
UNIT 9 CONTEMPORARY ISSUES AFFECTING ADOLESCENTS

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9.1 INTRODUCTION

With a large population of adolescents, India can enjoy a demographic dividend and reap its socio-economic benefits, provided there are investments in health and education of the youth and their rights are protected (The Economic Times, Nov. 18, 2014). Investments in health and education are all the more necessary because growing incidences of depression, suicides, substance use, bullying and other such alarming trends among adolescents are often reported. For these problems the adage ‘prevention is better than cure’ is pertinent for schools as they are in a better position to prevent rather than cure full blown problematic cases. Hence, this unit introduces you to some of the common problems faced by adolescents through a brief description of each problem. The description is followed by suggestions for the school and the teacher in particular for preventing and/ addressing the problem. The suggestions are however, general and you may enrich and contextualize them on the basis of your experiences.

9.2 OBJECTIVES

After going through this Unit, you should be able to:

- list some of the contemporary problems affecting adolescents;
- discuss the causes of the problems;
- explain the consequence of the problems; and
- describe the preventive steps that may be taken to lessen the occurrence of these problems.

9.3 CONTEMPORARY ISSUES AFFECTING ADOLESCENTS AND SCHOOL INTERVENTIONS

During adolescence the development of autonomy accelerates due to rapid physical and cognitive changes, expanding social relationships, and additional rights and responsibilities (Zimmer-Gembeck, & Collins, 2006). Autonomy has been defined in many ways in the context of adolescence. One such definition underscores the freedom to make choices, pursue goals, regulate behaviour (Collins, Gleason & Sesma, 1997, as cited in Zimmer-Gembeck & Collins, 2006) and this may lead to an urge to experiment and take risks, which may not always lead to socially desirable outcomes but in the long run may lead to problematic behaviour. Apart from autonomy, other factors, in fact, a complex of factors, which are difficult to extricate but nevertheless strengthen one another, may cause these problems. For instance, societal conditions like poverty, broken home, low parental supervision, academic stress, influence of peers, parents, community, neighbourhood, media and the like may trigger the onset and the continuation of these problems.

Most of these problems are widespread and while some are old, a few are the outcomes of the present socio- cultural scenario. However, all of them may be viewed along several dimensions, each of which poses a question. For instance, can these problems be prevented? Can they be overcome? What is the role of social agencies like family, community and school in preventing these problems? Can high achievers and the privileged also fall prey to these problems? Are there fixed solutions that can be prescribed for these problems? As you study the sub-sections comprising this section and relate the content to your field experiences and reflect on them, you are likely to pose more such questions as well as get answers that allow you to take a critical view of the content we have included.

9.3.1 Bullying

Read the following cases and try to answer the questions that follow:

- A young girl in Kolkata suffered severe trauma after a group of her seniors locked her inside a toilet after school hours. She had to be hospitalized. She did not survive (BBC NEWS, 13 September, 2013).
- A widely circulated mobile clipping of group of students pushing around a student repeatedly and hurling abuses at him at a Delhi school (The Times of India, March 13, 2014).
- Do these instances involve acts of bullying? What is bullying? What are the characteristics of a bully and that of the bullied? Is bullying restricted to a single incidence or is it episodic?

Do these instances involve acts of bullying? What is bullying? What are the characteristics of a bully and that of the bullied? Is bullying restricted to a single incidence or is it episodic?

Bullying is an aggressive behaviour normally characterized by repetition and imbalance of power and is socially unacceptable within the ethos of a democratic society but it is emerging as an international issue (Sampson, 2002; Smith & Brain, 2000) as it affects the victim's sense of security. Bullying is also not an act of one time aggression but is repetitive and purports to hurt the victim not once but repetitively. Sampson says that it is so widespread and common in schools that it is considered as a prime concern for children's safety in schools.

The aggression meted out may be verbal, with abuses, teasing and humiliation to hurt the victim emotionally or it may include physical assaults. There may also be other subtle, covert forms of bullying, difficult to discern. For instance, the exclusion of a child from a group and keeping him/her isolated, destroying or taking away the victim's possessions like pen, lunch box, books, notebooks, smearing ink on clothes, also amount to bullying. Some children are at greater risk of getting bullied. This is because of factors like personality, family background, disability, peer group reputation, race, religion, ethnicity and so on that may make the victim different from the rest in a group and getting singled out for bullying.

