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Psychosocial Challenges among Young Adults Serving in Non-Commissioned Rank of Indian Army in (Kannur District)

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Abstract: ***Background: Military service during young adulthood involves demanding occupational conditions, hierarchical relationships, mobility, and periods of separation from family. These conditions may affect sleep, emotional well-being, adjustment, and social functioning. Evidence focused on young adults serving in non-commissioned ranks in specific Indian districts remains limited. Objective: To describe selected psychosocial difficulties reported by young adults serving in non-commissioned ranks of the Indian Army in relation to occupational experiences, sleep, separation from family, adjustment to new environments, and perceived access to psychological support. Methods: The thesis describes a quantitative, cross-sectional questionnaire-based study conducted among Army personnel in Kannur district. Participants were recruited using snowball sampling. A self-structured questionnaire was used, and data collection was reported to have taken place over 15 days, from 15 to 30 August 2026. The thesis reports a pilot study involving 50 personnel; however, the analytic sample size is inconsistent across the document. Many reported percentages occur in increments of 3.3%, suggesting a denominator of approximately 30, whereas the analysis narrative refers to 50 responses. The final sample size therefore requires confirmation. Results: Reported findings indicate concerns related to workplace treatment and communication, sleep, family separation, environmental adjustment, and perceived mental-health support. The thesis reports that 83.3% had received punishment because of another person's fault, 66.7% had experienced humiliating remarks from seniors, and 63.3% did not communicate their problems to seniors. Regarding sleep, 60% reportedly slept for approximately five hours per day, while 43.3% rated their sleep quality as very poor. Family separation was also salient: 40% reportedly always experienced difficulty staying away from home, and 53.3% always experienced extreme stress when leaving family after leave. A perceived need for support was reported by 76.7% for counsellors and 86.7% for psychologists in their units. Conclusion: The descriptive findings suggest that the respondents reported psychosocial concerns across occupational, sleep-related, family, and support domains. The findings should be interpreted cautiously because of the small, geographically restricted sample, self-report design, incomplete psychometric information, and unresolved sample-size inconsistencies. Larger studies using validated measures and transparent ethical procedures are warranted.***

Keywords: Indian Army; non-commissioned ranks; young adults; psychosocial well-being; occupational stress; sleep; family separation; mental-health support

1. Introduction

"Psychosocial Challenges Among Young Adults serving in Non-commissioned Rank of Indian Army (Kannur district)" "is a study conducted to understand various problem faced by the individuals serving in Indian army.

The Indian army is one such community where the josh is never low. They serve the country, they protect us and sacrifice everything, including their lives, but what does it take to become a soldier this brave and solid? Surely, they are not immune to pain, emotions, love, joy, etc. like the rest of us and hence, it is time to question if we take care of our men and women in uniform, as they do us. For years now, mental health has been a taboo subject in India and it is only very recently that occupational stress, its relevance in personal lives and need for intervention has come to the forefront. There is a need to explore and attempt to understand the nuances of the same by categorizing professions, job profiles and kinds of training for various occupations, and their varying consequences on the workers. Our nation's pride, the armed forces, have always been appreciated doing all that they do for the people of our country. However, in the ambit of mental health, very little information is available on how the adverse weather conditions, traumatic experiences, constant change of job profiles and seniors, and the atypical training that they are put through at such a young age affect their emotional state and personal life. Young adulthood is a critical developmental stage marked by identity formation, emotional regulation, and social role transitions. For individuals serving in the Indian Army, particularly in non-commissioned ranks (NCOs), this phase is shaped by unique occupational demands such as strict discipline, hierarchical structure, frequent transfers, and prolonged separation from family.

These conditions can significantly influence both psychological well-being and social functioning. Psychosocial issues such as stress, sleep disturbances, loneliness, and adjustment difficulties are increasingly recognized among military personnel. Despite their crucial role in operational effectiveness, the mental health and psychosocial well-being of NCOs often receive limited focused attention.

This study aims to explore the psychosocial issues faced by young adults serving in non-commissioned ranks of the Indian Army in Kannur district, with special focus on sleep deprivation, adjustment disorder, separation anxiety, stress, loneliness, occupational stress, and burnout.

Army personnel experience a sudden and great change in their military life than their past civil life, which brings them stress, anxiety, adjust mental problem, sleep deprivation, nightmares, depression, mood swings and so on. Increased

level of adjustment and coping strategy are needed for the individual, because they are entering into a new life where they need to work hard, obey the rules and regulation, face humiliation, punishment from their seniors, cope with extreme climates, reduced sleep etc. All these causes stress and many other physical and psychological problems among the individuals. Since 2014, according to a defense ministry submission in Parliament, 310 officers have committed suicide and 11 cases of fratricide were reported in this period. The Army works in extremely difficult conditions even in peacetime. It is called out far too often to quell civil unrest, something which should not be in its remit unless in extreme circumstances.

The hierarchies in the forces are rigid and do not encourage those from the lower ranks to express themselves freely. Those in hardship postings or facing civil strife work for months on end without leave or proper sleep and food, exacerbating mental disorientation and illness

Spending months away from their homes also contributes to a sense of loneliness and disconnectedness. Soldiers often have to live in different cultural milieus to their own.

All these factors create different problems as mentioned above.

2. Background of the Study

Being a part of Indian army is something that make us feel proud of, since from childhood we hear about those heroes in uniform who sacrifice their joy, happiness, emotions, their own life for others, for our nation. Being a part of Indian army and serving for our country is not an easy job.

Military service involves exposure to demanding physical conditions, rigid organizational culture, and high-risk environments. Young adults in non-commissioned ranks often occupy a transitional position- they are expected to follow orders while also managing responsibilities toward subordinates. Existing literature indicates that:

1) Long duty hours and irregular schedules contribute to sleep deprivation Frequent relocations and strict discipline create adjustment difficulties Distance from family leads to separation anxiety and loneliness
2) High expectations and workload result in occupational stress and burnout

In the Indian context, there is limited empirical research focusing specifically on psychosocial challenges faced by NCOs. This creates a need for localized, context-specific studies.

3. Statement of the Problem

Young adults serving in non-commissioned ranks of the Indian Army experience multiple psychosocial challenges due to the demanding nature of military life. Issues such as sleep deprivation, stress, loneliness, adjustment difficulties, and occupational burnout can negatively impact their mental health, job performance, and overall quality of life.

However, there is insufficient research focusing specifically on these psychosocial issues among NCOs at the district level. Therefore, the present study seeks to investigate the nature and extent of psychosocial issues faced by young adults in non-commissioned ranks of Indian Army. The young adult who got selected in Indian army are gone through training where they are forced to train physically to achieve the desired result, but during their training and service period of young adults in Indian army they undergo several changes from the person they used to be thus, it is seemed to be that this intense sudden changes in their environment and work bring about
stress, anxiety, adjustment problem, mood swings, depression etc.

4. Significance of the Study

The significance of the study is to know the work related issues or psychosoial problem faced by the young adults serving in the noncommissioned rank of Indian army, these young adults are forced to adjust with the army rules and regulation, for that they need to sacrifice their old self and need to adopt the military life where they need to obey their seniors commands, need to cope with different climate condition, there is no right to follow their own opinions or ideas once they entered into the army life there is no going back. They need to continue as long as their contract time period. There intense workout section and busy time schedule, reduced time to sleep and rest thus become their part of army life where they sometimes felt lost, exhausted, stressed, depressed, aggressive, mood swings, loneliness separation anxiety etc. this study helps us to know which of the above situation they are going through and thus we could suggest appropriate measures to reduce their problems.

5. Review of Literature

Many soldiers experience psychosocial issue in long run, their overall level of freedom will be pretty confined, they are unable to see their friend's family too often, and they need to face the humiliation, punishment from the seniors, all this causes many problems among the young army personnel. There are many work-related issues faced by army personnel's, stress due to intense workout sessions, separation anxiety, adjust mental problem sleep deprivation, etc.

