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Young Adults: Indian Scenario

‘Every young adult is in need of help, of warmth, of protection...
In many ways differing from and yet in many ways similar to the
needs of the child’.

Erich Fromm,
The Sane Society, 1955

A period of young adulthood is the period between childhood and maturity which is marked as the early period of existence, growth and development. Today, young adults are seeking an important place in the modern world. They are the growth point of a society. Rapid progress and achievement of society and country greatly depends on the knowledge, the mental health and the determination inculcated in the younger generation. In this sense, young adults are the backbone of every society. Undeniably, the young adults constitute a vast reservoir of energy, especially in a huge country such as India, which now has a population of about ninety six crores (Census, 2001). Out of this total, those in the 15-30 age group, constitute one third of the population. This group is healthier, more urbanized and better educated than earlier generation. A young adult is the stage between adolescence and mature adulthood, roughly of age group of 18 to 25 years. The group chosen for the present study falls within this group.

India has predominantly a young population. The younger group makes up approximately 20% of the total population. It was estimated that the percentage of younger group in the total population is likely to increase to about 40% by the year 2016. This group is considerably larger than the childhood and middle age groups. The young population, which is growing rapidly serves to highlight the importance of this segment of the population and represents the future of the country. Though young adults have an added feature of being the group with the highest number of people, at the same time these young people are at a higher risk of developing mental health problems when certain factors occur in their life or environment.
The period of young adulthood has often been viewed as one of crisis, which every individual has to face in varying degrees. This period of crisis, whether it be in the life of an individual or that of a whole generation of young people, is often reflected in certain kinds of strains and stresses and has been variously described as a generation gap, vocational and social disorientation, alienation and ambivalence. Significant cultural, economic and demographic changes have occurred in the span of a few generations and these changes are challenging young adult’s psychological development. Some are adapting well but many others are still floundering in confusion. These are seen in developing countries like India where young adults have gradually became aware of variety in forms of jobs and skills due to IT boom. With more avenues and opportunities, more competition in day to day activities has become unavoidable. These when not prepared, can have harmful effects in the form of stress. An intensified form of such stress is reflected in a variety of psycho-social disturbances such an anxiety, despair, depersonalization, isolation, loneliness, a feeling of anonymity, pessimism, all of which seems to characterize contemporary modern young adults.

Modern young adults experience psychological set backs because of the conflicting demands that society places on them. They are beset with the feeling that their existence is futile and meaningless. They are no more at the centre of things and that they have somehow missed the point of the intimate significance of life. Both, idealism and hope are lost for them. They have become oppressed with a sense of pointlessness and futility, a lack of clear values and sense of direction (Matin, 1995). This sometimes creates distressing problems of adjustment among young adults.

In the present research, emphasis is given on the period of young adulthood from 18 to 25 years, a period in life with many physical, social and personal transitions. The main focus of the study is on the young college women who are advancing in their careers. Young college women have more diverse and personal problems than men from the same age group do and it has long term effects on their life and family adjustment. Indian studies showed that Indian women reported more psychological distress, more medical problems, lower morale and a more negative effect than men did (Shirolkar & Prakash, 1995; Rashmi & Prakash, 1996). The mental health status of young women especially is worth exploring as the percentages
of young women reporting physical symptoms such as headache, insomnia, ulcer and others due to psychological disturbance are considerably higher than the other age groups (Ellias, 1989; Barnes, 1997).

Psychological disturbance is learnt by inculcation of irrational beliefs from significant others during childhood as well as by our own creative inventing of irrational dogmas and suggestions by ourselves. Irrational beliefs are one’s absolutistic, illogical thinking pattern and attitude towards self, others and the environment which are not based on objective reality, produce disturbed emotions and hinder oneself from reaching goals (Wilde, 1992). It has been proved in various studies that if we actively reinstall rational beliefs among young adults, it tends to reduce their emotional disturbances. Some of the studies (Berger, 1982; Kassinove, 1974; Smith, 1982) have been conducted on college-going students and others (Ellis, 1971; Wilson & London, 1977) have been conducted on young adults. These studies show that irrational thinking largely exists among young adults who keep dysfunctional attitudes alive and operative within them. The present study offers counselling by which they are able to change these dysfunctional attitudes and substitute rational attitudes instead of them, which will help them in reducing adjustment problems.

**Adjustment and Attitudes**

Young adults have various problems, one of them being low on adjustment. Adjustment problems in young adulthood have been a subject of vast study of western psychologists, sociologists and educationalists for the last so many years. In India, some research work regarding the various problems of adjustment is available.