Bullying therefore involves individuals at two ends, one who bullies and the other who is bullied. The latter is naturally weaker and helpless in warding off the more powerful former. Bullying may be carried out by individuals or as we see in the cases above by gangs. We find in the second case that bullies are not necessarily older than the victim.

Bullying results in the victim getting physically and emotionally hurt. However, the bully also harms himself/herself. Studies indicate that while the one being bullied may develop low self-esteem, anxiety, depression, mistrust of others, suicidal tendencies, an aversion for school and may remain affected till a long time, one who bullies may also turn out to be an adult who indulges in violence and abuse (Smith, Debra & Rigby, 2004).

Cyber bullying, an online bullying through emails or social media, is also a widespread problem today. Technology expands the space within which there can be bullying and with an increasing access to advanced technology; incidents of cyber bullying are on the rise. This type of bullying may include the circulation of hate mails, offensive posts, personal informations, threats, unsolicited advances through social networking services, blogs, text messages, offensive postings and so on.

Role of a Teacher

In higher education, students, nowadays, need to give an undertaking that they will not carry out ragging, which is a form of bullying. The individual student thus becomes responsible for his/her conduct. However, in schools, teachers and the school administrators are responsible. As a teacher, you may consider the following:

- Not dismissing the complaint of the bullied as bullying may or may not stop with time and even if it does it may leave behind scars that are difficult to heal.
- Never discouraging a child from reporting bullying as many children shy away from reporting such incidents.
- Having a policy against bullying and make children as well as parents aware of it.
- Counselling the victim and ensuring support and protection, developing confidence in the victims without encouraging them to retaliate through violence.
- Dealing firmly with the bullies but without meting out corporal punishment.
- Encouraging team work and trying to keep the victim in the company of children who are not bullies.
- Breaking the gangs that bully and segregating the members in different teams.
- Discussing the matter with parents of bullies as well as the victims.

It is not unusual to find a teacher causing an emotional hurt to a student. Students

often emulate teachers and one abused by a teacher may also be abused by his/her peers. Hence, there is the need to create an environment in which every child is respected.

9.3.2 Substance Use and Abuse

Substance abuse is a worldwide public health concern which begins in the early youth for fun and subsequently influences the whole life of the individuals (Qadri et al., 2013). The epidemic of substance abuse among the young children in India in schools and colleges resulting in changing cultural values, increasing economic stress cannot be ignored (Reddy & Biswas, 2013). Use of these substances, possession and consumption of substances like alcohol and tobacco are illegal and a punishable offence. Even possession of narcotics (drugs) is absolutely illegal. Which are these substances? These substances are products like alcohol, tobacco, caffeine, marijuana, pills that are not prescribed to the taker, opiates, cocaine, amphetamines, hallucinogens, depressants, inhalants, club drugs, and performance enhancing drugs (Goldstein, 2011, cited in Matheson & McGrath, 2015). Cigarette smoking is also on the increase among teenagers (Windle & Windle, 2006) and so is the consumption of chewable tobacco. Most of these substances are relatively difficult to procure but some like cough syrup, shoe polish, glue, spirits used in ink remover and even tobacco products are not.

Why are these substances dangerous? These substances can affect not only learning but also the mental and physical wellbeing of the user, habit formation and association with those sharing the habit. Besides, intoxicants are a common cause of violence, accidents, injuries and death and can also enhance the risk of unprotected sex and its consequences. Intravenous drug use may lead to HIV infection. There is also a risk of death and serious ailment through intentional or accidental overdose of drugs. Children may also resort to theft and crimes to afford these substances.

While some children give up the use of these substances after a point of time or continue using them moderately, some may develop serious cravings for these substances and indulge in frequent and heavy usage reaching the level of abuse. This is a matter of concern. There are many studies which reveal that there is high correlation between abuse during adolescence and becoming drug addict in adulthood (Chakravarthy, Shah & Lotfipou, 2013). However, even those who use intoxicants moderately may be involved in accidents and violence.

