abilities and how to cope with the problems. How to cope up with the normal stress of life And make a contribution to the society and to the community, the most common is depression and anxiety. Young people experience is this and also the psychological issues, depression is one of the main causes for the mental illness among adolescents and it's a serious illness. And is a one of the main causes for the suicide among adolescents. Mental health issues which will affect the development of the adolescents and young people. It also affects the social functioning of the person in the society. In childhood mental health issues can lead to isolation, stigma, difficulty may occur it also effect in the help seeking behaviour. Help seeking behaviour which have been proper communication were needed for their psychological support. The main lack of emotional competence is the problem in the adolescents. Emotional and previous experience also in it the help seeking barriers also were found. Literacy is another important factor. The stigma is the most prominent thing in the help seeking barrier. Negative reaction from others also effects in their confidence. The effective interventions to enhance the help seeking behaviour among adolescents. To enhance the prevention, detection, and treatment and recovery from the mental health problem. There will be a formal and informal help. The adolescents one of the valuable resources in the society. They play an vital role in the society. The social wellbeing is very important for the personality. Mental health problem

and attitude towards the mental illness have common risk and factor the school is an central place for the adolescents for the social interaction, health and social wellbeing. It also important to promote the mental health issues. The negative believes and thoughts can promote the bad experience in the mental health issues, the negative and false believes also effects. The problem among peers also effects the overall wellbeing of the individual. The 10% in the population of adolescents possess the negative attitude and difficulty among the adolescents and the stigma around mental health issues is one of the main significant issues faced by the mental health services. The prejudice and discrimination against the individuals with mental illness which is lack of knowledge, misconception and discrimination which have been involve to neglect to interact with the person. Negative attitudes also give rise for the social distance and the discrimination which have been involve the avoidance with the person with mental health issues. They might feel the sense of low self esteem, wellbeing, rejected, and discriminated against by the others and also due to the self stigma and myths. If they know about the mental illness they might get avoidance from the society and it is one of the greatest barrier to help seeking and taking professional help. Some times people may take treatment avoidance due to the stigma and misconception. Stigma is one main factor for not taking the professional help those who with mental illness.

2.2.2 Public awareness

World Health Organization estimates that 10% of the world's population has some form of mental disability.⁷ The point prevalence of mental illness in the adolescent population at any given time is also 10%.⁸ The consequences of stigma associated with mental illness have attracted the negative ratings among the public. The public express that the people with mental illness are unpredictable and dangerous. Thus, the knowledge and attitude among adults towards mental illness bears profound impact on the person with psychiatric illness.

In India among the total population, 72.22% of the people live in rural areas and 27.78% in urban areas. Among these, adults between the age group of 15-59 years form 56.9% of the total population.¹⁰ Mental illness affects the people of all age groups. It is estimated that 450 million people are experiencing mental illness at any one time, most of whom live in developing countries. Most of them do not take professional help due to the less awareness and lack of awareness. Towards the mental health issues. In the rural areas the rates of mental illness is large also in the rural areas. Lack of awareness and financial problems are important barriers to the help seeking behaviour. These things are particularly relevant in the adolescents. It is

very important to understand more about the knowledge and also the attitudes related to mental illness, in India the stigma around mental health issues still occurs, to assess knowledge about it and attitude among people should be important, developing the knowledge and awareness can help them to open up and to seek professional help. Mental health issues are generally the combination of the abnormal thoughts. Which are emotions, behaviours, relationship with society, family, peer group. The common mental health issues are depression, anxiety, stress related problems, isolation, ill health. Most of them are successfully treated, the knowledge regarding mental health helps the individuals to overcome the stigmas and prevent the mental illness in adolescents. Some studies shows that average knowledge and some of them have poor knowledge regarding the mental health. Some adolescents had a negative perception and it affect them to fear to approach the mental disorder. The study found that the knowledge among adolescents is less and an unfavourable attitude towards the mental illness and its prevention. There is the need of conduct the awareness programs on mental health and its prevention. And to increase the knowledge of mental illness through the friends, mass media and through professional help

The half of people with mental illness do not receive help for the mental health issues and disorders. People avoid also delay the seeking help from professionals, mostly due to the may treat differently and fear and also losing their daily life. Because of the stigma and prejudice with mental health issues is still a major problem in the society. The discrimination against the people with mental illness in various ways, understanding and how to address is very important. It can be help from seeking from professionals. Stigma mainly lack of education and understanding and also fear. Misleading matters also effect the individual. Often public may accept the treatment for mental health issues and some people have still negative attitude towards the mental health. Sometimes stigma not only effect the individual with mental health issues also the people who support including family and friends. When looking the different ethnic group may a major barrier for the individual. Seeking help from professionals means shame also available in some cultural group, mental health care system also sometimes become barrier for the individual. The discrimination and social stigma can worsen the situation and lack help seeking behaviour from the individual. Studies found that the 90% of the adolescents

experience the depression and having some mental health issues. And the young ones seek information from the online and media. Education and campaigns are very effective for social stigma. The campaign can increase the education and awareness in adolescents and also in the help seeking behaviour. Talk openly about the mental health issues like sharing with families and friends. Educating the individual and also the others about mental health and also the positive factors. Making people involved in the matter. Encourage the both physical and mental health, telling how mental health important as like physical health. Compassion towards the mental health and its issues. Honest about the treatment who have mental health issues. Let people know about the mental health issues and its treatments openly. Empower the individual rather than shame. Motivating the individual over mental health. Stigma views in a very negative way. Because of the lack of education and negative attitude towards the mental health issues, these conditions were common among society. Negative attitudes and beliefs also common among the society about the mental health. Likely stigma leads the discrimination it can be direct, also makes negative remark about seeking the professional help and also the treatment who were taking for mental health issues. Sometimes people avoid the person because of it.

People will avoid due to the persons behaviour who have weird and dangerous and violent behaviour due to the mental health issues. Individual also judge themselves for it. There may some harmful effects of mental health issues and stigma avoidant of professional help, lack of understanding by family and friends, lower opportunities in school and trouble in activity participation. Physical violence and some negative belief that never good in challenges and cannot improve the individual's situation. There are the steps to cope with stigma on mental health issues, which are get proper treatment, need of treatment is very important. Mental illness can be let fear prevent from seeking professional help. Treatment can help the individual and reduce the negative attitude on personal life and also in mental health issues. Stigma not come from others the individual beliefs the person condition is weak and try to control without help. Educating themselves and counselling can help and also improve the condition which have been facing. Educating themselves can improve the self-condition and self esteem and also overcome from judgment which have done by to the self. Never isolate themselves when have mental health issues. Not hesitate to talk about mental health issues to the family, friends and reach out for the help. Do not equate the self with the illness the person has rather than saying the bipolar and saying I have bipolar disorder. Joining to a support group, if the person has some mental health issues seek help from the school, it may cause in learning difficulties,

early detection can reduce the risk factor, poor in grades, lack of concentration, lack of confidence, seek help from the if the individual face any discrimination or anything. Talk to teachers or primary educator about the mental health issues. They can provide the best approaches to the individual. The next one can be spoken out against the stigma like expressing the factors, self-courage, educating the public about the mental health, it can be helpful for the courage's to others, collecting the information and facts. Understanding the facts, accepting the condition based on the facts and education, recognising what treatment were needed help seeking behaviour, seeking help and support from others. Educate others can make a difference. People with serious mental illness challenges in daily basis. Struggle with the mental illness. On the other hand, some stereotypical factors and prejudice about mental health issue also present, it is very challenging factor. The prejudice and mis consumption about mental health can be result can lead the lack of quality life. It can be effect in physical health. Understanding the mental health issues were important. Understanding the impact of the disease. It has only from knowing self-stigma and also the public stigma.

