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RESEARCH ARTICLE

INVESTIGATION AND COMPARISON OF DYSFUNCTIONAL BEHAVIORS, FEELINGS AND THOUGHTS SITUATION EFFECTIVE ON MENTAL HEALTH OF STUDENTS (BOTH GIRLS AND BOYS) IN TEHRAN

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ABSTRACT

Introduction Importance of children's mental health issues at personality evolution and the impact of dysfunctional behavioral responses during this period make it clear that there is a need to interpretation. Hence, in this field, assessment and screening is a one of the fundamental solution in order to identifying the problems. The present study was designed and conducted to assess the behavioral responses.

Methods: This descriptive-analytic study was conducted with random and available sampling of 240 students (both girl and son) in the range of 9-16 years old (from Tehran preps and secondary schools-2015) using the scale of dysfunctional behavior, feeling and thoughts. The ANOVA, Kruskal-Wallis, Chi-square, Fisher and U Mann – Whitney tests, were used for analysis. Findings Results have shown that intensity of dysfunctional behavioral, emotional and intellectual responses were observed in 61.6% of the samples. The frequency and intensity were higher in girls than boys. This situation was true about 73.7% of girls and 50% boys.

Conclusion: As for involving the large number of students with dysfunctional behavioral disorders, screening seemed to be necessary for identifying these individuals and referrals them to consulting centers because of diagnosis disorder, and interventions – educational treatment.

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INTRODUCTION

Childhood and adolescence is one of the most important steps in establishing the personal character, so that lots of mental disorders and behavioral inconsistencies after adolescence happened because of insufficient attention paid to childhood and adolescence. However, less attention has been paid (Nahid and Javad, 2013). Behavioral disorders affect the children's behavior, his interactions with other children, academic performance and parents and teachers and ultimately influences the society, negatively (Eslamiyeh, 2008). Meaning of behavioral disorders is inappropriate behaviors which in addition to being improper the age of the person as a mild, moderate, severe trend, is also chronic or ongoing and negatively affects the process of growth and adaptability to the environment and also causes inconvenience to the lives of others (Salehi, 2012). Using the empirical studies, lots of the clinical and social psychologists have proved the thoughts and conscious subjective experiences on the personal perception form the environment and its effect on the behavior and emotions (Shams, 2010). Despite the complexity, role of dysfunctional beliefs and estimates as a risk factor for mental illness is clear and obvious (Shsms, 2006). These thoughts, feelings and dysfunctional behaviors (e.g., role of thoughts in depression, obsessive-compulsive disorder, anxiety, dysfunctional attitudes, negative perfectionism, insomnia, psychosis, social problems, thought problems, and other behavioral problems) -in the functional aspect- act in a way that can easily affect the personal and social activities and ultimately play an important role in development of many of the symptoms and mental disorders (psychopathology) (Shams, 2010). ELLIS believes that many of the worries and confusion in people's lives happens due to irrational,

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unrealistic and dysfunctional beliefs that people have about themselves and the world around them (Hasani, 2011). Case studies have shown that dysfunctional attitudes linked for predicting it (Amrolah *et al*., 2007). Although this phenomenon is a risk factor for depression, it can be modified through the intervention process (Oliver, 2007). Other studies show that mental disorders increase personal vulnerability to obsession (Bakhshi Pour *et al*., 2011). People with obsessive-compulsive disorder had more dysfunctional attitudes and opinions rather than control group (Bakhshi Pour, 2003). This can lead to moods (anxiety and depression) and vast range of behavioral dysfunctional disorders like obsession, so that the person resorts and neutralize these disorders thoughts away by moving toward such disorders (Salkovskis, 2000).

There is a significant positive correlation between the irrational beliefs and negative perfectionism. Ellis (ELISE) described the perfectionism as an irrational thinking that leads to psychological distress (Alizadeh Sahraee *et al*., 2010). These mental disorders in addition to have the negative impact on academic, vocational, social and adolescents performance of adolescents, increase the risk of mental disorders in adulthood for them (Jan Bozorgi *et al*., 2005). Results of other studies suggest that dysfunctional thinking is correlated with a vast range of psychiatric disorders such as continuing negative mood disorder in clinical and non-clinical samples and related problem (Rawal *et al*., 2010). People with efficient ideas can pursue the path of hi goals in life, despite the adverse events, but ineffective thoughts against negative events acts as a barrier for the person for reaching the his original goals (Hasani, 2011). Most of the studies related to mental and behavioral disorders of students deal with exploring one of these disorders and ignored the condition of other dysfunctional behaviors in the same population. Studies that can show all aspects of the overall situation of dysfunctional behaviors, are few. Regarding the prevalence of mental and behavioral disorders and their negative impact on various aspects of life of children and adolescents at first glance and society in general look, any attempt taken to identify, diagnose, prevent, control and treat behavioral and psychological disorders, in fact helps to promote mental health and is valuable. For this reason, many experts insist on screening of behavioral disorders in children and adolescents as one of the effective ways to identify and diagnose such disorders (Salehi, 2012). Overall assessment of ineffective behavior, feelings and thoughts acts as a screening test for many mental health problems, which would be treated then with counseling and psychological interventions necessary to definitively diagnose the disorder. This study therefore examined 9 to 16 years old male and female students.