Why do adolescents begin such practice? Research findings indicate that use and sometime heavy use of addictive substances like drugs and alcohol are begun for relaxing, getting social acceptance in the peer group, avoiding rejection and reducing negative feelings (Kuntsche, Knibbe, Gmel, & Engels, 2005, as cited in Matheson & McGrath, 2014). Easy availability of substances has been the most common reason for continued use, along with other reasons like relief from stress, and acceptability among peers (Tsering, Pal, & Dasgupta, 2010). Substance use by parents, peers, community members, role models, influence of media, low level of parental monitoring are also risk factors that may lead to initiation of substance use.

A considerable number of college students have their first drink of alcohol in school itself. Alcohol consumption among teenagers in urban schools is increasing at alarming rate; about 45% of class XII students drinking excessively. The reasons for this trend are many: elevating mood when upset, bored, for relaxing, getting acceptance among peers, getting plenty of money from parents but less supervision, easy access to alcohol, and the like.

Source: The Times of India, Oct 18, 2010

Case 1: *A child who had passed with high grade points in class X examination 2011 did not want to join the science stream. Nevertheless, in keeping with his parents' wishes, he opted for science in the XI standard and joined a tutorial that claimed to help children crack joint entrance examination for engineering. After a year he explained his falling grades in school to his parents saying that he was devoting his time to tutorials as admission to a good engineering college was more important than school grades. He told his parents that the tutorials were holding extra classes and often came home late in the evening. After some time, his parents found that he had been missing school as well as the tutorial. They also found that he had been spending time with his friends drinking regularly and at times heavily. It did not require much probing to make out that he had been doing it with his pocket money. His explanation was that he found his subjects difficult and he disliked being at school as well as the tutorial.*

A school unlike a tutorial has certain responsibilities. Hence,

Should the schools have discussed with parents-

- the need to not just allow but encourage children to make subject and career choices?
- the irregular attendance and falling grades?

Should the schools have discussed with the child-

- the reasons for his irregular attendance and falling grades?
- the reasons for his academic problems?

Role of the Teacher

It is very important to have comprehensive prevention and control programs for substance abuse in schools and the community, targeted toward adolescents and their parents and other family members. Hence, teaching the ill effects of substance use may not be adequate. However, you may keep a watch on students who have irregular attendance, are lethargic, tired, have red eyes, appear to be disheveled and drowsy, exhibit depression, sudden mood changes, irritability, and a general lack of interest in the school activities, new friends and the like.

You may also consider these steps:

- Communicate that even occasional use of alcohol and drugs at farewell parties, New Year, Valentine's Day, birthdays, wedding ceremonies and other occasions may lead to harmful impacts and these occasions may be more enjoyable when one remains alert and active;
- Convey that regular use of some substances like drugs and alcohol will lead to risk behaviours.
- Communicate that substance use is not glamorous and convey through pictures, videos and oral descriptions of real incidents that outcome may be quite unglamorous;
- Communicate to parents that parental supervision needs to be strong and regular, children must maintain account of pocket money spent and parents also need to be open for discussions on these issues with children;
- Seek the interventions of the school counsellors and /ask parents to seek professional help for dealing with the problems of substance use and abuse;

- Ask parents to be vigilant about empty vials, plastic pouches, syringes, paint cans, cigarette stubs, and other things that are normally not used at home and unexplained loss of money and valuables;
- Build partnership with the community by taking prevention programmes like campaigns and poster exhibitions to the community; and
- Show video programmes and powerful visuals depicting the consequences of substance use and abuse and hold relevant discussions.

9.3.3 Teenage Pregnancy

Adolescence is a phase of rapid physical growth and development leading to sexual maturation and desire for intimate relationships (Naswa & Marfatia, 2010). Emerging sexuality during this stage may lead to engagement in sexual activities including intercours (Crockett, Raffaelli & Moilanen, 2006) leading to pregnancy. Teenage pregnancy is however discouraged in societies like India that lay down the minimum age of marriage. Still, in spite of access to schooling facilities and biological science being a part of the core curriculum till secondary level, teenage pregnancy is on the rise. In metros most teens are fully aware of their options and are well informed to come in time for an abortion (The Times of India, July 24, 2013). This makes questionable the assumption of factors like lack of information about contraception, lack of sex education and poverty as the prime reasons for the rising teenage pregnancies. If those educated and well informed consider abortion as a quick fix for the 'problem of pregnancy', the issue surely calls for serious deliberation.