2.2.3 Stigmatisation

Mental health stigma which is when people see individual in a negative way due to mental health issues, due to that people treat differently and discriminate the individual because of the mental illness. Discrimination and the stigma in society can make bad effect in the individuals mental health and lack help seeking behaviour also arise. Stigmatisation also important factor in mental health stigma. To change mental health stigma is speaking up making awareness to the people about the mental health. Not making negative and bad comment on mental health and with the who have mental health issues. stigma which happens when people tell someone have the illness rather than who they are an individual. The person who has mental illness the stigma can make situation worst and it may make serious problem to them. It also causes to the help seeking behaviour from others also in sharing emotion to the people. There some effect due to stigma on mental health issues which are person may experience shame, isolation and hopelessness. Individual may back from getting treatment. Lack of education and awareness from the family and friends. They might have lack of interaction from peer group and from family also from the society. Harassment and social bullying from the society and self-doubt and thinking the person cannot overcome the situation in life. There are some ways to deal with the mental health stigma. Taking the treatment which the individual need, not to fear what

people may think about mental health issues and not stop from getting help which the individual needed. Start believing themselves, what hear and experience is enough. Not to influence others words to themselves. Other people's ignorance cannot make the individuals what feel about themselves. Mental health issues are not the sign of weakness. Sharing the mental health issues with professionals can help the individual from recovery. Never try to hide the mental health issues, individual try to hide their mental health issues from family and friends, it may affect the reaching out of people the person trust which are family, friends, religion, always try to connect with people like join in a mental health support group it may help you connect to others, it help the individual to deal with the feeling, feeling from alone and isolation and it will make the person think from the individual is not alone and suffering from mental health issues. Sharing experiences also make good in individual. Not defining the illness to people in a low voice, powerfully saying about the disease. If the individual have any type mental health illness says powerfully what illness is.

The mental health which is not personal, other people judgement over the mental health illness. It may because of the social stigma and lack of awareness, and do not believing what others judgment over your mental health and not taking personally. Thus, every individual in the society has the role to create mental healthy community, against from the stigma and discrimination. People learning facts about mental illness and sharing with family and friends, getting know about the mental health issues, learning more about it, not judging or any discrimination of individual who with mental illness. Avoid using bad languages, discrimination against the individual who have mental health issues. Treat the individual mutual respect. Avoid using the bad languages. Not using the stereotypical language and words to the individual. Sharing the mental health issue stories can help the individual to overcome from the situation. And also sharing mental health illness experience with people who face the mental health illness can helpful over coming from it. One of the main reasons why persons with mental disorders do not receive sufficient care and treatment is the stigma associated with their illnesses. The purpose of the study was to gauge how stigmatised mental illness is and how well-informed the general public is about it. The World Health Organization (WHO) states that "450 million individuals worldwide are thought to be affected by mental diseases." Approximately 80% of those with mental disabilities reside in low- and medium-

income (LMIC) nations, and four out of every five individuals there who have major mental illnesses do not have access to the necessary mental health care. [1] Mental illness is one of the leading causes of the global burden of disease, accounting for 14% of all life years adjusted for disability (DALYs) lost globally. The two types of stigmas are public and self-stigma. Public stigma is when a stigmatised group is subject to widespread prejudice. The prejudice associated with mental disorders can be viewed as a significant public health issue given its detrimental effects on treatment seeking, adherence, and effectiveness. Self-stigma arises when a member of a stigmatised group internalises the negative perceptions held by the wider population. Understanding the stigma experienced by people with mental illness (PWMI) is crucial in order to better understand the major causes, sources, nature, and forms of stigma. In this study, we want to evaluate how stigma relates to mental health issues. 20% of younger people worldwide suffer from mental problems. Only 7.3% of India's 365 million students reported these issues. Although stigma linked with mental health issues has an especially negative impact on young people seeking care, it is unknown how widespread stigma was amongst young people in India. In order to combat this stigma in India and around the world, focused interventions will be based on a description and characterization of public stigma amongst young people. As a result, we assessed the scope and manifestations of stigmatisation and synthesised data to support recommendations to lessen stigma associated with mental health among young in India. The majority of studies (66%) concentrated on youth training for careers in healthcare. One in five young individuals engaged in actual or planned stigmatising behaviour, and one-third of them exhibit poor awareness of mental health disorders and bad attitudes toward those who have them (I2>=95%). Youth fail to identify the reasons and signs of mental health issues and think that healing is improbable. Due to misconceptions and a misconception that mental health issues only involve serious mental diseases, people with mental health difficulties are often seen as being dangerous and irresponsible (e.g., schizophrenia). However, it is uncommon to use or comprehend psychiatric terms. To increase young people's comprehension of the variety of mental health issues, public education may substitute symptomatic vignettes for psychiatric terminology (using accessible language and imagery). It is advised to use educational institution-based awareness programmes and content that is pertinent to culture and adult social roles to eliminate public stigma. The prevention or treatment of mental issues are at a critical juncture for young people, especially adolescents and early adulthood aged 10 to 24. A mental disease is thought to affect one in five adolescents worldwide. 75% of adults who have mental disorders claim to have developed them for the first time during this time. The degree and symptoms of such stigma vary among cultures, even while it prevents people with mental

health issues (i.e., symptoms that are insufficient to constitute a diagnostic of a mental illness) and those who have such diseases from seeking therapy and therapy. As interconnected "issues of information (ignorance), issues of attitudes (stereotyping), and difficulties of behaviour (discrimination)," public stigma is described. Public stigma plays a significant role in the underrepresented prevalence of schizophrenia in India as well, where only 7.3percent of young folk's report having a mental disease and even fewer seek treatment. Assistance by young people is more negatively impacted by stigma associated with mental health than it is by adults . Young individuals who suffer from mental illnesses are much more likely to feel more socially isolated from the general population. Additionally, in comparison to adults, youthful people are less likely to seek assistance for psychological issues because of common anxieties about complete absence of confidentiality, peer influences, a need for independence, a lack of awareness of mental health-related services, and a lack of knowledge about how to recognise mental health problems. Unsurprisingly, compared to young adults, teenagers in a study showed it more challenging to reveal their mental health issues. Unknown is the extent of stigma associated with mental illness among young individuals in India. A systematic review discovered stigma of psychological disorders associated with violence, unpredictability, and disability in Latin America and the Caribbean [23]. Stigma research conducted in the United States, Greece, and Japan [20,21,22] recognises social differences and discriminatory beliefs regarding mental health problems. Young people in India will probably encounter difficulties in realising its economic and social potential due to the country's 365 million youth population, which is the greatest in the world [24] and a significant load of untreated mental health issues. Data on such stigma related to mental health were scarce, according to India's national mental health survey done in 2015–16 [9]. In April 2017, India enacted a law defending the right to equality and prohibiting discrimination against those who suffer from mental illness [26]. Reducing public stigma is one of the objectives of India's national mental health policy [25]. Through a literature review and conceptual, this study aims to identify common issues with knowledge, attitude, and behaviours related to mental health; estimate the magnitude as well as prevalence of mental- health-related public stigma among a subgroup of the Indian population, namely young people aged 10 to 24; and compile recommendations for lessening mental-health-related public stigma. India has a long history of stigmatising, trivialising, disregarding, and looking down on mental diseases. Religious rites, denial, slurs, and victim-blaming are frequently used in place of acceptance. People with mental illnesses frequently hear comments like, "If only he/she would simply go out more," "If only he/she would simply go out less," "If only they would pray," "If only they would just put in more effort in