MATERIALS AND METHODS

This study was conducted in cross-sectional form. The study population included all 9-16 years old male and female students in Tehran, among them regarding the limitations of this study, from the north to the south of Tehran and according to population density regions, three regions of the north, center and south of the city were randomly selected from each region. Randomly 2 boys and 2 girls' schools were selected. Then, using the accessible sample, 260 samples were selected so that after collecting the questionnaires, 20 samples were removed because of imperfect answering to the questionnaire. With an emphasis on ethically entry of students to the study was entirely free and we did not receive any information of their identity. In order to evaluate the study subject, the questionnaire of behavior, feelings and ineffective thoughts were used. Because of non-accessibility to its reliability and validity and for being suer about the accuracy of this questionnaire, authors tried to validate this scale using content validity by the help of 5 experts of behavioral science and psychology. After receiving their approval, in order to determination of reliability, the Cronbach's alpha coefficient was used and calculated as 0.76,6, respectively, and had a positive correlation with the Children's Depression Questionnaire (Cronbach's alpha=0.84) (13), dysfunctional beliefs scale (Cronbach's alpha coefficient=0.71 by Taghipur research, quoted by Alizadeh) (12) and Beck Depression Scale (Cronbach's alpha coefficient=0.78, by Tashakkori and Mehryar, quoted by Khoddam, 2009). This questionnaire contained 20 questions with two options scored by yes and no. 5 and zero scores were given to each question with Yes and No, respectively. The questionnaire maximum n and minimum scores were 100 and Zero, classified in four scoring categories: 0-10, 15-20, 25-30 and above 30, where lower rating indicates the mental health and efficient behavior and thoughts of the person. 20-15 score indicates that a person's thoughts and feelings influence that might lead him to maladaptive behavior. Between 30-25 point means that you have to do and why individual thoughts and behaviors that will appealed to them is yes. Scores above 30 indicate seriousness in changing these behaviors and thoughts and to change them should be. 15-20 score indicates that a person is affected by thoughts and feelings which might lead him to dysfunctional behavior. 25-30 scores means that the way where person answered 'Yes' should be revised. Scores above 30 indicate the seriousness in changing these behaviors and thoughts and it is essential to change them. In order to describe the data in the case of central tendency and dispersion indexes and frequency tables and to analyze the relationship between variables, ANOVA, Kruskal-Wallis test, chi-square and Fisher's exact test were used via SPSS software version 18. In order to detect groups owing a significant difference, The U-Mann-Whitney test was used. The significant level of this study was considered to be 0.05.

RESULTS

This study was comprised of 240 students including 120 female and 120 male. The median and interquartile age range of these students was 12 and 4, respectively. The frequency of the samples in families with single child, two children and three or more children was 50.4%, 35.4% and 14.2%, respectively. Overall, in the two groups of boys and girls 9.2% of people were in the 0-10 score rate group 12.1% were in 15-20 score rate group, 17.1% were in 25-30 score rate group and 61.6% were in the above 30 score rate group. In this study, the mean score of behavioral, emotional and intellectual reactions for girls was 48.92 and mean score for boys 31.46 (Table 1). Mean score of the behavioral, emotional and intellectual was 31.6%. The results showed that behavioral, emotional and intellectual reactions, for the students whose mothers were employed or homemakers, did not show a significant difference at 5% level of error. (P=0.24), (Table 1).

Table 1. Comparison of the behavioral, emotional and intellectual reactions between girls and boys

Variable		Frequency	Mean	Standard Deviation	statistics FLeven	P-ValueLeven	t-statistic	Degree of freedom	P-Value
Behavioral, emotional and intellectual reactions	Male	120	31.46	16.21	11.86	0.001	-7.02	219.26	*
	Female	120	48.92	21.91					
Mother's Occupation	Homemaker	164	41.28	21.82	2.27	0.13	1.18	238	**
	Employed	76	37.82	19.48					

P-value< 0/0001 * ; Non Significat**

Table 2. Comparison of the behavioral, emotional and intellectual reactions regarding the father's occupation and age of the student