1) Sleep Deprivation

During training exercises, service members may sleep fewer than five hours per night. Typically, that five hours is split up into multiple episodes of sleep, usually lasting less than two hours each.

U.S. Military Academy cadets sleep fewer than five hours during the week and are woken up several times during the night for training. Even on the weekends, when they're encouraged to sleep more, they still get fewer than seven hours. Those in Ranger School only get around three hours per night.

Soldiers need the same amount of sleep as everybody else, if not more, depending on the physicality of their mission. Adults need seven to nine hours of sleep, and people with physically demanding lifestyles- like athletes and service members need more sleep.

Studies indicate that when soldiers get fewer than four hours of sleep per night, it reduces their effectiveness in combat by 15% to 25%. Moreover, studies of Army Rangers show that their testosterone levels are lower after the sleep loss they endure during training, at a time when they need it most for muscle repair and recovery.

Getting good sleep is essential to a soldier's day-to-day performance as well as their future mental and physical health.

The long-term effect of sleep deprivation is real. It drains your mental abilities and puts your physical health at real risk. Science has linked poor slumber with a number of health problems, from weight gain to a weakened immune system. Getting less than 7 hours of sleep on a regular basis can eventually lead to health consequences that affect your entire body. This may also be caused by an underlying sleep disorder.

Your body needs sleep, just as it needs air and food to function at its best. During sleep, your body heals itself and restores its chemical balance. Your brain forges new thought connections and helps memory retention.

Without enough sleep, your brain and body systems won't function normally. It can also dramatically lower your quality of life. A review of studies in 2010Trusted Source found that sleeping too little at night increases the risk of early death. Noticeable signs of sleep deprivation include:

- Excessive sleepiness
- Frequent yawning
- Irritability
- Daytime fatigue
- While you sleep, your immune system produces protective, infection-fighting substances like antibodies and cytokines. It uses these substances to combat foreign invaders such as bacteria and viruses.
- Certain cytokines also help you to sleep, giving your immune system more efficiency to defend your body against illness.
- Sleep deprivation prevents your immune system from building up its forces. If you don't get enough sleep, your body may not be able to fend off invaders, and it may also take you longer to recover from illness.
- Long-term sleep deprivation also increases your risk for chronic conditions, such as diabetes mellitus and heart disease.
- Sleep affects processes that keep your heart and blood vessels healthy, including those that affect your blood sugar, blood pressure, and inflammation levels. It also plays a vital role in your body's ability to heal and repair the blood vessels and heart.
- People who don't sleep enough are more likely to get cardiovascular disease. One analysis linked insomnia to an increased risk of heart attack and stroke.
- Hormone production is dependent on your sleep. For testosterone production, you need at least 3 hours of uninterrupted sleep, which is about the time of your first R.E.M. episode. Waking up throughout the night could affect hormone production.
- This interruption can also affect growth hormone production, especially in children and adolescents. These hormones help the body build muscle mass and repair cells and tissues, in addition to other growth functions.
- The pituitary gland releases growth hormone throughout each day, but adequate sleep and exercise also help the release of this hormone.

2) Adjustment Disorder

Adjustment disorder is an excessive reaction to a stressful or traumatic event. Stressors could be a relationship issue, job problem, health change, or any other negative or positive life event Symptoms improve with time. The main treatment is talk therapy, but some providers might recommend medications like anti-anxiety drugs. Everyone is going to experience an adjustment disorder differently. Symptoms can vary from mild to severe, depending on the intensity of the triggering situation and the personal significance it has for you.

Common physical symptoms:

- Being tired, but can't sleep (insomnia).
- Body aches and soreness; thinking that you're sick.
- Headaches or stomachaches.
- Heart palpitations.

Sweating hands. Common behavioral or emotional symptoms:

- Acting rebellious, destructive, reckless or impulsive.
- Being anxious or agitated, feeling trapped, hopeless
- Trouble concentrating.
- Being withdrawn or isolated; feeling sad; lacking energy or enthusiasm; loss of self-esteem.
- Loss of interest in everyday activities.
- Changes in eating habits.
- Feeling overwhelmed and stressed.
- Abusing alcohol or drugs.
- Having suicidal thoughts or behaviors.

Adjustment problem are stress related condition, you experience more stress than would normally be expected in response to a stressful or unexpected events, and this causes significant problem in your work. And If left untreated, people with adjustment disorder are at higher risk of suicide attempt or thoughts of suicide.

3) Seperation Anxiety

Military personnel in India will regularly (and often on, from early in their careers) engage in: sailings for months-on-end, long sorties, night-flying, frequent movements and transfers (leaving on postings first, without their families), frontline postings, non-family station postings, forward postings (with or without their families), special-forces assignments, secret/classified missions, deployment during times of conflict/unrest/war, emergency calls, peace-keeping missions and/or rescue missions.

The demand on a soldier's time is high and families may not get to spend 'quality-time' together.

These circumstances present unique challenges for dependents. There is an almost constant and underlying sense of worry/paranoia in family members when the tenures involve high-risk. Sympathetic nervous reactions resembling ***"I hope nothing goes wrong", "What if***

something bad happens" or ***"Why can't I get in touch with them"*** are natural.

A running commentary on the safety and security of those who have left home through irresponsible conversing, social media, sensationalism and trigger-happy reporting accentuate feelings of distress and agitation for those back home.

Deployment is an emotional cycle, which begins when its information is released to the family- this could also be accompanied by anger. During parental deployment, one may feel isolated, unsupported and anxious (a parent leaving home on military assignments could increase the burden on all family members).

Separation anxiety disorder is a condition in which one becomes fearful and nervous when away from home or separated from loved ones- usually a parent, spouse, child or another caregiver- to whom one is attached. The fear of separation could cause great distress and may interfere with one's normal activities and functioning.

Stigma in the Armed Forces has been identified as a barrier to help-seeking and is a cause for concern. The process by which a person is stigmatized by virtue of association with a mentally ill person is referred to as 'courtesy' or 'associative' stigma – this could prevent military dependents and family-members in India from seeking help (in military hospitals) if struggling with SAD and other mental health problems; the prevalent fear being that this would stigmatize the military personnel, bringing shame to him/her and the family, and possibly jeopardize growth in service.

It is natural to feel uneasy with loved ones on duty. When, however, this concern operates from a place of heightened fear, the chances of it mutating into panic or anxiety increases. If this state in an individual remains unaddressed, unacknowledged, ignored or simply 'managed' through repression-suppression strategies, it could lead to complications like long-term mental health issues or disabilities. Stress/worry over prolonged periods, without working through it in a healthy manner, could lead to lower immunity at all levels. Delays in treatment may create additional negative impacts on individuals' long-term health outcomes, relationships, or families. Indirect consequences of anxieties that are not given a healthy release could also lead to disintegration in families, frequent interpersonal relationship problems, inability to focus on academic/work goals, anger-management issues and/or suicide ideation. This could further affect soldiers in their lives and capabilities while discharging their duties towards the nation – their minds and hearts constantly with their families.

4) Stress

Stress isn't only a feeling. Stress is how we react when we feel under pressure or threatened. It usually happens when we are in a situation that we don't feel we can manage or control. The stress is evidenced to be one of the causative factors for lifestyle disorders such as backaches, and sleeplessness, hyperacidity, gas, chronic fatigue syndrome, heart disease, diabetes and even cancer. The chronic stress responses can either lead to aggression or depression in people depending on the personality trait of individual. While individual with aggressive attitude suffering from chronic stress are prone to commit fratricide. And the individual with depressive tendencies are prone to commit suicide.

There were as many as 635 cases of suicide including attempted suicides and 67 cases of fratricidal killing in three services of armed forces Humiliating Remarks Most cases of fragging (killing of superiors) result from humiliating taunts by seniors on mundane matters. Due to shortages of officers, the commanding officer is unable to devote necessarily required time to his troops for counselling. The commanding officer's inability to spare time for his troops demoralizes a soldier. Junior leaders tend to over-step their powers and indulge in passing humiliating comments to their aggrieved subordinates at critical moments.