relationships," or "try harder to be happy." The biological basis of all types of mood and psychotic disorders is still far from being understood and accepted by the general public. It is still not widely recognised that mental health issues require the same attention and care as physical illnesses. In our nation, there is a severe lack of mental health literacy. Even today, when questioned about depression, the average person would be unable to identify its medical or chemical causes and would instead describe it as being unusually depressed. Stigma is frequently linked to problems that the majority of society cannot understand. People need to be informed on the fundamentals of mental health in order to end this stigma. In India, the phrase "out of sight, out of mind" is a nice way to sum up how people feel about mental disorders. Mental illnesses may not be visible, like a rash, cut, fever, or runny nose, but that doesn't imply they don't exist. As a result, people with mental illnesses are frequently institutionalised, misunderstood, and blamed, which keeps them caught in a loop of their sickness. There are two types of stigmas: societal and personal. Stigma is the mark of shame connected to all things psychological. As the term implies, societal stigma is one that is visible in society at large when individuals refuse to recognise the patient's sickness and go so far as to joke about it or minimise it. On the other hand, self-stigma comes from within and is related to the challenges that the person has.

Because of many preconceived notions about mental health issues that have been ingrained in their thoughts, a sizable portion of our society is scared to seek help for themselves. People who must pause and consider their options before embracing their disease out of fear for what "others will think of them?" Parents who may very well be aware that their child is not functioning well mentally but who choose to wait until the very last minute because they cannot stand the blaming and derision that would come with the sickness. It might surprise you to learn that a large number of people in our nation still carry this stigma. They could come from large cities or the most remote villages, have no formal education, or perhaps have a close relative or friend who is mentally ill. For the patient, their doctors and therapists, as well as their relatives and loved ones, the labels that go along with a diagnosis are cruel, demeaning, and useless. The perspective of utter negativity that Any progress that needs to be made toward acknowledging psychological health as a crucial component of our daily functioning is perceived as being hampered by mental diseases. According to a WHO research, 4 out of 5 persons in low- to middle-income nations, including India, do not seek treatment for even the

most severely incapacitating mental disorders. According to the data from Reddy et al study (2013), there are millions of people in our country who are ashamed of their major medical illnesses, unaware of them, or both. Without any fault of their own, they wake up each morning wondering why their lives must be as they are, why they can't just be happy, why the voices in their heads just won't go away, why they can't stop feeling as though they're going to die, and why they perceive things that other people don't. possessing the misconception that "Talking won't change it. But sometimes you need to tell someone; other times, you just want to get away from those horrifying emotions and yourself so there is no suffering, no dread, and no ugly things. Therefore, one should speak up and fight to reduce stigma surrounding mental health. Now is the time for everybody to realise that "silence" can be a sign of a mental health problem. "Sadness, disappointment, and great struggle are events of life, not life itself," we must all grasp. Unspoken sentiments never go away. They are buried alive and will eventually reappear in more hideous ways. Therefore, it is essential to communicate emotions appropriately and to promptly seek professional assistance when needed."Anything human is manageable, and anything that is manageable can be said. Our sentiments become less intimidating, distressing, and overwhelming when we are able talk about them. F.R. Rogers. Refuse to succumb to stigma. A diagnosis cannot define who you are or what you are capable of doing. By discussing mental health, we can feel free to look for support, connect with like-minded individuals, and make progress toward wellbeing. Let's keep the discussion about mental health going. Together, we can fight the stigma that many of us experience. Over 40% of nations do not have a policy, and more than 30% do not have mental health programmes. Psychological and cognitive disorders are frequently not covered by current health insurance to the same extent as other illnesses, which places a considerable financial burden on patients and their loved ones. The stigma associated with those who have mental illnesses is one of the reasons why there is little support for mental health. Several professional organizations have started mental illness awareness initiatives in the last ten years. The World Health Organization (WHO), which focused on mental health for Global Health Day 2001 and the World Health Report 2001, claimed that mental illness was underappreciated and that maintaining good mental health was crucial for the general well-being of people, societies, and nations. [1] To enable their full engagement in society, the American Psychiatric Association Assembly and the Board of Trustees approved a Position Statement against discrimination against those who have previously had psychiatric treatment. These days, mental health disorders are widespread. They have a significant impact on a lot of people, including their friends, families, co-workers, and society at large. One in six people are estimated to experience a common mental health

issue. 10% of kids and teenagers (5 to 16 years old) have a mental disorder that may be diagnosed clinically. The most prevalent mental health problem worldwide is depression, which is followed by anxiety, schizophrenia, and bipolar disorder. Many people who encounter mental health problems fully recover from them or are able to live with and control it, especially if they seek help at an early stage. However, despite the fact that countless people are affected, mental illness still carries a significant societal stigma, and those who struggle with it may experience exclusion in every aspect of their lives. The isolation and stigma that people with disabilities endure from society, as well as from their families, friends, and co-workers, exacerbates many people's problems. Nearly all people with mental health difficulties claim that stigma and segregation have a detrimental impact on their life. This is due to the fact that society as a whole has stereotyped views of mental illness and how it affects people. Many people believe that people with mental illness are dangerous and violent, but in reality, they are more likely to be attacked or harmed themselves than to harm others.

Additionally, stigma and exclusion can make someone's mental health problems worse, delay or prevent them from getting help and therapy, and hinder their recovery. Mental disease is inextricably linked to social isolation, impoverished living conditions, unemployment, and poverty. Therefore, stigma and seclusion can keep people in a cycle of illness. The situation is made worse by the media. In media accounts, mental illness is commonly linked to violence, or people with mental health disorders are portrayed as dangerous, criminal, evil, or impaired. The best way to counteract these stereotypes, according to research, is to speak with people who have personally dealt with mental health concerns. Several national and regional initiatives work to alter how the public views mental illness. Understanding what someone with a mental illness could be experiencing is crucial for assisting in the reduction of stigma surrounding mental health.

It's critical to understand that mentally ill people are afforded the same rights as healthy individuals. You can actively dispute myths and inform people against damaging; inaccurate stereotyping whenever unfavourable stereotypes are mentioned in conversation or the media. When describing yourself or others, be careful to avoid using unpleasant or inappropriate language. People in India who suffer from serious mental problems frequently go to shrines and temples rather than doctors. The lack of understanding and sensitivity regarding the issue is the main factor contributing to India's decline in mental health. People who experience any form of mental health disorders are heavily stigmatised. They are commonly branded as

“loons”, “crazy”, “posses” and numerous other terms by society. As a result, the sufferers experience a vicious cycle of isolation, agony, and shame. India is a developing country. Healthcare infrastructure is not yet completely developed and everyone cannot get cost effective treatment. Getting treatment for physical problems is naturally a top priority as it incapacitates the person. Since people have limited finances, physical problems are given preference and mental issues take a back seat as it’s impact is not as visible as physical issues. There is a lack of education and awareness about mental health. People consider mental issues as taboo and they try to hide them. They don’t discuss it openly with others and feel low and a sense of guilt for suffering from mental illness. Person suffering from Mental health issues is seen as a mad man deserving mental asylum. Since we shared a home with several large families, mental health problems were extremely rare. People reported having low levels of stress, worry, and sadness because they felt a sense of connection to their families, communities, and cultures. We've been converting to nuclear families as the globe has developed, and social ties have dissolved. There is more pressure than ever to earn more, possess more, and excel others. As a result, there are more people experiencing mental health issues.