Indian studies on urban adults focused on many important issues. The research of Mehta (1970), Mohan (1976), George & Parikh (1976), Kirpal (1976) in the area of adjustment do show some of the difficulties faced by the young adults. The problems, the above mentioned social scientists tried to investigate were militancy, political awareness, drug addiction, and attitude towards interests, intergenerational gap and leadership behaviour of the young adults.
Horvalti (1971) reported a political and social world survey (1955-1970) of youth up in-arms. He has emphasized upon the rising political power of young adults. Sinha (1972) aimed at locating the possible areas of conflict between the generations. Shukla (1972) in a paper ‘Modern Indian Youth-Some Needs and Problems’, presented profiles of students and non-student young adults in India with respect to social criteria of occupation, income and training. Shinde (1972) conducted a study on the political consciousness among college students.

George and Parikh (1976) had portrayed the young adulthood in the period of ‘Cultural transformation’. He had suggested four major constituents, which are often employed for the study of understanding the phenomenon of young adulthood namely: alienation, Oedipus complex, generation gap and industrial urbanization. Kirpal (1976) had thrown light on the wide spread frustration of the young people and their disillusionment with functioning of dominant establishments of culture. The study revealed the values and aspirations of young people.

Sinha (1962, 1974) focused the role of value ambiguity among the Indian college students whereas Mehra (1977) emphasized the role of transitional cultural factors while exploring the problems of male young adults during undergraduate.

The reason for being low on adjustment in young Indian adults as explained by various researchers, can be broadly summarized as follows:

- Very few young adults have undergone any psychological preparation or training for meeting the types of problems they are expected to cope with as adults. Education in high school and college provides only limited training for jobs. Their limited experience of reality leads to low adjustment.

- Just like trying to learn two or more skills simultaneously usually results in not learning any one of them well, similarly trying to adjust to two or more new roles simultaneously usually results in poor adjustment to all of them. It is difficult for a young adult to deal with the choice of career and life partner simultaneously.
• The adjustment to the problems of adulthood has been intensified by the shortening of adolescence, which has given individuals less time to make the transition from childhood to adulthood. That is why the transition to adulthood becomes especially difficult.

These explanations have been discussed from sociological, political or developmental perspectives and indicate general nature of adjustment with demographic, socioeconomic and political interpretations. Very few attempts appeared to have been made to peep into the psychological problems they face.

Researchers such as Rao (1962, 1965, 1967, 1974, 1992), Riddle (1962), Tulpule (1977), Natraj (1968) studied mental health problems of the young adults from psychological point of view but while considering psychological problems of young adults, researchers are more concerned with psychosocial factors to explain why there is an increase in mental health problems of young adults.

The research is needed in the cognitive area as it is a scantily researched area. Rational Emotive Behaviour Therapy (REBT) views cognitive interventions as the heart of the counselling. The main distinguishing feature of REBT lies in its concern with cognitive dimensions along with feelings and behaviour. It concentrates on emotional aspect of the practical problem and then if required, it tries to find out the philosophical roots of emotional problem. The present study tries to focus on beliefs of young adults as a major contributing factor to adjustment.

Along with the adjustment, the present study also tries to reduce widespread dysfunctional attitudes of young women such as masturbation, hot cognitions, ego and discomfort anxiety as well as low frustration tolerance with the help of REBT. Dysfunctional attitudes are the attitudes which are not based on objective reality, are life or health threatening, defeat personally defined goals and cause or sustain significant interpersonal or intrapersonal conflicts. (Maultsby, 1972). According to Burns (1999), dysfunctional attitudes are a predisposition to emotional turbulence. The present research was carried out with the hope to overcome this emotional turbulence and generate new insights into understanding, assessing and treating problems of Indian young women.
Mental Health of College Women

Today, an increasing attention is being directed to the transition to higher education of young men and women. It is a movement that incorporates a great deal of stress and challenge. Although some students are able to experience this transition as a challenge to personal growth, other students are overwhelmed by the changes and experience adjustment difficulties.