Information and prudence help in practicing abstinence but the latter may wane with the use of intoxicating substances. Easy availability of abortive pills, pregnancy termination facilities, changing socio-cultural ethos due to the influence of media and peer pressure may also lead to the shedding of the age old inhibitions and overcoming the social stigma attached to premarital sex and pregnancy. Crockett, Raffaelli & Moilanen say that cultural proscriptions against sex before marriage are counterbalanced by permissive attitudes reflected in the media. (Miller, Bayley, Christensen, Leavitt, & Coyl, 2006).

School going girls usually terminate their pregnancy if they have the means. Hence, birth of underweight babies, complicated deliveries and the like may not be serious issues for them. Nevertheless, it is a matter of concern as it may affect learning and unprotected sex may lead to sexually transmitted diseases, HIV infection, anaemia and physical and mental stress besides the ethical issues involved in treating abortion as an easy solution for getting rid of the unborn but living fetus. Therefore, schools need to hold discussions on this issue with children. Schools also need to hold discussions with parents to communicate that close parent-child bonding and parents' disapproval of adolescence sex and unprotected sex and supervision without over controlling are effective as these measures have been found to lessen adolescent pregnancy risks (Miller, et al., 2006).

9.3.3.1 Sexually Transmitted Infections (STIs)

Unprotected sex and sex with multiple partners can lead to the spread of a number of sexually transmitted diseases like Herpes, Human Papilloma Virus (HPV), Chlamydia, Gonorrhoea, Human Immuno deficiency Virus (HIV) infection, which may lead to Acquired Immuno Deficiency Syndrome (AIDS) and Hepatitis B. Nawasa & Marfatia (2010) point to the fact that the disclosure and declaration of HIV status to self and family is challenging and a guilt ridden process. Besides its treatment still being difficult and the social stigma attached to it being high, the affected individual finds it challenging to lead a normal life.

The risk of acquiring such STI during adolescence is high (DiClemente & Crosby, 2006). The National AIDS Control Organisation of India also says that physiologically, young people are more vulnerable to STIs than adults. It also says that lack of access to correct information and common misconceptions about modes of HIV transmission, tendency to experiment and an environment which makes discussing issues around sexuality a taboo adds to their vulnerability. Sex with multiple partners, unprotected sex, substance abuse and STIs are found to be positively correlated (DiClemente & Crosby, 2006).

India is among 12 high burden countries like South Africa, Nigeria and Tanzania that are home to the 2.1 million adolescents living with HIV. A UNICEF report says that AIDS-related deaths amongst adolescents between the ages of 10 and 19 increased by 50% between 2005 and 2012, and that many adolescents were unaware that they were infected.

Experts have advised a combination of high-impact interventions like contraception, antiretroviral treatment, and so on in addition to investments in other sectors one of which is education.

Source: The Times of India (Dec 1, 2013)

Role of school

Schools have a crucial role to play and you may hold discussions on the following:

- dangers associated with unprotected sex ;
- modes of HIV transmission;
- abortion and contraception;
- significance of abstinence till adulthood;
- avoiding multiple partners;
- progressiveness and modernity not being synonymous with recklessness and immoral behaviour;
- adolescence as the phase in life, which should be devoted to education and building healthy habits for leading quality life.

Check Your Progress 1

Notes: (a) Write your answers in the space given below.

(b) Compare your answers with the one given at the end of the unit.

i) How is bullying different from a fight that may break out between children?

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ii) Will the intake of chewable tobacco amount to substance use? What is the role of a teacher in this regard?

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iii) Do you think that sex education should be an integral part of school curriculum?
Justify.