This triggers emotions of revenge in the already aggressive soldier and generally results into fratricidal killings. In case such an affected soldier is under depression, he tends to commit suicide. Reluctance in Seeking Psychiatrists Help The personnel in the armed forces are prompted to hide their mental problems as the referral to a psychiatrist for treatment is considered a 'stigma' which may adversely affect the career of service personnel. Since such cases have been identified to be causative factors for 27 stresses, the system of referring a soldier for psychiatrist's evaluation by the commanding officer needs a re-look. Retaining the conditional option of AFMSF-10 defeats the very purpose and stigma associated with this ailment continues to bother the affected soldiers.

Absence of Mental Health Professionals and Religious Teachers in Units While the strength of mental health professionals in army hospitals is lower than the required, the units in army have no mental health professionals authorized to them. Even the religious teachers to whom the soldiers can confide their worries and problems are not posted to all the units. This leaves a void in the system despite increasing instances of stress among soldiers. This difficulty is not 28 which cannot be surmounted. stress is one of the main problems faced by the army personnel's, the cause of stress are many. Within any workplace there are certain stressors which can affect psychological wellbeing, job satisfaction and job performance. **(Bryson et al., 2014**) There has been much research on stress in the military, though generally this tends to focus on stressors relating to combat operations, such as traumatic exposure to death and injuries, exhaustion and deprivation, and being exposed to extreme climates. An international review of occupational stressors in the military (**Campbell & Nobel, 2009**) identified several categories of stressors. Though much of the review focused on deployment-related stress, results also yielded several categories of stressors applying to non-deployed personnel, including work stressors (e.g., workload, role ambiguity, poor leadership); social-interpersonal stressors (e.g., acceptance, conflict, friendship); and family-related stressors (e.g., separation). it was observed that though military personnel have managed to adapt to the temporary hardships of wartime and humanitarian missions, the chronic stressors faced at the home base are found to be beyond their tolerance limit. Moreover, occupational stress arising out of routine military work environments is found to have a significant negative impact on the mental health of military personnel. As per the figures presented by the defense minister AK Antony to the Lok

Sabha on March 6, 2013, a total of 368 defense personnel committed suicide from 2010 to 2012, out of which 310 soldiers belong to the Indian army alone; in 2010, 115 cases were reported as compared to 102 in 2011 and 93 in 2012 (**Sharma, S. 2015**). Though the Indian government and army have taken several steps to counteract the problem of stress in the army, such as recruiting psychiatrists in the army, discussions by the defense ministry with the expert panel of psychiatrists, initiating stress- busting therapies in recuperation centers set up in certain geographies prone to stress, practicing meditation, introducing regular lectures on yoga techniques, etc., suicides and fratricides in the army remain recurrent. Until these stress-reduction measures are initiated in a commitment-based supportive organizational culture, the efforts of the army are not expected to be significant in controlling such incidents (**Sharma, S. 2015**) In addition a substantial number of officers (from military only) have been trained to provide psychological counseling to the defense personnel and their families (**The Hindu, 11 December, 2015**). During the years 2003 to 2007, 635 cases were report of suicide including attempted suicides; and 67 cases of fratricidal killings in the three services of Armed Forces. Between 2007 and 2010, 208 soldiers were killed actions against militants, while 368 soldiers committed suicide.

Issues', 10.3 per cent were due to 'family problems' and 8.6 per cent were due to 'services related issues. states description for 76 per cent of total suicides. In Jammu & Kashmir, maximum suicides reported were from 'service-related issues' category accounting for 73.3 per cent of total such suicides in CAPF in the nation (**Times of India, 23 July, 2015**). This encouraged the ministry in New Delhi to take measures to curb the distress in the middle of the forces. In high altitude regions, isolation may be a reason of stress while deployment in insurgency areas, the threat comes from one's possess countrymen, may also be a cause of distress for some. Based on the recommendations of Defense Institute of Psychological Research **(DIPR)**, a number of remedial measures to deal with stress are implemented in the Army in field as well in peace areas. In their 21st Report, the Standing Committee on Defense (2009-2010) recommended, 'The Committee understand that the demand on the personnel of Indian Armed Forces have been increasing over the years due to varying prepared commitment of sundry character. At the same time, they are mandatory to meet aspiration of them family member for a good quality life on account of rapidly changing socio-economic environment in the society.' Another study conducted by DIPR, the three main operational stressors found were the fear of torture, uncertain environment, and domestic stresses. These stressors are responsible for most of the psychological issues in armed forces. According to defense office compliance in Parliament, 310 officers have committed suicide and 11 cases of fratricide were reported in this period. It has been recognized that 'lack of run at work' as the strongest stressor, follow by 'role conflict', 'Insufficient consciousness concerning profession', 'workload and job pressure', 'uncaring managerial attitude', 'Uncooperative colleagues', 'not enough training', 'role ambiguity' and 'unproductive management style'. Also, 'lack of equipped freedom' and 'workload' contribute the most towards occupational stress; 'combat stressors' average/normal influence on work-related stress framed certain recommendation to manage stress in the army in order to enhance the welfare of the soldiers in particular and the country in general. Additionally, the interface with the jawans throughout the review for the study reflect that annoyance by the seniors was a major foundation of strain for approximately all the soldiers. More particularly, soldiers' major cause of apprehension was that the everyday jobs performed by them (especially in peace areas) are whichever low status tasks, i.e., below the poise of a soldier or the own work of their seniors. This generates stress among them because they cannot decline the orders and commands of their seniors and if they don't stand for to those commands, they are beleaguered by their seniors. Commanding Officers should recognize such situations in their units and try to eradicate or diminish these handy stressors.

6. Research Methodology

General Objective

To study the psychosocial issues faced by young adults serving in non-commissioned ranks of the Indian Army in Kannur district.

Specific Objectives

- To study the demographic profile of respondents.
- To understand the psychological issues faced by the respondents.
- To understand the social issues faced by the respondents.
- To analyze and understand the overall psychosocial well-being of NCOs.
- To suggest measures to minimize their problems.

Definitions

Theoretical Definition- psychosocial Problem

Psychosocial problems refers to difficulties that arise from the interaction between psychological factors (thoughts, emotions, behaviours and coping abilities) and social/environmental factors(family, relationships, work, finances, culture, and community), which may negatively affect an individual's well-being and daily functioning. A problem is a situation that is unsatisfactory and causes difficulties for people (Collin's dictionary).

Young Adult

A young adult is generally a person in the years following adolescence; the young adult stage in human development precedes middle adulthood.

Non-commissioned Rank

Noncommissioned officers are soldiers promoted to positions of responsibility and are equivalent to junior noncommissioned officers (sergeants and corporals) in western armies. Other ranks in the Indian Army include Non-Commissioned Officers (NCOs) and Soldiers (sepoys or jawans).

Operational Definition – Young Adults

Individuals that comes between the age group 18 and 30.

Operational Definition – Non-commissioned Rank

All ranks other than commissioned and junior commissioned rank come under noncommissioned rank.

Operational Definition- Indian Army
It is a land-based branch and the largest component of the Indian armed forces.

Area of the Study
Area selected for the study is Kannur district.

Universe of the Study
The universe of the study is army personnel in noncommissioned rank of Indian Army in Kannur district who face work related issues in Indian Army.

Unit of the Study
Unit of the study is from the people who face problems serving in Indian Army.

Sampling Design
The dissertation aimed to understand the problems and psychosocial issues of army personnel in noncommissioned rank of Indian Army; data was collected by using snowball technique.

Research Design
The researcher used quantitative research design in order to understand the psychosocial issues and work-related issues faced by people serving in noncommissioned rank of Indian Army.

Tools Used for Data Collection
The tool used for data collection was self-structured questionnaire.

Sources of Data
The researcher opted both primary and secondary data for accomplishment of the study.

Primary Data
The primary data was collected directly from respondents through questionnaire method.
Secondary Data
The secondary data was collected from various articles and internet.