Variable		Frequency [%]	Mean	Standard Deviation	P-Value
Father's occupation	employee	[39.2] 94	39.2	19.26	**
	worker	[11.3] 27	44.63	24.05	
	Self-employed	[49.6] 119	39.96	21.87	
Age	9-10	[27.9] 67	33.81	16.19	*
	11-12	[22.1] 53	28.49	15.89	
	13-14	[40.8] 98	48.88	21.75	
	>15	[9.2] 22	49.1	23.13	
Number of children in a family	Single child	[50.4] 121	39.46	19.54	**
	2 children	[35.4] 85	41.12	21.42	
	≥ 3 children	[14.2] 34	40.44	25.92	
	Single child	[50.4] 121	39.46	19.54	

P-value< 0/0001 * ; Non Significant**

Results showed that for the children whose mothers were housewives (constitute 68.4% of the samples) the mean score of behavioral, emotional and intellectual was 41.28 and for students with employed mother (31.6% of the samples) the Results of analysis of variance showed that the mean score of behavioral, emotional and intellectual reactions in all four groups of students their fathers were employee or self-employed or workers, did not have a significant difference at the error level of 5% (P=0.49), Table 2. Results of the Kruskal-Wallis test have shown that the behavioral, emotional and intellectual reactions of students regarding their age, possessed a significant difference at error level of 5% (P<0.0001), so that the score of behavioral, emotional and intellectual reactions for the age group of 15 years and more, was more than other age groups (Table 2). In order to discover the groups with significant difference, the U-Mann-Whitney test was used. The difference is also shown in Figure (1). Results showed that behavioral, emotional and intellectual reactions between male and female students had significant differences in the error level of 5 % (P<0.0001), as the behavioral, emotional and intellectual score for girls was more than that of boys (Table 1).

Results of Fisher's exact test have shown that at the 5% error level, there was a significant relationship among the father's occupation and behavioral, emotional and intellectual reactions of boys and girls, separately (P<0.0001), while no significant relation was discovered between mother's occupation and behavioral, emotional and intellectual reactions, separately for boys and girls. Also, results of the combined distribution of father's occupation and behavioral, emotional and intellectual reactions separately for boys and girls have revealed that people whose fathers were self-employed gained the highest score of behavioral, emotional and intellectual, reactions. So that 47.8% of all boys and 88% of all girls had the behavioral, emotional and intellectual scores more than 30m while their fathers were self-employed (Table 3).

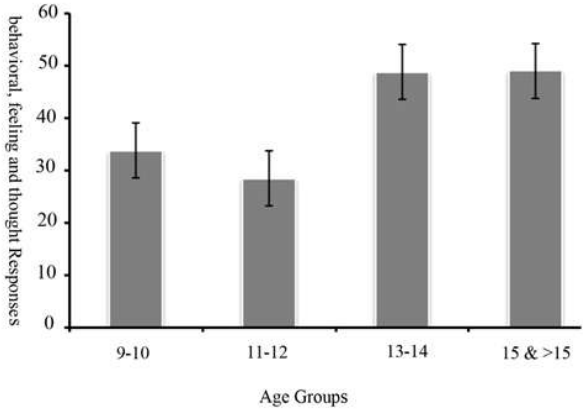

Figure 1. Comparison of the behavioral, emotional and intellectual reactions among the students

Results of the Kruskal-Wallis test showed that the Behavioral, emotional and intellectual reactions among the students regarding the number of children in the family, at the error level of 5% did not have a significant difference (P<0.0001), and the mean score in each three class of variable was 39.46-41.12 (Table 2). Chi-square test results showed that at the 5% of error level, there was a significant relationship between gender and behavioral, emotional and intellectual reactions (P<0.0001), so that by increasing the score of behavioral, emotional and intellectual reactions in both population of boys and girls, their frequencies would also increase (Table 3).

Table 3. Comparison of behavioral, emotional and intellectual reactions scores regarding the father's occupation, separated by gender

		Students frequency regarding the behavioral, emotional and intellectual reactions scores with frequency percentage				[%] Frequency
Gender	Father's Occupation	0-10 [%] Frequency	15-20 [%] Frequency	25-30 [%] Frequency	More than 30 [%] Frequency	
Boys	Employee	[4%] 2	[24%]12	[18%] 9	[54%] 27	[100%] 50
	Worker	[0%] 0	[0%]0	[100%] 1	[0%] 0	[100%] 1
	Self-employed	[21.7%]15	[10.1%] 7	[20.35] 14	[47.8%] 33	[100%] 69
girls	Employee	[4.5%] 2	[13.6%]6	[%20/5] 9	[61.4%] 27	[100%] 44
	Worker	[3.8%] 1	[7.7%]2	[%23/1] 6	[65.4%] 17	[100%] 26
	Self-employed	[4%] 2	[4%]2	[4%]2	[88%]44	[100%] 50
Boy		17 [14.2]	19 [15.8]	24 [20]	60 [50]	120 [100]
Girl		5 [4.2]	10 [8.3]	17 [14.2]	88 [73.3]	120 [100]

Results have shown than for the girls, 4.2% of them had the score of behavioral, emotional and intellectual of 0-10 and 73.3% showed the scores higher than 30, while 14.2% of boys had scores of 0-10 and 50% of them had scores more than 30 (Table 3).