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9.3.4 Depression and Suicide

Deliberate self-harm is common in adolescents and there are many reports that indicate that suicide is one of the major killers of adolescents and for every adolescent committing suicide there are hundreds more who attempt suicide (Hawton, Rodham, Evans, Weatherall, 2002). Suicide is among the top three causes of death among youth worldwide but it is an important, largely preventable public health problem (Radhakrishnan, & Andrade, 2012). Why do children attempt suicide? Suicides as per Seroczynski, Jacquez & Cole (2006) may be attempted because of three sets of risk factors: (1) psychological, which is due to psychiatric problems like depression, substance abuse; (2) behavioural like attempted suicide, which is a strong indicator of future attempts; and (3) family risk factors like loss or separation from family members, stress faced by family members, unstable home environment due to conflicts, lack of cohesiveness.

Depression and suicide are often juxtaposed because depressed adolescents are more likely to attempt or commit suicide (Seroczynski, Jacquez & Cole, 2006) and the prevalence of depression in adolescent students is high and suicidal ideation is significantly high among depressed students (Nagendra, Sanjay, Gouli, Kalappanavar & Vinodkumar, 2012). How will you know that a person is depressed? As per Seroczynski, Jacquez & Cole, depression is a syndrome and includes symptoms like sadness, irritability, appetite loss, weight loss, fatigue, feeling of worthlessness, guilt, suicidal thoughts or behaviours, and many other such symptoms. As teachers you may also watch out for signs like social withdrawal, crying, irrational worries or fears, not having confidence, irritability, aggression and academic problems.

Depression is linked to many factors like problems in family, academic problems, dissatisfaction with own body image, bullying including cyber bullying, substance use and abuse, financial problems and the like. Irrespective of the cause it needs to be taken seriously as it is a debilitating disease that affects academic and general well being and may not be cured on its own and may make the person attempt suicide.

It's estimated that 15-20 lakh suicide attempts occur in India every year. For every suicide committed, there are a minimum of 15-20 persons attempting suicide. Not all suicides are reported to police due to the stigma attached to it. A NIMHANS study has found that 11% of college students and 7%-8% of high school students have attempted suicide. In the survey, 1,500 school and college students were included and it was found that adolescents are under stress due to academic pressure, relationship with parents, peer groups and

romantic relationships. High rate of cyber-bullying is also a significant reason for depression among adolescents.

Source: The Times of India, Sep 10, 2014

India has some of the world's highest suicide rates and it is the highest in the 15-29 age group. The number of adolescents committing suicides includes many from well to do and educated families. There are many reasons for it, one being the outcome of the economic boom and open markets causing greater job anxiety, higher expectations, more pressure to achieve.

Source: NDTV, June, 22, 2012

These reports justify school based mental health initiatives. These initiatives may include approaches aimed at educating school pupils about mental health problems and screening for those at risk (Hawton, Rodham, Evans, Weatherall, 2002). Hence, depressed adolescents need to be identified and helped with the help of school counselors (Bansal, Goyal, & Srivastava, 2009).

Role of School

You may also consider these steps:

- A child may not be humiliated and his/her self-esteem may never be hurt;
- Parents may be told not to have unrealistic expectations from children;
- A child may not be compared to another, a brighter one.
- Symptoms of depression may be taken seriously.
- Practices that provide encouragement, involve children in tasks may be a part of the school activities

9.3.5 Delinquency

Cases of juveniles indulging in heinous crimes are rising sharply (The Times of India, Aug 20 2015). Juvenile delinquency refers to crimes committed by minors, and historically juvenile justice system focuses on rehabilitation and treatment than punishment (Flannery, Hussey, Biebelhausen, & Weste, 2006). In India, one is a minor up to the age of eighteen and crimes committed by those in this age group comprise juvenile delinquency. This comprises acts like theft, pick-pocketing, rape, physical assaults, vandalizing property and other such serious offences. Many interrelated factors instead of a particular reason can be ascribed to juvenile delinquency. These factors may be interlinked and may be home based, community based as well as school based but many studies indicate that poor school performance, truancy and dropping out of schools are connected to delinquency.