These difficulties are often presented as inefficiencies in coping with familial conflicts, time and stress management, basic study techniques, goal setting, relationship formation, handling emotions and crystallization of self esteem. Personal, academic, social and professional success depends on the student's ability to manage these aspects of their lives. National Institute of Mental Heath (1997) highlighted following common stressors in college life:

- Greater academic demands
- Being on our own in a new environment
- Changes in family relations
- Changes in social life
- Exposure to new people, ideas and temptations
- Awareness to sexual identity and orientation
- Preparing for life after graduation or post graduation

Present research concentrates on young college women since in their case these difficulties due to above stressors become intense, when they step into college. There is considerable evidence showing that stressful life events are more common in the lives of young women (Davar, 1999). Moreover, the multiple roles played by women and social as well as cultural transitions may lead to considerable stress. The conflict between being ‘traditionally feminine’ and also productively involved in a vocation or a profession needs to be resolved and even in today’s modern society, this seems not to be an easy task. Fear of success, fear of losing affiliative satisfactions and fear of failure as well as anxiety seem to be some of the responses to the conflict.

The most mind-boggling problems faced by young women are decision making in the day to day life, self dependence and career. Rapid changes in the socio-economic and cultural reality, parental expectations, values and norms, rising levels of
competition and pressure during examination time and a break down of traditional family structures are factors that accelerate this alarming trend. Examination related anxiety results into sharp rise in women taking dire actions, leaving homes or killing themselves.

Growing percentages of schizophrenia in Indian women (Thara & Rajkumar, 1992), higher risk of attempted suicide and self harm among young women (Biswas et al., 1997) and a 2:1 ratio of women to men in 100 cases of deliberate self poisoning behaviours such as response to failures in life and difficulty in interpersonal relationships (Malik, 1993), indicate that Indian young women are at a greater risk of being affected by mental health problems.

The term ‘mental health’ is used here to describe a state of emotional and psychological well-being in which an individual is able to use his or her cognitive and emotional capabilities, function in society and meet the ordinary demands of everyday life. From psychological perspective, the term ‘mental health’ includes an individual’s ability to enjoy life, procure a balance between life activities and efforts to achieve psychological resilience. Mental ill health takes many different forms and varies greatly in severity from short term difficulties to long term psychiatric illnesses. Previous researchers reported that there has been an apparent rise in both, the presence and severity of mental health problems of college women. This initiated the researcher to undertake a systematic and an exploratory study as a step towards gaining a better understanding of the current mental health status of young college women. The aim was to investigate faulty beliefs causing low personal, social adjustment and dysfunctional attitudes. Some of the common mental health problems especially prevalent among college women are highlighted as follows:

**Depressive Tendencies**

With a prevalence rate of 17 percent in the general population, a significant number of men and women suffer from a clinical episode of depression at some time in their lives (Segrin & Flora, 2000). Researchers stated that college students are twice as likely to have depressive tendencies as compared to people of similar ages and backgrounds in the workforce (Dixon & Reid, 2000). Report of college mental health statistics (APA, 2006) is revealing in this regard. It stated,
• Nearly half of all college students report feeling so much depressed at some point in time that they have trouble in functioning.

• If left untreated, depression can lead to suicide. Suicide is the third leading cause of death of those aged 15-24 and the second leading cause of death in college students.

Depressive tendencies are significantly more common in women than in men. The higher rate of depression in women than in men is found across a variety of cultures, despite variations in the definition and measurement of depression (Nolen – Hoeksema, 1990). The female to male ratio varies considerably, but across countries about twice as many women have depression (Paykel, 1991). Depressive tendencies constitute a problem of enormous personal and social significance and lead to low personal and social adjustment. It interferes with intra and interpersonal processes as well as academic and social integration.

**Low Self-Esteem**

Problem in the development of self-esteem for young women, appear to be intensified in young adulthood (Gilligan, 1987). The attitude of women towards others can also be one of sacrifice and service with conflict about achievement, mastery and pursuing one’s own goals in order to gain approval and not risk loss of love (Miller et al., 1981). Because women have often been devalued in society and even in their families, identification with one’s devalued mother has implications of low self-esteem and may increase the tendencies for low adjustment.

**High Anxiety**

High anxiety is often reported as the second most prevalent mental health issue for young adults and the sixth ranked health problem for college students. (Soet & Sevig, 2006). As compared to men, women are found to be at increased risk for some anxiety disorders (Robins & Regier, 1991). Compared with men, young women are three to four times more likely to have simple phobia, two to three times more prone to experience panic with agoraphobia, and one and one-half times more likely to develop social phobia. They are twice at the risk for developing anxiety related stress disorders (Borden, Boyd & Rae, 1988; Schneier, Sanoud & Campeas, 1993).
Eating Disorders

An estimated 64% of college women exhibit some degree of eating disorder behaviour, a situation that pushes the body image issue to the forefront of concern in higher education.