2.2.4 Cultural factors

Governments, non-governmental organisations, and other social institutions must begin educating the public about mental health concerns and dispelling the myths surrounding them. They've been effective in doing this with conditions like measles, leprosy, HIV, typhoid, etc. Culture is an ephemeral concept that represents a society's whole way of life. It is an expression of the group's adaptability to the physical surroundings and a result of the group's history. It alludes to the universally held views, emotions, and behavioural patterns as well as the fundamental ideals and principles that serve as a group's moral compass. The culture is influenced by a variety of factors, including social interactions, economy, religion, philosophy, mythology, scripture, and other aspects of daily life. Culture is handed down from one generation to the next and is always evolving. Although the styles vary through one group to another, it exists in all communities. People's mental health is individually influenced by culture in each society. Cultural factors have an impact on mental health disorders at every

step, from sickness onset to course and result. Numerous patients are sent to a doctor or psychiatrist who is familiar with their cultural milieu because he or she is better able to comprehend the client and his psychology owing to that person's knowledge of the cultural elements that affect illness and the healing process. There is no culture that offers complete protection from psychological upheavals. Despite differences in the symptoms' content, all civilizations have the same types of psychiatric diseases. For instance, a misguided Indian farmer will complain of being possessed by a demon, yet his western counterpart will think that electronics are controlling his mind. A few decades ago, it was thought that people in oriental cultures underwent little to no stress. They were thought to have lower rates of mental illness and strain diseases such heart disease, high blood pressure insulin, cancer, and suicidal behaviour. This is not true at all. Transcultural studies show that societies subjected to a sudden influx of people from different cultures go through a cultural shock that causes a lot of mental and social hardship. The effect of the paranormal on the human brain is one comparable phenomenon that has been noted in relation to psychological issues in all of them. It's fascinating to note that various ethnicities have a varied perspective of illness, with disorders of the mind and body being attributed to a humoral imbalance. For instance, conceptions of Chinese or Roman culture are consistent with the personality qualities sat, raj, and tam as well as the three humours vat, pit, and kaph that are understood in the Indian subcontinent. The development of each culture occurred independently, thousands of kilometres apart, and with very little interaction. The consistency of viewpoints on mental health issues across civilizations demonstrates the universality of human mind. Since the Vedic era, descriptions of the human mind, its operation, consciousness, and patterns of human behaviour have been made in India. Mental health and the psyche have been a subject of study for ages. Studies on demographic characteristics, cultural factors influencing illness presentation, diagnosis of illness-culture bound syndromes, and the impact of cultural influences and belief systems on psychopathology, stigma, and discrimination against the patient have been conducted in significant numbers. The research on society and psychiatry in various fields and their impact on the physician, his diagnosis, and treatment have been examined critically. We inhabit a collectivist society in India. Our philosophy and identity are greatly influenced by the community in which we live. We have common objectives, yet there are unspoken, unwritten standards that govern how we conduct ourselves. Since communal ideas are more significant than individual ones, even our attitudes tend to mirror the values of our neighbourhood. Being a member of this group might sometimes help people feel less alone and isolated, but other times, we have a tendency to shun members of our own community who don't fit the mould.

These persons may include those who suffer from mental illness. This one enduring societal principle is applicable to everyone in India. Gender, caste, religion, socioeconomic class, and geographic region are all irrelevant. It holds sway over people's decisions because if their vulnerabilities were known, they would draw criticism, rumours, and turmoil. Additionally, it discourages urgent psychological care. According to a survey, 36% of Indians had a major depression episode (MDE) at some point in their lives. Therefore, the majority of persons who experience depression at some time in their lives are found in India. The drive to fit in and appear "normal" in society emerges as harmful discrimination and pressure against seeking help. stigma to seem typical. stigma designed to keep the plotline hidden. stigma to preserve the honour of the family. Use of stigma to dissuade oneself from seeking assistance.

2.2.5 why stigmatised

Society is getting more prepared to meet our requirements when a greater proportion of people experience a downturn in their mental health. But there is still stigma attached to receiving treatment for mental illness. Social stigmas are a common occurrence. Once they are developed over a long period of time, they can be challenging to undermine and defeat. A stigma is an unfavourable and frequently negative social attitude that is connected to an individual or group, frequently demeaning them for some perceived shortcoming or distinction in their life. People or groups may stigmatise others for living a particular way, holding particular cultural values or adopting a particular lifestyle, as well as for having specific medical disorders, such as mental diseases. Mental illness stigma The term "trusted source" relates to social rejection or when people with mental illnesses or those who seek treatment for emotional pain s anxiety, hamed by society. Family, friends, coworkers, or society at large can all exert pressure on people due to the stigma associated with mental illness. Groups have the power to politicise stigma. It may make it more difficult for those who are suffering from mental illness to seek support, integrate into society, and live comfortable and happy lives. Stereotypes, which are frequently untrue, unfavourable, and hurtful depictions of whole groups of people, can contribute to the stigma around mental health. The stigma associated with mental illness can stem from a variety of places, including individual, social, and family views as well as from the illness itself, which may lead a person to behave differently than is regarded as the cultural or social norm. Increased stigma can result from a variety of factors, including a lack of knowledge, misconceptions, and fear of those with mental illnesses. Nearly 9 out of 10 individuals suffering from a mental illness feel discrimination and stigma negatively affect

their life, based on the Mental Health Foundation. They also claim that people with mental health issues have among the lowest rate of employment, long-term relationships, decent housing, and social inclusion of any group of people with a chronic illness or disability. The stigma associated with having a mental health problem can exacerbate symptoms and make recovery more difficult. Living with stigma may also make a person more likely to seek treatment. Stigma may not always be visibly displayed or articulated through grand gestures. It might manifest itself through the language people would describe mental illnesses or those who have them. It can be upsetting that people to hear cruel, insulting, or dismissive language used in this way. They may feel isolated and as though no one can relate to what they're going through as a result. Since most stigma stems from ignorance and unfounded fear, public education to enhance awareness of mental illness is essential. When learning that what a friend, friend or relative, or colleague is coping with a mental illness, it is crucial to check trustworthy sources of data on mental health issues and gain more knowledge. A mentally ill person disorder can actively participate in their treatment on an individual basis. If they believe that stigma affects their capacity to deal with day-to-day situations like job, housing, or healthcare, they might also think about hiring an advocate. (taisha Caldwell Harvey)