Young people who are at risk of becoming delinquent often live in difficult circumstances like parental alcoholism, conflict in family, poverty, broken family, abusive conditions, orphans, loss of parent(s), lacking the means of subsistence, housing and other basic necessities (World Youth Report, 2003). Many get involved in anti-social activities to fulfil their basic needs and need for recreation by earning money through these activities (Haveripet, 2013). However, the commonly held view that children from poverty stricken families with parents having lower levels of education are more prone to commit crimes is contested by cases of children from well-to-do families turning delinquents. There are, however, cases that establish a significant relation between substance use and delinquency and those using drugs

are more likely to commit violent acts (Flannery, Hussey, Biebelhausen & Weste, 2006).

Role of School

Read the following:

The United Nations (UN) Guidelines for the Prevention of Juvenile Delinquency known as the Riyadh Guidelines, adopted and proclaimed by General Assembly resolution in 1990, upholds the need for the prevention of juvenile delinquency as an essential step toward crime prevention in society. The guidelines issued in this regard require the society to engage young people in lawful, socially useful activities and develop a humanistic orientation towards society and life.

These guidelines consider education as one of the means for attaining this and requires all young persons to be able to access public education that in addition to academic and vocational education, develops respect for their culture as well as for different views and cultures and also teaches the social values of the country, human rights and fundamental freedom.

Schools should also nurture children's personality, and optimize the development of their abilities through their active involvement and effective participation in relevant activities that foster a sense of identity with and of belonging to the school and the community.

Schools need to impart guidance regarding vocational opportunities and career development and counselling for preventing and addressing problems of substance abuse, especially to those from the disadvantaged sections. Besides, the school climate should provide emotional support to children and avoid harsh disciplinary measures, particularly corporal punishment. Schools also need to partner with parents, community organizations and other agencies involved in the affairs of the youth.

The curriculum and teaching in schools need to be of high quality and co-curricular activities of interest to young persons need to be organized in the school. The school should also formulate policies and rules along with students' representatives and implement them in a just way.

9.3.6 Compulsive Internet Use

How much time do teenagers with access to smart phone and internet devote to these technologies? For what purpose do they usually use these technologies? Is the use supervised by an adult? You must be aware that children today spend considerable time gaming, watching videos, chatting, socializing through social networking sites, surfing websites. This is seldom supervised by an adult. This is also done at the cost of the time that can be utilized for educational activities, physical exercise and pursuing healthy hobbies. Even if they are using internet for educational purposes, prolonged use may impact health and cause problems like obesity and related problems, problem of eyes and so on. Prolonged use gets more serious when it involves immoral activities and addictive practices.

What is internet addiction? World Health Organisation (WHO) Report (WHO Expert Committee - 1964), Davey & Davey (2014) define addiction as dependence and continuous use of something for the sake of relief, comfort, or stimulation, which

often causes cravings when it is absent. They also say that apart from addiction to substance like drugs or alcohol, there may be behavioural addiction such as addiction to mobile phone. Smart phone, as per these authors, are making internet accessible and prolonged duration of usage can increase likelihood of hazards resulting from mobile phone use like depression, anxiety, insomnia, aggressiveness and may also damage the interpersonal skills of adolescents. It has been reported that excessive Internet use has a significant negative impact, leading to Internet addiction or pathological Internet use involving uncontrollable and damaging use of the Internet to the extent of addiction to specific things and activities on the Internet like adult websites containing porn. Some people start spending most of the time on dating and chatting, gambling and obsessive shopping. Although the latter may not be immoral, yet such purposeless use may affect health and waste time and cut down the time spent on physical activities, pursuing hobbies and socializing in the real world.

Teachers' role may comprise the following:

- Developing hobbies in children for relaxation;
- Encouraging students to engage in sports, games and other activities requiring physical activity; and
- Discussing the impact of prolonged use of Internet and visiting harmful sites.

9.4 ROLE OF SCHOOL IN ADDRESSING THE CONTEMPORARY ISSUES

The causes of the problems we have discussed are often complex with factors too closely intertwined to be segregated, identified and eliminated. Besides, the ways to address the problems, not being fixed, are hard to prescribe. Nevertheless, the role of a school is significant, especially in taking preventive measures as the remedy for a full blown problem usually lies at professional centers, outside the domain of the schools. Schools, therefore, have twin role of developing programmes that nurture positive and socially desirable traits in children and at the same time adopting measures for dealing with those deviating from accepted social norms through counselling services, partnership with parents and the community and by providing information about preventive measures as well as about professional help to the victims. The role of schools is therefore multidimensional but it lies more in prevention. The role is also general in nature as development of self-esteem, self-confidence and the ability for critical thinking and other life skills can help in making right choices and prevent these problems.