Young college woman is constantly bombarded with media images of thin, glamorous women who are loved because of the way they look. A specific model of physical attractiveness continues to be more important for women than for men, for whom strength and performance are more valued. For both, self-esteem and self-confidence rest heavily on physical attributes and body image. Conflicts about control and ownership of her body become more prominent during adolescence. Discomfort with body image and fear and ambivalence about mastery, independence, separation from family and facing adulthood including sexuality are difficult issues that are thought to contribute to the high incidence of mental health disorders among young women.

Other Mental Health Problems

Berman et al. (2000) estimated that 37 percent of women between the ages of fifteen and twenty-four, many of whom are college students, have a variety of diagnosable mental health problems all over the world. In India, the situation is not different than the stated picture. In fact, the age of onset of many mental health problems is the years from 18 to 24. Indian researchers also stated that the percentage of Indian young women affected by mental health problems is growing day by day (Barnes, 1997).

Need for Counselling

The mental health status of young college women has reached a state where counselling is becoming imperative. Young college women’s need for counselling assistance urged the researcher to conduct REBT group counselling programme which was thought to be the most promising way to help save them from resorting to low adjustment and dysfunctional attitudes. The achievement of positive mental health is identified as an important goal of counselling by which one learns to adjust and
responds more realistically to people and situations. The goal of REBT counselling is not only to help people but to help them as quickly, effectively, intelligently and adequately as possible. While counselling with young college women having low adjustment and dysfunctional attitudes, it was ensured by the researcher that they will receive counselling as early as possible.

Some of the Indian researchers (Pandit, 2003; Tulpule, 1977) expressed desperate need of counselling for young people. These studies emphasized the promotion of life skills programme which will lead to cognitive understanding. Further, it was suggested that the various issues of adjustment can be considered for inclusion in junior and senior college. Studies by Rao (1962, 1965, 1967, 1974, 1992) also suggested that increasing number of counselling facilities should be provided to Indian college students to alleviate the suffering caused by adjustment problems. Lavakare (1990) recommended to start a counselling centre at the college level in any educational set up for better adjustment of young college women.

Young women with low adjustment and dysfunctional attitudes usually have such deep-seated and long-standing problems that they often require persistent psychotherapeutic help. Even if women receive counselling assistance, possibilities of their improvement are less unless they add persistent and forceful self-analysis which will not be superficial and give long lasting results. REBT was needed as it provides such type of counselling service which largely involves effective self-analysis. It teaches young women, how to observe their own feelings and actions and to evaluate them objectively instead of moralistically or grandiosely. It also teaches how to change by consistent effort and practice, so that they may achieve the things that they most want to do without needlessly interfering with the preferences of others.

REBT fulfills all the requirements of competent and efficient counselling which is required for reduction in mental health problems of college women. It includes self-work and self-analysis and makes this kind of activity an integral part of counselling process. According to REBT, emotional disturbance originates in some irrational beliefs and REBT rests in uncovering the basic unrealistic ideas with which young women disturb themselves, to see clearly the misinformation and illogic behind these ideas and on the basis of better information and clearer thinking, to change the notions which lie behind and keep creating their disturbance. Thus, the outcome of
REBT counselling is the acquisition of a new, more logical and scientific approach to life so that women learn not only to think, feel and act differently toward their current unpleasant circumstances but also to apply these principles to other new and different situations that may occur in the future.

**New Era of Rational Emotive Behaviour Therapy (REBT)**

REBT has been chosen for group counselling as it offers a good psychological theory of adjustment and psychotherapy. REBT which is a leading cognitive psychotherapy, states that environmental factors are contributing factors but not the real cause of psychological problems. The real cause of these problems lies in one’s belief system. Change from irrational beliefs to rational beliefs is the best remedy to reduce these problems.

Research indicates that, it is one’s belief system that leads to inappropriate emotional consequences such as depression, extreme anxiety, nervousness, inferiority complex, suicidal ideation and others. Belief system consists of two sets of beliefs – one set consists of rational beliefs and the other consists of irrational beliefs. It is this limited set of irrational beliefs and their variations that underlie most emotional disturbance. Psychological factors, namely cognition or thinking heavily influence mental health. REBT holds that people are largely responsible for their emotional disturbances and that they overtly and tactily, consciously and unconsciously choose to disturb themselves. Hence, it is largely our own repetition of early-indoctrinated irrational thoughts rather than a parent’s repetition which leads to dysfunctional attitudes.