Pilot Study
The pilot study was conducted among 50 people who are serving in noncommissioned rank of Indian Army in Kannur district. It was to understand the scope and importance of the study.

Pretest
The researcher conducted pretest among the respondents of Indian Army personnel in Kannur district to check the validity, reliability and feasibility of the questionnaire and for improving the usefulness of the questions.

Period of Data Collection
The period of data collection was 15 days from 15 August 2026 to 30 August 2026.

Variables of the Study
- Independent Variables: Occupational conditions (workload, duty hours, transfers, hierarchy).
- Dependent Variables: Sleep deprivation; Adjustment disorder; Separation anxiety; Stress; Loneliness and social isolation; Occupational stress; Job burnout.

Scope and Importance of the Study
- Scope: Focuses on young adults in non-commissioned ranks; limited to Kannur district respondents; covers selected psychosocial variables.
- Importance: Helps in understanding mental health needs of NCOs; can support development of counseling and intervention programs; useful for military psychologists, social workers, and policymakers; contributes to limited Indian research in this area.

Limitations of the Study

- Limited to one district (results cannot be generalized to all Army personnel).
- Small sample size.
- Self-report data may lead to response bias.
- Restricted access to military participants may affect data collection.
- Sensitive nature of topic may limit openness of respondents.

7. Analysis and Interpretation

Data Analysis and Interpretation
Analysis and interpretation of data help us to draw meaningful picture of the raw information gathered. this is the key part of the research report. analysis of the data means studying the organized data in order to discover the inherent facts. In the present study, the researcher try to find out the major problems faced by young adults serving in noncommissioned rank of Indian army in Kannur district. Based on the responses given by 30 army personnel's, the processed data is presented here in the analysis chapter using simple terms with help of tables and graphs for the easy understanding and interpretation.

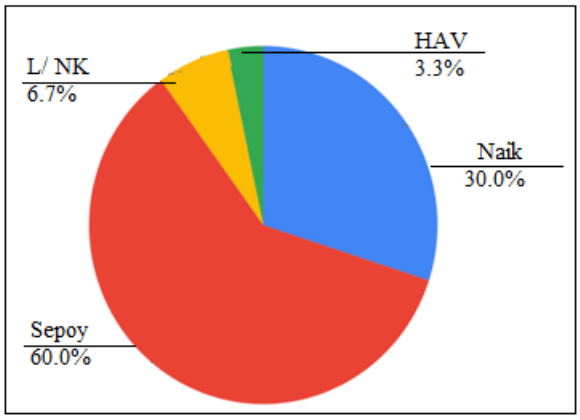

Figure 4. 1: Graphical Representation of Ranks in which Army Personnel's Belong

From figure 4.1, we could understand that about 60%, of the army personnel from total 50 responses belong to sepoy rank which represent lowest rank in noncommissioned rank of Indian army. These categories don't have the right to commend back towards the seniors if they are prone to inappropriate punishment

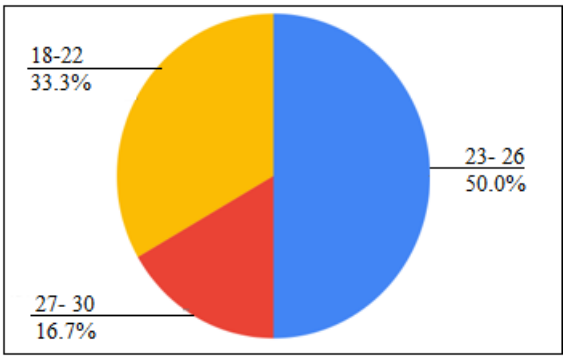

Figure 4.2: Graphical Representation of Different Age Category in Which Army Personnels Belongs

From figure 4.2, researcher found that about 50% of the respondent belongs to the age group 23-26 and 33.3% of the respondent belongs to the age group 18-22.

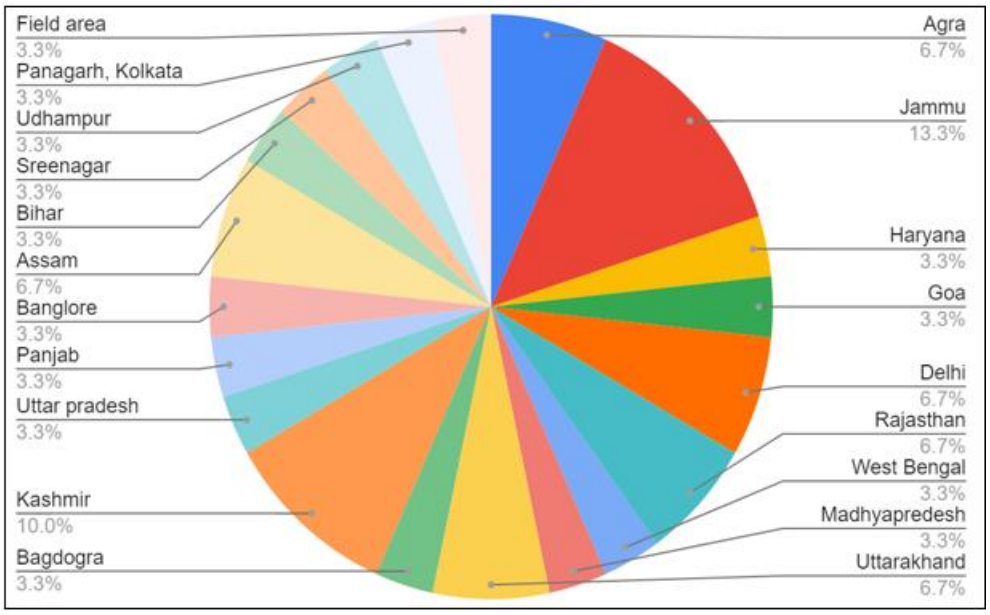

Figure 4.3: Graphical Representation of Current Service Place of Army Personnel

From figure 4.3 we could understand that most of the army personnel's are serving in northern part of India, which indicates that they are experiencing extreme climate, most of them experience adjust mental problems, range issues etc.

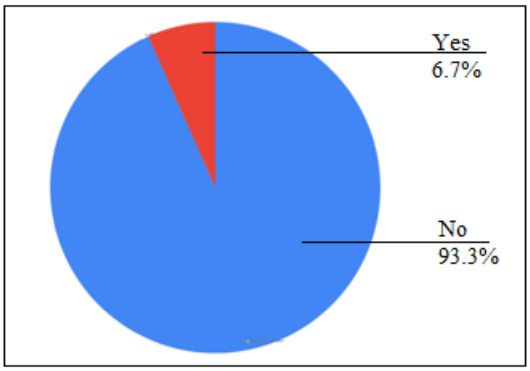

Figure 4.4: Graphical Representation of Marital Status of Army Personnels

From figure 4.4 we could understand that about 93.3% of army personnel's serving in noncommissioned rank of Indian army are unmarried, it is because they not getting enough time to be in their native place.

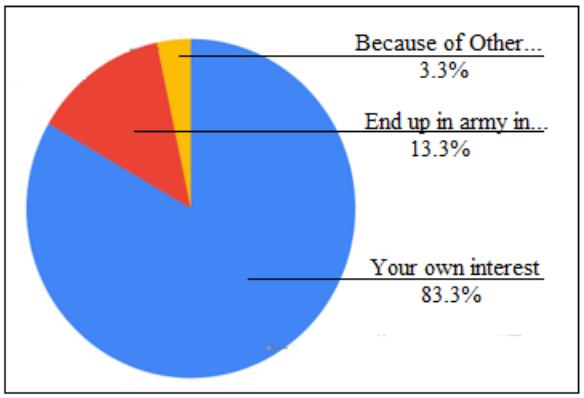

Figure 4.5: Graphical Representation of Reason for there Selection of Army as their Carrier.

From the figure 4.5 we could understand that 83.3% of the army personnels choose army as their carrier because of there own interest.and 13.3%end up in army in search of other jobs.