2.2.6 stigma and prejudice

More than half of those suffering from mental illness do not obtain treatment. People frequently put off or postpone seeking therapy out of fear of being treated unfairly or out of concern for their livelihood. This is due to the fact that stigma, discrimination, and prejudice against those who have mental illnesses are still major issues. No matter how blatant or subtle stigma, prejudice, and discrimination are toward those who have mental illnesses, they all have the potential to be harmful. Understanding how stigma and discrimination towards individuals suffering from mental illness manifest themselves and how to confront and end it can be helpful. Fear or a lack of understanding are two common causes of stigma. The media's inaccurate or deceptive portrayals of mental illness have a role in both of those issues. While the public may recognise the medical or hereditary nature of a mental health issue and the necessity for treatment, a review of studies on stigma reveals that many people have a negative image of those with mental illness. The stigma associated with mental illness is a problem in some racial and ethnic diverse communities and can make it very difficult for members of those groups to receive mental health services. A strong family, emotional control, and avoiding humiliation are some cultural norms that may be at odds with getting professional care for

mental illness in various Asian cultures. Media portrayals of individuals suffering from mental illness have a stigmatising and perception-altering effect, and they are frequently violent, inaccurate, and unfavourable. In research released in April 2020, the leading character is depicted as having a mental disorder who turns violent in the blockbuster movie Joker (2019) as a recent example. A viewing of the movie was "related with increased levels of bias toward persons with mental illness," the study found. The authors also speculate that "Joker may worsen self-stigma for individuals who have a mental illness, resulting in delays in seeking care." Research demonstrates that one of the most effective strategies to lessen stigma is to know or have contact with someone who has a mental condition. People may make a difference by speaking out now and sharing their experiences. Knowing someone who has a mental condition makes it less frightening and much more real and sympathetic. Efforts to lessen discrimination and stigma can be successful at the individual and societal levels, according to a 2016 assessment of the research on the topic. The anti-stigma initiatives that involved long-term commitment and engagement with people who had firsthand exposure to mental illness had the strongest supporting data. (Jeffrey Borenstiene)

2.2.7 discrimination

When someone views you negatively due to a specific quality or trait, it's called a stigma. Discrimination occurs when someone treats you poorly because of their mental illness. When someone is defined by their condition instead of who they are as a person, stigma occurs. Instead of being referred to as "a person experiencing psychosis," they can be referred to as "psychotic. The societal stigma and discrimination that those with mental health difficulties face can exacerbate their issues and make it more difficult for them to recover. The individual can put off receiving the necessary assistance out of concern of being stigmatised. Stigma's negative effects, The following are a few consequences of stigma: Reticence to seek aid or therapy due to emotions of guilt, helplessness, and isolation less prospects for job or social contact due to a lack of comprehension by family, friends, or others bullying, assault, or other types of harassment Self-doubt: the conviction that you'll never be able to get well or fulfil your life's goals. Get the necessary mental health care. Do your best to avoid letting your fear of being diagnosed with a mental disorder prevent you from seeking help.

Refuse to accept it. You may begin to believe something if we hear or experience it enough times. Don't let the stupidity of others affect how you perceive yourself. Mental illness is rarely something you're able to handle on your own and is not an indication of weakness. You will be helped on your recovery journey or management if you discuss your mental health difficulties with healthcare specialists. Don't run away. Many persons who suffer from mental illness wish to withdraw from society. Getting in touch with the family, friends, coaches, or religious leaders you trust. Relate to others. The realisation that you aren't alone in your experiences and emotions might help you deal with a sense of isolation when you join a mental wellness support group, whether it be online or in person. Your sickness isn't who you are. Do not, as some could, define oneself by your condition. Say "I have schizophrenia" rather than "I am schizophrenic." Language has influence. Not on a personal level. Keep in mind that opinions held by others frequently result more from a lack of knowledge than anything else. Do not assume that their opinions of you have any connection to you personally because they make these judgments before getting to know you. In order to remedy illegal discrimination, you can get assistance from the Victoria Equal Opportunity or Human Rights Commission. An organisation of the Commonwealth Government, called Australian Human Rights Commission, works to advance human rights and combat prejudice. Internationally, there are "Principles for the safeguarding of individuals without Psychiatric Illness and the Development of Mental Health Care" created by the United General Assembly of Nations. Material on psychological health and human rights is also available from the World Health Organization. In order to build an inclusive, anti-discriminatory environment that supports recovery, everyone has a part to play. You may assist by:

finding out the truth about mental disorder and telling family, friends, coworkers, and students about it establishing a relationship with those who have experienced mental illness personally so that you can learn to recognise them for the people that are instead of their condition. not labelling, condemning, or discriminating against anyone who have mental illnesses. Respect and dignity should be extended to everyone. Avoid using language that prioritises the patient's condition over their person. Instead of saying "that person is bipolar," say "a person with bipolar disorder." Saying anything when you hear someone nearby making false or stereotyped remarks regarding mental illness

2.2.8 challenges

Serious mental illness presents two challenges for many people. On the one hand, they battle the disease's symptoms and associated impairments. On the other hand, they are hampered by prejudice and stereotypes that arise from misunderstandings about mental illness. Both rob individuals suffering from mental illness of the possibilities that characterise a quality life, including access to good occupations, secure housing, adequate healthcare, and connection with a variety of social groups. Although research has made significant progress in understanding the disease's effects, it has only lately started to explain stigma associated with mental illness. The broader public's reaction to those who have mental illness is known as public stigma. The stigma that individuals suffering from mental illness hold against themselves is known as self-stigma. Expectations, prejudice, and discrimination are the three elements that make up both public and self-stigma. Stereotypes are considered by social psychologists to be particularly effective sociocultural structures that are acquired by the majority of social beings (1-3). Stereotypes are referred to as "social" as they represent generally accepted beliefs about particular groups of people. They are "efficient" because they enable people to form immediate impressions and expectations about members of a stereotyped group. (The world psychiatric association)

Chapter 3 Methodology

Title

- Adolescents attitude towards mental health, with special reference to Lakshadweep Island

INTRODUCTION

Mental health it also called mental health issues which always a concerned subject time to time. Adolescents attitude towards mental health area which helps to identify the problem how much is important for the individual. The study also aims to understand the level of understanding the problem and how to make awareness and how to overcome it.

STATEMENT OF THE PROBLEM

Around the world 20% of young people experience the mental health issues but very fewer common people report the such problems. In Lakshadweep Island were 34% were the adolescents. The awareness and education about mental health is still lacks. The superstitious beliefs and religious believes are the main factor for lack of unaware about the mental health issues. Mostly the islanders believe it's happened because of the punishment. There public stigma associated with mental health problems. The stigma around people on mental health mainly effect on the help seeking behaviour among young people. The issues were mostly unknown. Mostly people have negative beliefs, negative attitudes and also displays a negative behaviour to the people who experience the mental health issues. There are types of prejudice, stereotypes and discrimination were present in mental health issues in island. The individuals who have mental health issues may both self and public stigma were present. The person with mental stigma may experience the blaming, shame and isolation from the social factors. Most found in children to adolescents, which results the adolescents with mental health issues experience the negative consequences. The person who effects with mental health issues include the loneliness, isolation from society, social rejection. It's very important to know and understanding stigma, issues a priority.

SIGNIFICANCE OF THE STUDY

Through the research the researcher is going to focus on the attitudes of adolescents in mental health issues. Especially the issues were faced by the challenges that occurred in adolescents and isolation. Many of the adolescent's face problems mostly related to mental health, physical health. Some of them were faced mental health breakdown during the lockdown and they were not gone to any therapy clinic.