The uniqueness of REBT lies in handling mental health issues from cognitive point of view, in conjunction with emotive and behavioural techniques. According to it, depressive tendencies, low self esteem, high anxiety, eating disorders or other psychological problems among young women emerge through inculcation of irrational beliefs. Changing a belief system to a more rational one can serve to prevent emotional disturbance.

REBT links depressive tendencies with a set of self defeating irrational beliefs. According to it, the feeling of depression involves three major correlates of irrational
beliefs, namely 1) negative view of self 2) negative view of the world 3) negative view of the future. (Beck & Shaw, 1977). This view is consistent with the research findings which revealed that women who interpret the difficult situations in their lives in pessimistic self-defeating ways, appear more likely to develop postpartum depressive symptoms (O’Hara, 1987).

REBT stresses that low self esteem is the result of being overly concerned with other’s opinions of oneself. Individuals who excessively self rate and require other’s approval tend to lack high self esteem. To keep their feelings of self worth, they not only demand other’s approval today but are also overconcerned about tomorrow. Such thinking is usually imaginary and in case of women, it has been reinforced by our culture for many years.

In REBT, self esteem is defined as a form of global self rating and is to be avoided as it has problematic long term implications for individuals. Therefore, counselling in the present research has incorporated the concept of ‘unconditional self acceptance’ which will discourage college women from making global self or other’s rating.

From REBT point of view the core of irrational belief that usually accompanies anxiety is that the feared event will be terrible, awful and catastrophic. The belief is an exaggeration of some event’s badness. Ellis (1962) differentiated between ego anxiety and discomfort anxiety in which an individual’s comfort or security is threatened, which is considered to be more prevalent among young people. Again, the threat does not actually cause anxiety. In discomfort anxiety, the individual is preoccupied with following irrational ideas:

- I must not feel threatened.
- It is terrible that bad things happen.
- If something bad may happen, I must be preoccupied with it.
- I can’t stand it when that happens.

Considering the above mentioned view, an attempt was made in the present research to trace high anxiety of young women to several irrational beliefs and their corollaries and try to modify it.
Most mental health and adjustment problems are treatable or manageable, allowing the individual to proceed effectively through life’s daily routines. Unfortunately, many college women do not get adequate guidance and the consequences are life threatening. As a result, many women withdraw from college before earning a bachelor’s or master’s degree. However, with proper attention and counselling, they might have been successful in the collegiate environment. The present research was focused on adjustment and attitudinal problems of college women which interfere in their achievement of positive mental health.

REBT proposes that the causes of mental health and adjustment problems can be traced in people’s irrational tendencies to take their strong preferences for success, approval and comfort and convert them into absolute necessities and they get blocked from achieving their goals. Present research proposed to involve disputational methods which help college women to discover the unrealistic, antiempirical and irrational aspects of their thinking and to change their irrational beliefs to more rational ones. This research has the intention to provide effective counselling which will enhance their positive mental health and functional living as well.

Scope of the Study

The landscape of college student’s mental health is changing in the modern world. Many students arrive at college or university with pre-existing notions but do not necessarily recognize their difficulties. It is much more evident that today’s college students are having critical need of counselling than a decade ago. Dramatic increase is seen in the number of students seeking psychological help for innumerable problems. If current trends continue, many more students will enter college with mental health concerns. Early intervention referral to appropriate resources and adequate counselling can be crucial to the success of these students.

This research will provide a frame of reference regarding their irrational thinking and it’s effect on their adjustment and attitudes. Further, it will provide information about young college women, which is useful in understanding their problems and improving their adjustment and dysfunctional attitudes. REBT group counselling programme can be broadened and implemented in different colleges or universities across the country. Similar studies need to be conducted at other college
or university counselling centres so that more and more number of college students will be benefited.

To sum up, counselling as a field of knowledge is widely spread. It is involved in providing counselling assistance to individuals to help them gain insight into their personalities so that they are able to resolve their problems. Human suffering can be mitigated if timely assistance is provided to individuals to help adjust themselves better and resolve their problems before they reach explosive proportions. The present study was undertaken with the aim to help young college women escape impending crises by resolving their problems through the process of better and more effective self understanding, self direction and self actualization. It is a strong conviction of the researcher that the broad based REBT group counselling programme in diverse areas, will brighten the lives of many young women.