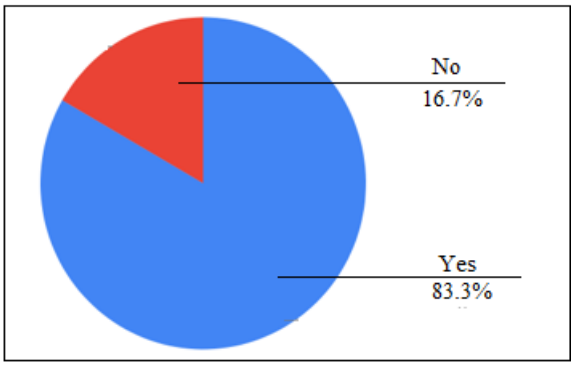

Figure 4.6: Graphical Representation Of Punishment Received by the Army Personnels because of Others Fault

From the figure 4.6 we could understand that about 83.3% of the respondent received punishment from the seniors because of others fault.geting punished from the seniors without any reason cause depression,anger,stress,within the person which may lead to further problems for the individuals.

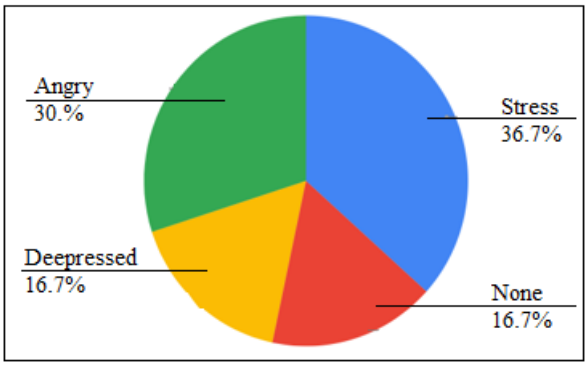

Figure 4.7: Graphical Representation of the Feeling they have after Receiving Punishment

From the figure 4.7 ,we could understand that about 36.7% of the respondent feel stressed and 30% of the respondent feel angressive after receiving punishment without any aparent reason.it is known that most of the fratiscides and suicides happened because of the unreasonable punishments and humiliations received from the seniors.

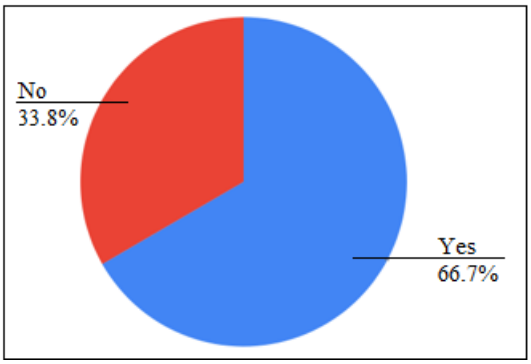

Figure 4.8: Graphical Representation of Humiliating Remarks Received from the Seniors.

From the figure 4.8 ,we could understand that about 66.7% of the respondent receive humiliating remarks from there seniors.receiving humiliating remarks infront of others from the seniors,create distress in individual,based on the personality of the individual it create depression, stress, agressiveness etc, which causes problems.

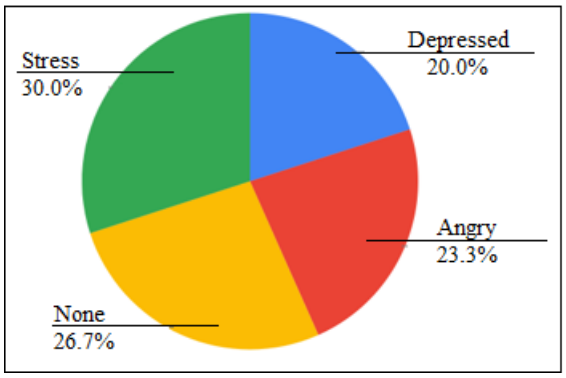

Figure 4.9: Graphical Representation of Feelings Created among the Individual after Receiving Humiliating Remarks from the Seniors

From the figure 4.9, we could understand that about 30% of people feel stressed by receiving humiliating remarsks and 23.3% of people feel angry towards the senior.From an article "Adressing stress related issues in army"says that most cases of fragging result from humiliating remarks by the seniors, this triggers emotions of revenge in the already aggressive soldiers and generally results into fraticidal killings.in case such an effected soldier is under depression, he tend to commit suicide.

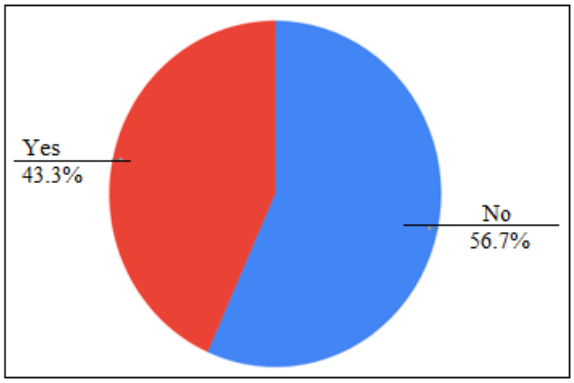

Figure 4.10: Graphical Representation of Respondents who wish to quit their job

From figure 4.10 ,we could understand that, about 43.3% of the respondent wish to quit their job.It shows they are tired of their work and the problems they face seemed to be unbearable, here about 56.7% of the respondent doesn't wish to quit there job ,it may be because they know the fact that once they enter into the army and sign the contract to be in the army for 16 years they cannot quit the job,if they do it is considered as an offence.

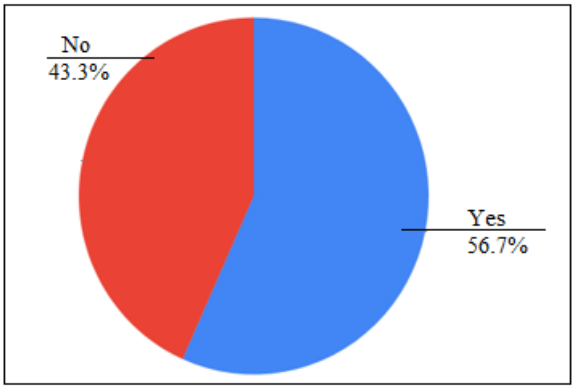

Figure 4.11: Graphical Representation of Army Personnel who wish to have another job other than army

From the figure 4.11, we could understand that about 56.7% of respondents wish to have another job other than army. This show that they don't love there job anymore.From the figure 5 we came to see that about 83.3% of the respondent choose army because of there own interest,but from this figure 11 ,56.7% of the respondent wish to have another job which indicates that they are suffering from work related issues and problems.

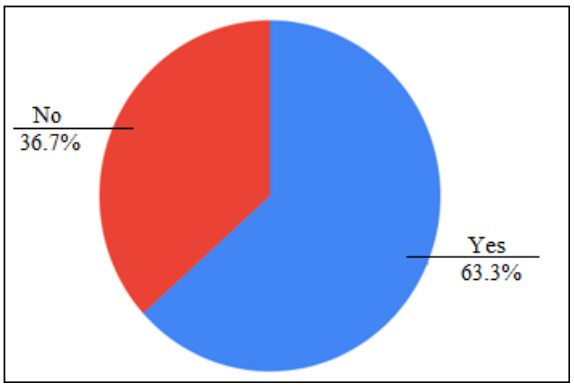

Figure 4.12: Graphical Representation of Denied Leave Application of the Respondents

From figure 4.12, we could understand that about 63.3% of the respondent purposeful leave application got denied.

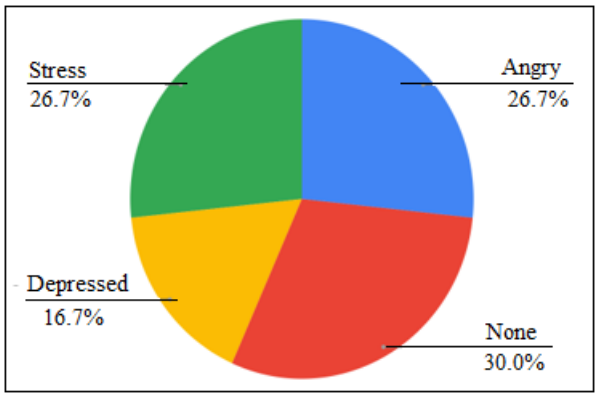

Figure 4.13: Graphical Representation of Respondents Feelings after the Deniel of Purposeful Leave Application.