This study finding will explore the contributing factors of mental health stigma on adolescents, the study focuses on the adolescents. After identifying contributing factors the responsible authority can make the changes in the pattern.

GENERAL OBJECTIVES

- To study about the adolescents' attitudes in mental health issues.

SPECIFIC OBJECTIVES

- To know about the Level of awareness and misconception about the adolescent's attitude toward mental health issues
- To know about the superstitious religious believes involved in the mental health issues among adolescents
- To know about the myths regarding on mental health among adolescents.

Concept

Mental health: According to WHO, mental health is understood not as a mere absence of illness, but rather, in a broader sense, as a state of well-being in which individuals develop their abilities, face the stress of daily life, perform productive and fruitful work, and contribute to the betterment of their community.

Adolescents: in the process of developing from child into adult

Attitude: a feeling or opinion about something or someone

Operational

Mental health: mental health refers to a wide range of mental health conditions, which include depression, schizophrenia, anxiety disorders, eating disorders and behavioral changes. Mental health concerns arise to mental illness when the ongoing symptoms cause frequent stress and an inability to function in day-to-day life.

Adolescents: which is a transition stage from child to adult. It is a cycle of physical changes to reproductive maturity.

Attitude: Attitude which denotes the belief, mood and attitude towards something. It may be hard to change.

RESEARCH DESIGN

The researcher is planning to do qualitative research. This study will go on as a descriptive one. The research is mainly focused on the adolescents.

Universe

- The universe of the study is people who are closely related to adolescents i.e., parents and teachers. From those teachers we can know the situation of adolescents. And from parents we can know more about the socialisation of the adolescents.

Sampling procedure and sample

The researcher adopted the simple random sampling in probability sampling

Inclusion

- At the age of 15 to 18 age group were the targeted group in the research area, focuses on the adolescents.

exclusion criteria

- The teachers who are teaching the adolescents are included in the research, because they can provide the information about their students and their own opinions and perspectives. Then the parents of the adolescents are included in the research. The researcher excluded in depth interviews.

Tool for data collection

- In depth interviews.
- unstructured questionnaire with open ended questions.

Expected outcome of research

- After completion of this research, it will help to them understand what are the mental health problems that are faced by adolescents. How they can seek help from the professionals.

Challenges or limitations you face

The major challenges faced by the researcher is time. Due to the limitation of time and place researcher doesn't get an opportunity to meet them in real. Next is an outsider can't directly go the place whenever wish to. Difficulty in managing time.

Findings

4. Introduction

This chapter draw upon the themes and findings through the interview process, the themes generated as per the data analysis. All themes are inter connected.

4.1 Mental health issues

Yes, I have experienced mental health issues, I t was from my childhood. I feel nervous, do not feel good in daily activities feeling of anxious and worried stressed from time to time and feeling of sudden emotional outburst. Do not feel happy and do not feel good in anything.

Mental health issues A range of conditions with symptoms that may impact a person's thinking, perceptions, mood, or behaviour are collectively referred to as having a mental illness. And do not feel in daily activities, feeling unpleasant or unduly concerned about a topic or issue is known as worrying. Anxiety is a response to circumstances that are viewed as stressful or threatening. A quick, passionate expression of emotion brought on by powerful or deep feelings is referred to as an emotional outburst. Do not feel good in any activities.

(Participant 1)

Yes, It almost 3 years, I suffering from insomnia, I t become difficult to feel safe and worried, it become difficult to sleep and I almost cry in late night and it difficult to backs to sleep and try to sleep but it become very difficult to get sleep.

A common sleep issue known as insomnia can make it difficult to get asleep, keep asleep, or lead people to get up early and have trouble falling back asleep. When you wake up, you could still feel worn out. It lead to feel safe and always worried, Typically, stress or a stressful incident is the cause. Not getting enough sleep in night makes cry in late nights and getting difficulty in sleep.

(Participant 2)

Yes, I feel feared and worried, sometimes I can hear the voices, I don't know which voices exactly but I can hear and it make me nervous, irritated.

It has an impact on perception and may be accompanied by hallucinations and delusions. Knowing what is genuine and what isn't might be challenging when these things occur. A person suffering from paranoid delusions may believe that someone is observing them or attempting to harm them and make irritated.

(Participant 3)

Yes, I cant sleep at night and it cause me to stress and worried. It makes me depressed.

A common health problem that causes difficulty sleeping is insomnia. Insomnia used to have a variety of titles, but during the past ten years, medical professionals have streamlined their classification of this sleep disorder. It makes them depressed.

(Participant 4)

Yes, it makes me feel sad and worried, when I was in 9th standard, I felt am alone, it made me to think negatively.

Numerous unfavourable emotions might be categorised as distress. Each person's experience is distinctive and particular to them. Depression is a condition when the primary issue is feeling depressed and unpleasant or having no interest in or enjoyment from activities. We refer to a condition as anxiety if the main issue is experiencing panic attacks or constantly being alert and concerned. It's fairly typical to feel a little bit of both.

(Participant 5)

Yes, unwanted thoughts and fears comes, it make daily activity stress full.

A mental health condition marked by intense feelings of worry, anxiety, or fear that interfere with daily activities.

(Participant 6)

Yes, sometimes feels very nervous do not know why feeling irritated and worried without reason.

A phobia is an anxiety disorder characterised by a recurring, overwhelming dread of a thing or circumstance. Typically, phobias cause a sudden onset of fear.

(Participant 7)

Yes, hearing sounds makes me irritated and worried.

An underlying condition may occasionally be indicated by extreme irritability or feeling irritable for a lengthy period of time. Cause depression and anxiety.

(Participant 8)

4.2 experience on mental health issue

Yes, it affected me on daily activities and lack of loss interest in daily activities it makes me feel irritated.

Sadness and interest loss are experienced. Clinical depression, also known as major depressive disorder, impacts how you think, and behave and can cause a number of physical and emotional issues.

(Participant 1)

Yes, feeling of overwhelmed and problem in concentrating in daily activities and lead to nervousness.

It involves being totally overpowered by an overwhelming and untamed feeling that is too difficult to control and get through. Being overwhelmed can make it challenging to act rationally, think clearly, and even carry out daily tasks. Medical, cognitive, or psychological issues, as well as sleep disorders, medications, alcohol, or drug use, may contribute to difficulties concentrating. Anxiety, depression, and other psychological disorders can make it

difficult to concentrate. Nervousness can result from anything that makes you feel uneasy or afraid. Both positive and negative experiences can trigger them.

(Participant 2)

Yes, I have the auditory hearing from my right ear, it make me fearful and do not want with people and it lead me to social withdrawal.

The sensory sense of hearing a noise without the need for an external trigger is known as auditory hallucinations. Particularly, this symptom is connected to schizophrenia. To be scared, apprehensive, or fearful is to be troubled by fear. Fearful frequently connotes a sombre or anxious disposition.

An individual who is socially disengaged avoids meetings and relationships with others. People may decide not to interact with others for a variety of reasons, such as worry, fear,

(Participant 3)

Yes, feeling extreme emotion and loss of interest and it lead to the daily activities more painful and anxious.