Higher degrees of behavioural and emotional school engagement lead to a significantly lower risk of substance use and involvement in delinquency (Li, et al., 2011). Hence, the school climate needs to be enriched with joyful and co-operative rather than competitive activities. Co-curricular activities that develop physical and mental health and relieve stress may be mandatory for all children. Activities like yoga, meditation, sports, manual work, vocational education, music and other fine arts, reading sessions, discussions, watching relevant films and videos are also necessary. Role play also helps in developing necessary attitude. Besides, the school environment needs to be inclusive with respect for one and all. Partnership with parents and community, organizing awareness campaigns within the school and in the community are also important.

Check Your Progress 2

- Notes: (a) Write your answers in the space given below.
(b) Compare your answers with the one given at the end of the unit.

i) What are the symptoms of depression?

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ii) Why is even a failed attempt of suicide a cause of concern?

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iii) Describe the initiatives you take for building the mental health of your students.

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9.5 LET US SUM UP

In this unit, we have discussed some of the issues affecting adolescents. One such issue pertains to bullying in schools. It is quite common but often goes unnoticed till it leads to serious consequences. Unlike a one time act of aggression, bullying is repetitive and involves an imbalance of power. The more powerful individual attempts to hurt the less powerful one by causing physical and mental hurt. While the person bullied is affected, the bully may also develop psychological problems. The school should deal with such problems by formulating proper rules and by taking cognizance of the problem and dealing with it.

Consumption of addictive substances is also a cause of concern. Even occasional incidents of substance use may lead to accidents, violence and other such untoward incidents and regular use may cause physical and mental problems. The teacher therefore has to be cautious about symptoms of substance use, frequent absence from school and regularly hold awareness campaigns in the school and in the community. Teenage pregnancy is also a cause of concern as it affects health and unprotected sex raises the chances of contacting sexually transmitted infections, especially HIV infection. Sex education and discussions on these issues are required at school. Depression and suicide are also widespread problems. Teachers should be cautious about symptoms like sadness, irritability, weight loss, fatigue and other such symptoms and provide necessary support. Juvenile delinquency is another issue that demands attention. A democratic environment in the classroom, quality teaching and learning, vocational education, development of hobbies, counselling

services are some of the measures that may be adopted at schools. Excessive Internet use has also a significant and negative impact that may lead to Internet addiction. The teachers' role regarding most of these problems is similar and lies more in prevention through the organization of discussions, awareness campaigns, and life skills education.

9.6 UNIT-END EXERCISES

1. Collect newspaper reports of bullying in schools and hold discussions with your peers on the preventive measures that your schools may take for bullying.
2. Download videos depicting the impact of substance abuse. Select an appropriate one and show it to your students. Organise a discussion on it after the students have watched it.
3. Ask your students to hold interview with their peers on the impact of substance use and record it using cell phone/other device and help them in converting it into a video programme.

9.7 ANSWERS TO CHECK YOUR PROGRESS

1.
 - i) Bullying like a fight involves an act of aggression but it is marked by repetition and imbalance of power and the bully is more powerful and the bullied less powerful.
 - ii) Yes, for children this amounts to substance use. The teacher should ensure that shops selling tobacco products do not operate in the vicinity of the school. S/he may frame rules banning tobacco use on school campus. S/he may organize campaigns against tobacco use with children putting up pictures, posters and slogans against tobacco use. S/he may invite experts to interact with children on the effects of tobacco use.
 - iii) Write your own answer.
2.
 - i) Symptoms like sadness, irritability, appetite loss, weight loss, fatigue, exhibition of feelings of worthlessness, and guilt.
 - ii) Suicide is one of the major killers of adolescents and indicates the problem pertaining to the mental health of the person attempting it. Besides, for one failed attempt, there may be more attempts that are better planned and executed leading to death or serious health issues.
 - iii) Write your own answer.

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