From the figure 4.13, we could see that about 26.7% of the respondents feel stressed and 26.7% of the respondent feel angry and 16.7% of the respondent feel depressed.Denial of leave at required time is another reason for fraticidal killing,increased stress.

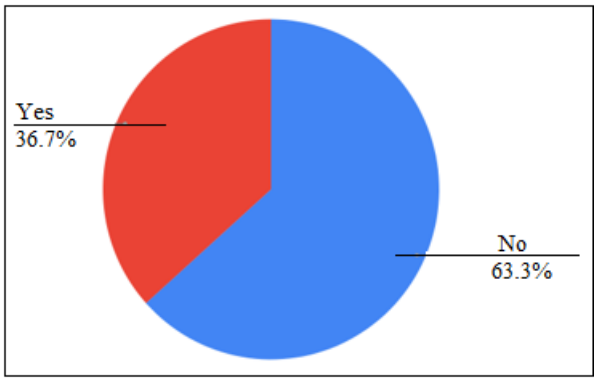

Figure 4.14: Graphical Representation of Respondents who Communicate their Problem with their seniors

From the figure 4.14, we could see that about 63.3% of the respondents never communicate their problems with their seniors,which means either they fear their seniors or they feel that sharing their problems to them does not make any sense or it may lead to further consequences.

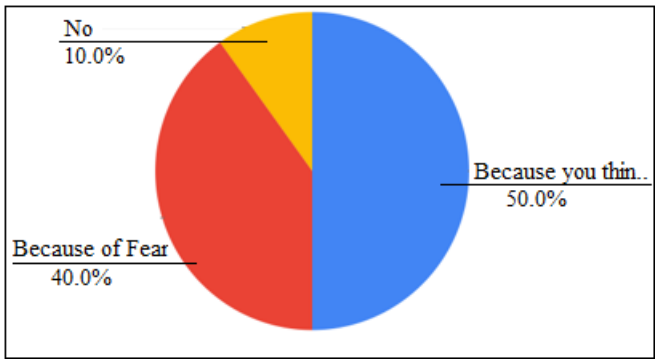

Figure 4.15: Graphical Representation of Reason Behind Non Communication of their Problems towards the Seniors

From the figure 4.15, we could see that about 50% of the respondents never communicate their problems to their seniors because they think that they wont listen to them,and other 40% of the respondent doesn't communicate their problem because of fear.

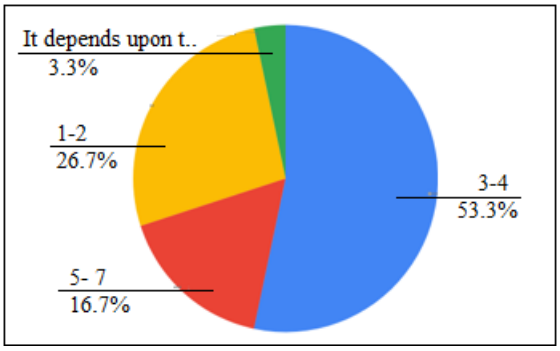

Figure 4.16: Graphical Representation of Poor Sleep of the Respondents

From figure 4.16 ,we could understand that about 53.3% of the respondents get poor sleep for 3-4 days in a week.and 26.7% of the respondents get poor sleep for 5-7 days in a week.this shows that most of the army personnels are not getting enough sleep after their heavy workouts, studies shows that sleep depreviation causes number of health problems both physicaly and mentaly and army personnels seemed to be more effected by this.

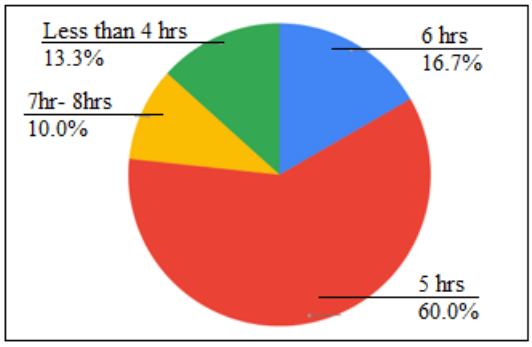

Figure 4.17: Graphical Representation of Sleeping Hours of the Respondents

From the figure 4.17, we could understand that about 60% of the respondents gets only 5 hours of sleep, and 16.7% of the respondents get 6 hours of sleep and about 13.3% of the respondents get less than 4 hours of sleep, studies shows that a normal adult individual needs 7-8 hours of sleep,it is the time where individuals body and mind rest to get recharged for the next day,but armypersonnel are not getting sufficient sleep,which indicates they are more prone to health problems.

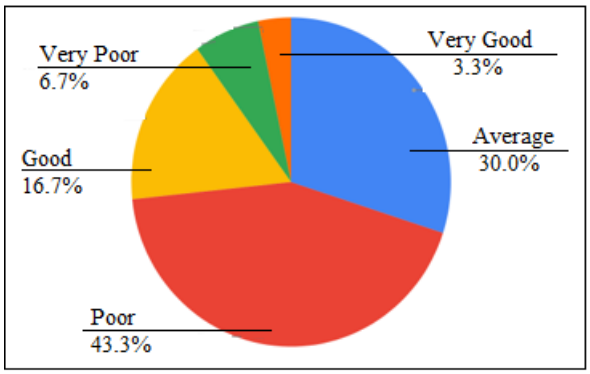

Figure 4.18: Graphical Representation of Quality of Sleep Received by the Respondents

From the figure 4.18, we could see that about 43.3% of the respondents shows that there quality of sleep is very poor and about30% of the respondents get an average sleep.

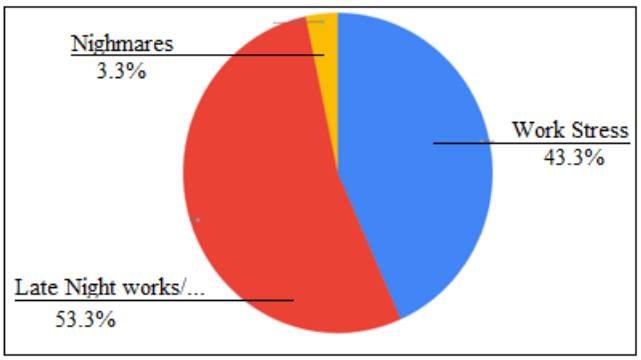

Figure 4.19: Graphical Representation of Factors that Contribute Less Sleep

From the figure 4.19, about 53.3% of the respondents experience less sleep because of late night duties and about 40% of the respondents experience less sleep because their work stress.

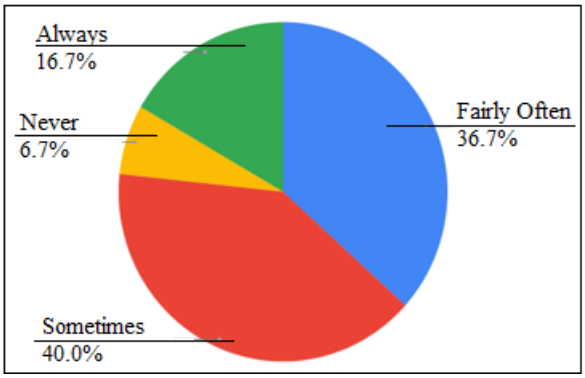

Figure 4.20: Graphical Representation of Respondents Feeling Sleepy on Day Time

From the figure 4.20, we could see that about 40% of the respondent sometimes feel sleepy and about 36.7% of the respondents feel sleepy most of the time. From figure 16 to 20 indicates the lack of sleep acquired by the respondents, which indicates that they are prone to number of health problems, like weakened immune system, memory issues, mood changes, risk of high blood pressure, risk of heart attack, poor balance, poor functioning of endocrine system.