There are moments when your emotions are so intense that you struggle to employ your coping mechanisms. Emotional intensity makes it more difficult for us to control our sentiments and the circumstances that gave rise to them. It may be more difficult to complete the daily tasks you need to complete when you feel a loss of interest. You can experience lethargy, indifference, and lack of motivation as a result. It is more difficult to take chances in your professional or personal life or, in some cases, even to leave your house when you are anxious. Many anxiety sufferers feel imprisoned. They see things in life they want to do, but their worry prevents them from really doing them.

(Participant 4)

Yes, feeling sad and anxious every time, I always used to sleep too much and difficulty in waking up, eating more and less.

A sign of clinical (severe) depression may be anxiety. A common occurrence is depression that is brought on by a social anxiety, such as panic disorder, separation anxiety disorder, or

generalised anxiety disorder. both oversleeping and excessive daytime sleepiness are symptoms of this disease.

(Participant 5)

Yes, it made me too extreme sleep-in morning and become difficulty sleeping in the night. It makes irritated all the time. Not feeling refreshed.

It may find it challenging to get to sleep or to stay asleep if you have insomnia, a common sleep problem. When you wake up, you don't feel rested or rejuvenated and are sleepy during the day. making it challenging to work during the day.

(Participant 6)

Sometimes it makes me feel guilt and excessive worry about daily activities. Difficulty on the thoughts.

The majority of people occasionally have intrusive thoughts, but are ready can let them go before giving them undue thought or assigning any significance. When you suffer from OCD, you can no longer dismiss these thoughts; instead, you obsess over them and give them significance. You experience guilt, shame, and concern as though you had actually acted on the thoughts so because ideas are treated as if they were genuine events.

(Participant 7)

Yes, it effected my actions in daily activities and frequent crying and worrying becoming anxious in all the time.

Poor food and sleep quality lead to additional depression-related concerns such difficulty concentrating, thinking, planning, and making decisions, as well as feelings of exhaustion and hopelessness. It is really tough to engage in daily activities because of these challenges. In reality, crying uncontrollably can be related to a variety of fears, regrets, and concerns about the future. These lead to the bodily signs of anxiety, like a faster heartbeat and more perspiration. One such physical indication is a racing heart.

(Participant 8)

I couldn't enjoy the things which have around me, I do not feel good with families, friends and social activities.

It influences a person's thoughts, behaviours, emotional expression, perception of reality, and interpersonal interactions. Despite not being as prevalent as other severe mental illnesses, schizophrenia can be the most persistent and incapacitating. The world may appear to be a tangle of perplexing ideas, pictures, and noises. They may act in a very peculiar and even startling manner. rapid mental and behavioural changes that occur when those with it lose contact with reality.

4.3 myth regarding on mental health

Most of the people thinks that depression is sadness. And taking anti-depressant medicine can lead other illness.

Many individuals are under the impression that depression is just plain melancholy or perhaps a lack of character. Depression, however, is a complicated mental health disorder. Its causes are social, psychological, and biological, and there are many different approaches to cure it.

(Participant 1)

Mostly people misunderstand that you wake up lately that because you sleep more in day times, that's why you didn't get the sleep in the nights.

Many people who don't get enough sleep try to catch up by taking naps, but this frequently merely throws their sleeping pattern out of sync by making it more difficult to drift off to sleep at a regular bedtime.

(Participant 2)

People thinks that it's a common one, not take it seriously. It is a common mental disorder. It can be treated through tharapy.

Anxiety feelings are frequently associated with underlying personality characteristics or modes of thought. Because of this, treating certain components of a person's thoughts or behaviours is frequently necessary to make anxiety go away. Although this change in viewpoint

frequently doesn't occur by itself, it can be attained through therapy or anxiety coping mechanisms.

(Participant 3)

Mostly people think that its because of the things which doing frequently. It has no treatment, and feel shame and guilt for consulting doctor.

One of the poorly understood medical diseases is OCD. Many individuals have misconceptions about it that are simply untrue, sometimes as a result of clichéd portrayals in the media. It has the treatment. No need of guilt and shame for consulting a doctor.

(Participant 4)

I experience anxiety in daily basis, going to school, doing homework, participating in games, anxious in classroom, talking with teachers and with peers.

However, strong, excessive, and continuous worry and panic over commonplace circumstances are typically experienced by those with anxiety disorders. These uncomfortable, hard to regulate, out-of-proportion to the real threat, and protracted sensations of worry and panic disrupt daily activities. To stop these feelings, you could avoid certain locations or circumstances.

(Participant 5)

People thinks The person with depression and schizophrenia is no smart, I not feelgood in activities which have been daily basis, I have difficulty while specking and doing my studies. Hearing voices everyday makes irritated and worried.

Schizophrenia is a severe mental illness that impairs your capacity for rational thought and action. In schizophrenia, your brain frequently convinces you that you are hearing voices or seeing things that aren't actually there. It is difficult to distinguish between what is real and what isn't because of this. It also has an impact on your capacity for thought,

judgement, and emotional control.

(Participant 6)

4.4 thought regarding on mental health

I hear some voices and saw every time someone following me. I have been experienced being alone and it me make fearful, I scare that the person will attack me and make harmful to me.

Delusions and hallucinations which also include listening in your head or acting on incorrect beliefs, are some of the most prevalent symptoms of schizophrenia.

(Participant 1)

Yes, I have experienced suicidal thoughts and 2 time attempted suicide, it was in 9th standard and 10th standard. My family saw and hospitalised. Recovered from it later.

Suicide is the deliberate act of bringing about one's own death. [9] Risk factors for substance addiction include alcoholism, the use of or withdrawal from benzodiazepines, bipolar illness, schizophrenia, personality disorders, and anxiety disorders. Physical conditions such as chronic fatigue syndrome are also at risk. Some suicides are spontaneous acts brought on by stress, such as pressures from work or school, relationship issues, such as broken relationships or divorces, or bullying and harassment. Those who have attempted suicide in the past are more likely to do so again.

(Participant 1)

4.5 family issues on mental health

Yes, when my depression known in the family, firstly they do not accept it. They told its just negatives thoughts you bringing in your life.

Mostly the person who admit they have depression the family have very difficult to accept, mostly if they are not educated. They thinks and believes that depression is a just thought and feeling it has no truth in reality, but not it's a serious mental disorder it has to be treated with professionally.

(Participant 1)

I have panic attacks frequently, and whenever its gets I admitted to the hospital. I try to tell my parents about my worries and stress but they are not ready to hear me.

A panic attack is an uncontrollable, abrupt feeling of fear or worry that results in physical symptoms including perspiration, a racing heart, and rapid breathing. Some persons experience panic disorder, which is a form of anxiety disorder, as a result of their extreme fear of these attacks. Panic attacks can be stopped with counselling and anti-anxiety drugs. Most of the cases the person with anxiety try to tell to the parents but they do not admit and hear the individuals story.

(Participant 2)

Mostly I couldn't sleep at the nights and wakeup very lately, sometimes wakeups very early. When I told to my parents they says that you are not sleeping in the nights because you always use the phone. That's why you didn't get the sleep. It makes me irritated.

Due to the fact that it frequently happens after a traumatic period, like the loss of a loved one or a new job, acute sleeplessness is also known as adjustment insomnia. In addition to stress, it may be the reasons the individual do not get proper sleep during nights.

(Participant 3)

I always tell to my parents am worried about something but exactly don't know, they tell that its just your thoughts and worries which have no address to it.