DISCUSSION

In general, this study showed that 61.6% of students score was higher than 30 got the sense that 61.6% of students had at least one type of dysfunctional behavior and thoughts that seriously needs to be pursued. Statistics on the prevalence of behavioral problems in different societies was between 11.8-25.7% and the effect of factors such as age, gender, family structure and social relations on its development have been proposed (Khoddam *et al.,* 2009). Researches conducted in the United States have only reported on dysfunctional prevalence of this disorder called depression at 0.9-4.7. Some research conducted in Iran reported on its prevalence about 2.3-0.59 (Jan Bozorgi *et al*., 2005). Eslami's findings in 2007 (Tehran) predicted the prevalence of different dysfunctional behavioral problems as only for elementary school students about 33% (Alizadeh Sahraee, 2010). Salehi reported on the prevalence of behavioral disorders in Zanjan as about 28% (Jan Bozorgi *et al*., 2005). The reason that the prevalence range in this study is higher than the other studies, is that here we consider the emotional and intellectual disorders in addition to the dysfunctional behavioral disorders.

The mean score of behavioral, emotional and intellectual reaction for girls was more than boys, so that 73.3% of the girls had a score higher than 30, while 50% of boys had score higher than 30. This is consistent with findings of Faramarzi in 2011. He reported that the prevalence of internalized behavioral disorders in girls is more than boys (Faramarzi, 2011), because it can be attributed to the biological characteristics of girls and boys. Since boys spend more times in the community and have more free times, they can receive better support from various outside factors like their peers. More results have revealed that children with homemaker mothers got more scores of behavioral reactions in relation to the ones with employed mothers, although there was not the 5% of significance level.

This was compatible with Khoddam's findings (Khoddam *et al*., 2009), because they believe that the quality of relationship with child is more important than being together for a long time. In addition, adolescents when are spending their time in cultural or sport complexes, are not so much affected by mother's presence at home. Also, it could be said that the responsibility taken by children at home in absence of their mother assists the personal mental growth, which is a preventing factor from the behavioral disorders. Although Cheraghi considers mother's occupation as a risk factor for conducting behavioral disorders (Cheraghi, 2000). Results showed that the score of behavioral, emotional and intellectual reactions of students increases by increasing the age.

It means that by increasing the age in the range of 9-16 years, the intensity or frequency of dysfunctional behavior, feelings and thoughts would be increased. Also the people frequencies would also increase by increase of the behavioral reaction scores. Other studies have confirmed this. In 2009, Khoddam said that there is a significant relationship between behavioral disorders and academic degree and higher degrees own higher rate of severity and frequency of behavioral disorders. This can be attributed to increase of stress by the volume of courses and educational degrees with higher responsibilities and also their involvement with a variety of extra-curricular classes, sports and arts and etc. Some studies have shown an increase up to high school and afterwards because teenagers have a clear picture of themselves and get more independence, it would decline (Jan Bozorgi, 2005). In this study, there was not a significant difference between the size of family, single- child, two children, three children and a higher and the mean score of behavioral responses, there was no significant difference, which was consistent with the study of other researchers (Behnia *et al*., 2002). Because it could be said that the families of many children, creation of family support through other children can strengthen and develop the coping power besides more interpersonal interactions (Khazaei, 2005). In the small size families, increase of parent's attention and proper facilities replaces the preventing supports which is created in the larger families by the other children. Of course, some studies have mentioned the family size as one of the risk factors of behavioral disorders because of lack of attention must be paid to the children (Khazaei, 2005). The findings also have shown that there is a meaningful relationship between the father's occupation and score of behavioral reactions separated by boys and girls, so that the people with self-employed fathers got the most score of behavioral reactions. Which means that these students have more behavioral, emotional and intellectual problems, compatible with other researches (Taanila, 1992).

This can be attributed to significant role of father in children's training, not devoting sufficient time and attention to training and taking educational practices as well as lack of knowledge of social relations of teenagers. Among them regarding the girls physiological and psychological characteristics girls are more vulnerable rather than boys. Regarding the screening nature of this study, it can provide the theme for identification of behavioral and intellectual problems of students. To prove it, studies have revealed that point two series correlation between the scores of dysfunctional attitudes and psychiatric diagnosis was determined to be 0.44 (7).

Suggestions

Due to prevalence of behavioral disorders in our study (investigating three aspects of behavior, feelings and thoughts) is higher than many other studies, education of self-control and self-regulation to the students can be helpful, so that Wells and Davis (Wells & Davies), introduced the distraction, re-evaluation, social control and disciplinary concerns as the control strategies (Wells, 1994). For this reason, it is recommended that intervention studies to be done on educating and empowering students.

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