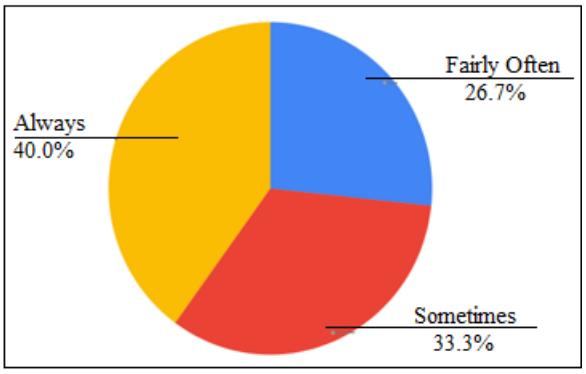

Figure 4.21: Graphical Representation of Respondents who Experience difficulty in Staying away from Home

From this 4.21, figure we could understand that about 40% of the respondents always experience difficulty from staying away from there home, and about 26.7% of the respondent experience difficulty most of the time on separation from their home.

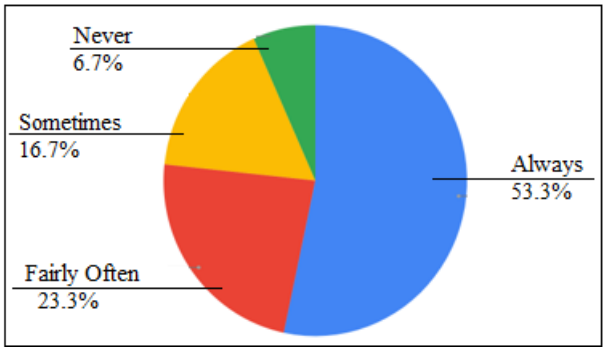

Figure 4.22: Graphical Representation of the Level of Stress Experienced by the Respondents after Completion of their Leave

From the figure 4.22 about 53.3% 0f the respondents always experience extreme stress while leaving their family after completion of their leave. And about 23.3% of the

respondent's experience stress most of the time while leaving their family apart for work.

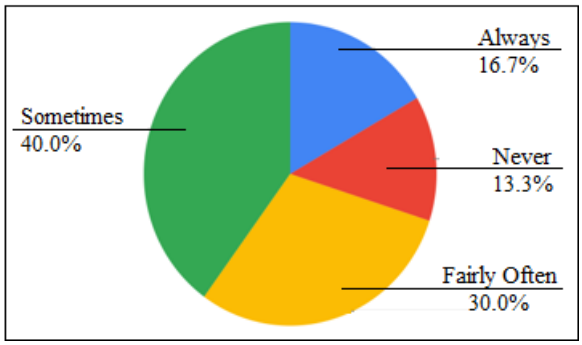

Figure 4.23: Graphical Representation of Respondents Who See Nightmares after Leaving their Family for Work

From the figure 4.23, we could understand that about 16.7% of the respondents see nightmares after leaving their family, and about 30% of the respondents see nightmares most of the time. This shows the level of separation anxiety face by the army personnel.

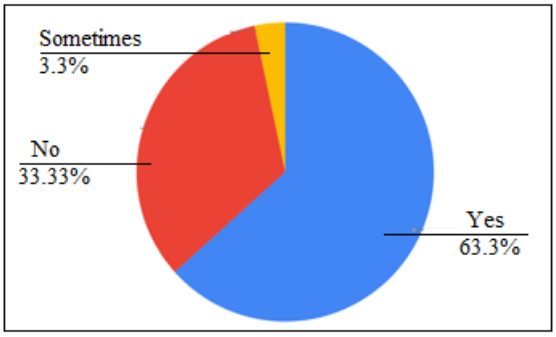

Figure 4.24: Graphical Representation of Respondent who Experience difficulty to Live with New Place

From the figure 4.24, about 63.3% of the respondent says that they experience difficulty to live in new places, which shows that most of the army personnel's have adjustmental problem.

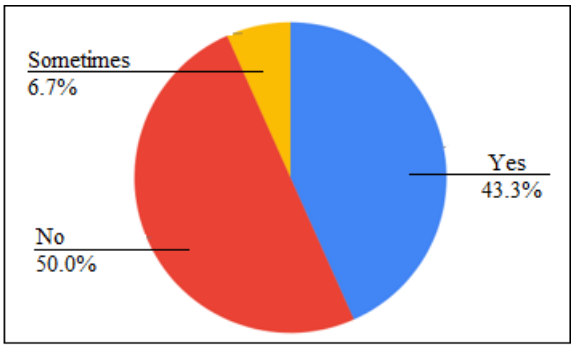

Figure 4.25: Graphical Representation of Respondents Who Experience Difficulty to Live with New People.

From the figure 4.25, about 43.3% of the respondent experience difficulty to live with new people.

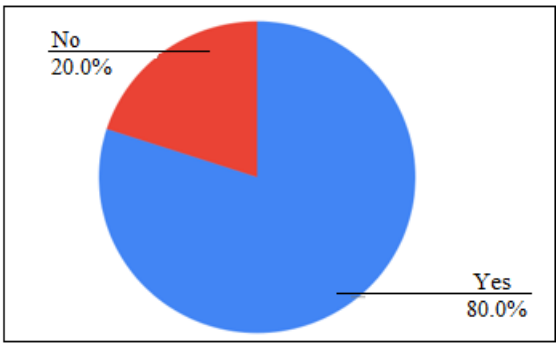

Figure 4.26: Graphical Representation of Respondents who Experience Difficulty to Live in Extreme Weather Condition

From the figure 4.26, about 73.3% of the army personnel's experience difficulty to live in extreme weather condition.

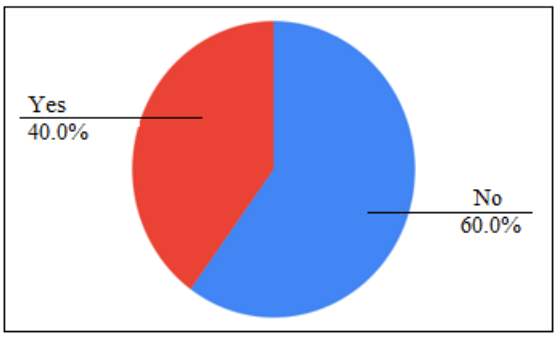

Figure 4.27: Graphical Representation of the Availability of the Counsellor in their Unit.

From the figure 4.27, we could see about 60% of the respondent don't have counsellor in their unit. which means they don't have anyone to share their problem and to find solutions.

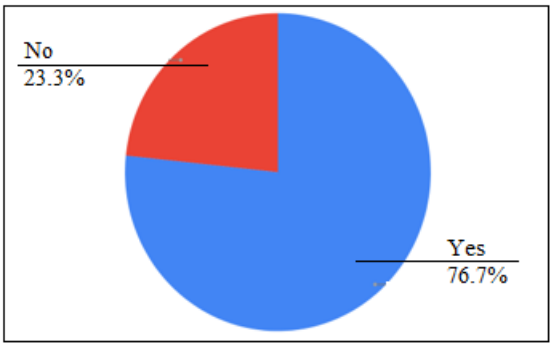

Figure 4.28: Graphical Representation of Respondents Who Need Counsellor in their Unit

From the figure 4.28 about 76.7% of the respondents feel that there is a need for counsellor in their unit, which shows that most of the army personnel's face problems and they wish to have someone to listen and to find solution for their problems.

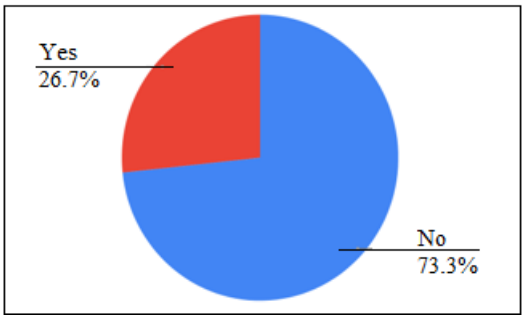

Figure 4.29: Graphical Representation of Respondents who have psychologist in their Unit

From the figure 4.29, about73.3% of the psychologist don't have psychologist in their unit.