A stressful life experience can result in a combination of symptoms known as adjustment disorder, including stress, sadness or hopelessness, as well as physical symptoms.

The symptoms appear as a result of your difficulty dealing. Again, for type of situation that took place, your response is more intense than anticipated.

(Participant 4)

Sometimes it become very difficult to cope with the stressful of life, in a phobia, being anxious and feared. Family doesn't understand the exact factor which have been affected.

A phobia is a form of anxiety condition that makes a person feel intense, unreasonable fear of a circumstance, a living being, a location, or an object. When someone has a fear, they frequently plan their lives to steer clear of what they perceive as dangerous. The threat that is envisioned is bigger than any threat that the terror-causing factor actually poses. Phobias are mental diseases that can be diagnosed. When the cause of the phobia is exposed, the person will feel extreme distress.

(Participant 5)

I admitted to my family I can hear the voices which have been irritating me every day and I told them about someone is their to harm me, their reaction was it's the just a thoughts in your mind which have no truth.

Hearing voices can result from several important circumstances. Stress, anxiety, sadness, and traumatic events are the main causes of this illness. It is a serious mental illness that may be accompanied by delusions and paranoia. A paranoid person can think that someone is after them and wants to hurt them. Their safety and general well-being may suffer significantly as a result.

(Participant 6)

4.6 mental illness

Yes, I believe people with mental illness have an unpredictable behaviour.

A clinically significant impairment in a person's intellect, emotional control, or behaviour is what is known as a mental disorder. It is typically linked to distress or functional impairment in key areas. They may have the lost touch with the reality, they might live in their on world.

(Participant 1)

4.7 thoughts

When I told my family about my depression, they told me that its just random thoughts of yours.

Unwanted thoughts might strike at any time, without prior notice. They can be unsettling or even frightening because they are frequently recurrent and involve the same type of thoughts.

(Participant 1)

When I said I have no sleep in the nights, the next my father went to religious devotee and he come with the kamandalu and told to tie in hands.

If you have trouble falling asleep at night, you have sleeping difficulty. You might have a difficult time falling asleep, or you might wake up multiple times during the night. Your physical and emotional health could be impacted by sleeping problems. You can experience regular headaches or have problems concentrating if you don't get enough sleep. The role of Religious devotee one of the main factor when it comes to the mental health issues, false believe in religious karmas also an important factor.

(Participant 2)

When I get the panic attack in several times, they planned to go to the devotee. One day the devotee came to home. And done some mantras in me and left, he said there have been problem in me. Done some prayer and all, like black magic or something.

An anxiety illness known as panic disorder causes frequent, unexpected panic or dread attacks. There are times when everyone feels anxious or panicky. It's a typical reaction to tense or risky circumstances. A devotee is someone who is extremely enthusiastic and engaged in someone or something. A devotee is someone who has a great faith in a certain religion. The trust in the devotee is extreme way of believing. Black magic Also referred to as "dark magic," this term typically denotes the employment of magic or supernatural abilities for selfish or evil ends or magic linked to the devil or even other bad spirits.

(Participant 3)

4.8 loss of interest

Yes, I lost interest in daily activities and routines which I have been done before.

When you begin to lost in daily activities, which effects the individuals daily base functioning. It can be everything which have been doing for a while, loss of interest in hobbies, passion, impact on your relationship with family, friends, peers, work and school productivity.

(Participant 1)

Conclusion

Based on the above literature which have been the evidences we could understand the mental health and problems in adolescents, these articles help the researcher to understand the variables in mental health of adolescents such as problems, stigma and cultural factors. The research started with identification of gap in the review of literature. It focuses on the both positive and negative side of the mental stigma on adolescents. There are many studies on mental health stigma but not in Lakshadweep Island so the researcher identified its relevant to study the mental health stigma on adolescents with special reference to Lakshadweep, this study focusses the fact contributing and the perception towards the mental health stigma on adolescents with special reference to Lakshadweep.

Implication for professional work practice

The first point of contact for people with mental health or drug use issues is frequently a social worker. What attitudes and views social workers could hold about these conditions and how to handle people with them are unknown, though. According to the few studies on the topic, social services, human services students, and other psychiatrists frequently have prejudices against working with clients who have alcohol use disorders and have stereotypical views that stigmatise people with mental disorders (Peyton, Chaddick,(1992). Social stigma and stigmatising views are particularly concerning. Collective experiences and associated cognitions help shape individual attitudes and beliefs. Undoubtedly, social workers come to the field with a variety of backgrounds and viewpoints. However, there is limited study on the connection between social workers' practise activities and attitudes and beliefs, particularly stigmatising attitudes toward persons with behavioural problems. In the current exploratory investigation, stigmatising views are measured amongst social work students in relation to their readiness to treat patients who suffer from one of four categories: alcoholism, significant depression, nicotine dependency, or Alzheimer's disease. The study also aims to identify any underlying inferences the student may have, which support the beliefs and attitudes connected to each condition. Our larger project's long-term objective is to better understand how stigma-related attitudes influence social work students' willingness to treat in order to create and implement initiatives during their academic opportunity that lessen stigmatised beliefs and ultimately lead to improvements in practise and self-care behaviours. Social workers can either effectively engage or disenfranchise persons seeking or in need of assistance as they provide more services for mental health than psychologists, midwives, and psychiatrists combined in various parts of the world (Weismiller, et al., 2005). Whether held consciously or unconsciously, social workers' attitudes and beliefs regarding clients and/or treating particular conditions are unknown, as is whether these attitudes and beliefs have an impact on successful client engagement. Social workers may not be aware of internalised stigma despite their efforts to cultivate attitudes and beliefs that are supportive of those of helping professionals. The relatives, acquaintances, and coworkers of social workers and students, as well as themselves, frequently have histories of alcoholism, depression, or nicotine dependency (Siebert, 2004). Due to their own history, many social workers may experience embarrassment or discomfort, which may inhibit their willingness to assist others and engage in practice-related behaviours. This is one of the aspects of stigma that might postpone treatments for substance misuse, depression, and other related neuropsychiatric disorders in their early stages It is a serious issue

that affects how our society distributes assets (social, economic, health, shelter, etc.). Stigma has an impact on our society on many different levels, from the micro level (self-stigma) to the meso level (family, community, institutions, and service providers) to the macro scale (structural, cultural). Stigma is caused by a number of structural variables that operate at a very subtle level (similar to institutionalised racism that is influenced by unequal power as evidenced in policies, practises, legislation, etc.). A wide range of direct services are offered by social workers to the general population, from helping students with behavioural issues to creating treatment programmes for those who struggle with substance misuse. Numerous individuals from various socioeconomic and cultural backgrounds have benefited from this hands-on support in taking control of their own health and well-being, which has improved their quality of life. Since its inception, professional social work profession has been at the forefront of numerous societal issues, such as Social Security, unemployment insurance, and disability benefits. Many social work professionals, particularly psychiatric social workers, examine, diagnose, and treat mental diseases, behavioural disorders, and emotional problems in addition to lobbying for equitable and fair health care systems. Social workers who specialise in mental health provide assistance to people, families, and groups as they try to overcome obstacles that jeopardise their well-being and the wellbeing of their neighbours. Social workers can assist recovering addicts to find new employment, locate affordable housing, and access appropriate mental health care, for instance, by treating a patient's substance misuse issues.

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