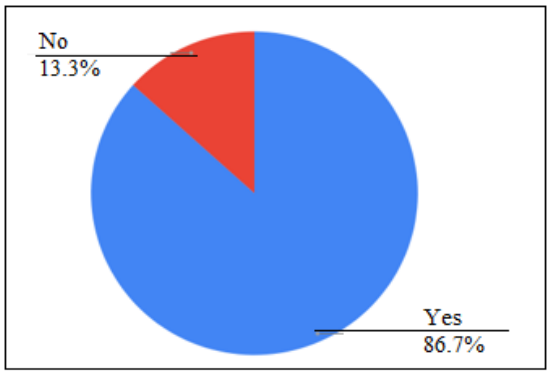

Figure 4.30: Graphical Representation of Respondent who Need Psychologist in their Unit

From the figure 4.30, about 86.7% of the army personnel's need psychologist in their unit, which shows that most of the army personnel's need someone to provide psychotherapies to cope with their problem to find relief, and to find solution for their problems.

8. Findings, Suggestions and Conclusion

8.1 Findings

- Most of the respondents belongs to sepoy rank which is the lowest rank in noncommissioned rank of Indian army, since they belong to the lowest rank, they are more prone to face punishments and humiliating remarks from the seniors.
- Most of the respondents are currently serving in northern part of India, where 73.3% of the respondents find difficulty to live in extreme weather condition and 63.3% of the respondent's experience difficulty to live in new places, which indicates the adjust mental problem faced by the army personnel'
- About 40% of the respondent always experience difficulty to live away from their home for several months and 53.3% of the respondent experience extreme stress before leaving their home and family after completion of their leave. and 40% of the respondent suffer from nightmares after being separated from their family, these indicates the presence of separation anxiety among the army personnel's.
- About 43.3% of the respondent present their quality of sleep as poor, 60% of the respondents gets only 5 hours of sleep after their heavy workout and duties, which shows that army personnel are experiencing sleep deprivation, so they are prone to many sleep related health problems.
- About 83.3% of the respondent received punishment because of others fault and about 66.7% of the respondents received humiliating remarks from the seniors which lead them to intense stress and aggression among the individuals. studies show that depending on the personality traits of the individual, individual with aggressive attitude suffering from chronic stress are prone to commit fratricide and the individual with depressive tendencies are prone to commit suicide.
- Most of the army personnel doesn't communicate their problem with their seniors because of fear, and about 50% of the respondent think that they won't listen to them, this shows the communication gap with the superiors.
- About 76.7% of the respondent feels that there is a need of counsellor in their unit and about 86.7% of the respondent need the help of psychologist in their unit. This response shows that they are facing difficulties due to work related stress and they are need of counsellors and psychologist to help them for providing psycho therapies and counselling

8.2 Suggestions

- Communication gap between the soldiers and superiors should be removed, they should be able to freely communicate their problem with the seniors.
- Purposeful leave application of the soldiers should be considered.
- Unreasonable punishments and humiliating remarks should be avoided.
- Mental health of the army personnel's must be a priority, there is a need of counsellors in each unit.
- Military psychologists are needed to tackle the stress of the individuals in the army.
- The army should undertake more regular psychiatric evaluations of personnel and intervene if required.

8.3 Conclusion

From this research it is clear that army personnel are experiencing many work-related difficulties and problems. Indian army is not giving importance to mental health as much as physical health of the individuals. both physical and mental health are connected to each other and problems in their mental health also effects their physical health, an article from times of India released in January 9th 2021 says that over 50% of army men are under severe stress and forces are losing more soldiers every year due to suicides and fratricides. suicides and fratricides do not happen all of a sudden before making these attempt individuals will be going through lots of mental imbalances those individual with aggressive attitude suffering from chronic stress are prone to commit fratricide and those individual with depressive tendencies are prone to commit suicides. Many factors such as denial of leave at the required time, inappropriate punishment, humiliating remarks all these are factors responsible for many fratricides and suicides. From this research it is clear that most of the respondent experience many kinds of difficulties that disturb their mental health, and they are in need of counsellors and psychologist to provide counselling and psychotherapies

to improve their mental health.

Declaration by the student

This is to certify that the project titled Psychosocial challenges among by young adults serving in Non-commissioned rank of Indian army in (Kannur district) is carried out independently by me under the guidance of MS. Evangeline Supriya. This work is an original one and has not been submitted earlier to any University or any other Institution for the fulfillment of the requirement of course study or any other credential.

Undertaking

I hereby give an undertaking that the data reported in the present research project work, which is an outcome of original study carried out under the guidance of MS. Evangeline Supriya towards the in-house project as a part of the curriculum of MSC Psychology, CDOE, Jain (Deemed-to-be-University), Bengaluru, during 2021-2023, is here by submitted to the Student Research Development Cell, Jain (Deemed-to-be- University), Bengaluru. Further, this research work will not be used for any publication, conference presentation without a written approval from the Project Guide and Director, MSC Psychology, CDOE, Jain (Deemed-to-be- University), Bengaluru.

Acknowledgement

I am deeply indebted to Dr. CHENRAJ ROYCHAND, President, Jain (Deemed-to-be-University) Trust, Bengaluru, for having admitted me to undergo the MSC Post-Graduation course during the academic term 2021- 2023 in the temple of learning.

I am honoured to thank Dr. H. Muralidharan, Director, CDOE, Jain (Deemed-to-be-University), Bengaluru, for having admitted me to undergo the MSC Post-Graduation course during the academic year 2021-2023.

I am pleased to thank Prof. N. BALASUBRAMANYA, Deputy Director, CDOE, Jain (Deemed-to-be- University), Bengaluru, for having admitted me to undergo the MSC Post-Graduation course during the academic year 2021-2023.

I take this opportunity to express my gratitude to Dr. ARVIND KUMAR, Controller of Examiner, CDOE, Jain (Deemed-to-be University), Bengaluru, for his valuable guidance and support for the successful completion of project work.

I take this opportunity to express my profound thanks to my guide MS. Evangeline Supriya

Department of Psychology - P.G. Studies, Jain (Deemed-to-be-University), Bengaluru, for her/his valuable guidance and support for the successful completion of project work.

I am very thankful to my family and friends for their constant encouragement and support.

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Appendix

Questionnaire

1) In which rank do you belong?
2) Age
3) Current service place?
4) Married?
5) How many years you have been serving in Indian army?
6) You choose Army as your carrier because of Your own interest/because of others opinion/End up in army in

search of different job
7) Have you ever got punished because of other's fault?
8) What do you feel at that moment?
9) Do you received humiliating remarks from the seniors?
10) If so, what do you feel at that time?
11) Do you ever wish to quit your job?
12) Do you ever wish to have another job other than army?
13) Does your purposeful leave application ever got denied?
14) What do you feel at that moment?
15) Do you got posted to high altitude areas?
16) What were the major difficulties you faced there?
17) Do you ever communicate your problem with your senior?
18) If not, why?
19) How many nights do you think you got poor sleep in a week?
20) How many hours of sleep do you get in 24 hours?
21) In your opinion, how would you rate your quality of sleep?
22) In your opinion, which among the following contribute to your lack of sleep: work stress/late night duties/nightmares/others.
23) How often do you feel sleepy in day time while working?
24) Have you experience difficulty in staying away from home for several month in a year?
25) Have you experience extreme stress before leaving your family after completion of your leave?
26) Have you suffered from nightmares after being separated from your family for work? :
27) Do you find difficulty to live with new peoples?
28) Do you find difficulty to live with new peoples?
29) Do you find difficulty to live in extreme weather conditions?
30) Does your unit have counsellor?
31) If no, do you feel that there is a need of counsellor?
32) Does your unit have psychologist?
33) If no, do you feel that there is a need of psychologist?