

## CHAPTER - VI

# SUMMARY AND CONCLUSIONS

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Health is a multidimensional one. The WHO definition of health implies the notion of perfect functioning of the body. It conceptualizes health biologically, as a state in which every cell and every organ is functioning at optimum capacity and in perfect harmony with the rest of the body.

Mental health has been defined as a state of balance between the individual and the surrounding world, a state of harmony between oneself and other people and that of the environment.

Social health implies harmony and integration with the individual, between each individual and other member of society and between individuals and the world in which they live. It has been defined as the quantity of an individual interpersonal tie of involvement with the community.

It is well known fact that economic development plays an important role in human progress but it alone is not human progress. Social indicators is a real picture as they record fundamental human progress whereas rising GNP, after certain point, it is directed to less and less fundamental improvements in the quality of life UNICEF (1989). The quality of life of the people can best be indicated by health knowledge in terms of child mortality rate, life expectancy, access to safe and clean drinking water, adult literacy rate, and the proportion of children suffering from malnutrition and the like.

Recent research in the area of preventive health care has provided knowledge and techniques which are simple, inexpensive, universal and free from cultural prejudices. The information and techniques are so effective that malnutrition and illness, death and disability can be significantly reduced.

The low health status in India is reflected in health related issues, particularly in relation to younger generation. Therefore, the measures for improving the health status of the community should necessarily be directed to these important groups of population. Obviously, the education may prove to be effective in doing this job. If children are to grow in to health and well adjusted adults, the most essentials things is that they need a good start in life. The early stages of development are very important from the point of growth. The learners in schools or colleges need to be instructed about health disease that makes one informative and prepares the youth to cope and combat health hazards.

The self-concept is the accumulation of knowledge about the self, such as beliefs regarding personality traits, physical characteristics, abilities, values, goals, and roles. Beginning in infancy, children acquire and organize information about them as a way to enable them to understand the relation between the self and their social world. This developmental process is a direct consequence of children's emerging cognitive skills and their social relationships with both family and peers. In childhood and adolescence, the self-concept becomes more abstract, complex, and hierarchically organized

into cognitive mental representations or self-schemas, which direct the processing of self-relevant information.

The attention of psychologists and educators for quite some time has been attracted to study the 'Self' and 'Self-concept'. It has been recommended that the on the whole performance of a teacher in the class-room is largely dependent on his self-concept. Accordingly it has been stressed that the total effectiveness in work is to a very considerable degree influenced by the self-concept. An insightful person can correct his faulty 'self-concept' through self-evaluation, constant watch and observation upon his own behaviour, self-discipline, intellectual-discipline, suggestions from others and by twittering into his own self images for sensible evaluation. It needs hardly any stating that a realistic 'self-concept' helps a person to grow professionally and also helps in proper emotional adjustment with his environment.

Emotional intelligence is essential to succeed. The idea of emotional intelligence has inspired research and curriculum development. Researchers have concluded that people who manage their own feelings well and deal effectively with others, are more likely to live content lives. Happy people are more apt to retain information and do so more effectively than dissatisfied people.

Building one's emotional intelligence has a lifelong impact. Many parents and educators, alarmed by increasing levels of conflict in young school children from low self-esteem to early drug and alcohol use to depression, are rushing to teach students the skills necessary for emotional

intelligence. And in corporations, the inclusion of emotional intelligence in training programs has helped employees cooperate better and motivate more, thereby increasing productivity and profits.

Emotional intelligence is a powerful and at times more powerful than intelligence quotient which contributes only about 20% of success in life, the other forces contribute the rest. Unlike intelligence quotient emotional intelligence may be the best predictor of success in life.

Therefore, the present study attempts to assess the effect of self-concept and emotional intelligence on the mental health of rural and urban students selected from various colleges. Further, the study also examines the effect of domicile, gender and other demographic factors on mental health status of the sample groups. For the purpose data were collected using suitable tests and using appropriate statistical methods results were analyzed.

The results of the study categorically revealed that self concept and emotional intelligence have undoubtedly influenced the mental health of students. Similarly, the faculty of study exerted its influence.

### **Conclusions:**

The following are major conclusions of study:

1. There is a significant difference in all the dimensions of mental health between two groups of self concept. The sample of higher self concept has displayed significantly higher mental health than that of low self concept.

2. Emotional intelligence has produced significant differences in all the dimension of mental health. Higher the emotional intelligence greater is the mental health of student's sample.
3. There are significant differences in mental health between the students of rural and urban area. Urban students showed better mental health in all the areas than rural respondents.
4. There are significant gender differences in all the dimension of mental health. Male respondents displayed significantly higher mental health than females.
5. There are significant differences in mental health of students belonging to different faculties of study; science students have significantly higher mental health followed by commerce and arts students.
6. There are significant differences in mental health of students belonging to different religions. Christian students have significantly higher mental health than Hindu and Muslim students in total mental health POR, AUT and EM areas.
7. There is a significant impact of self concept on all the dimension of mental health (except AUT). Higher the self concept greater is the mental health.

8. Emotional intelligence has exerted its greater effect on majority of dimensions of mental health. Higher emotional intelligence promoted greater mental health in the respondents.
9. There is a significant effect of gender on all the dimensions of mental health. Male exhibited higher mental health than females.
10. Faculty of study has a greater impact on all the dimensions of mental health of the sample. Science faculty is found to promote higher mental health followed by commerce and arts, in majority of the dimensions.
11. There is a significant effect of domicile on all the dimensions of mental health except POR and AUT dimensions. The urban students outscored rural in all the dimensions of mental health.
12. Religion has exerted its influence on mental health dimensions like POR, IOP and GOA.
13. There is a significant correlation between all the independent variables (except religion) and mental health dimensions.

**Limitations and Recommendations:**

The present study addressed to students especially from rural and urban background with regard to the variables studied. For the purpose the limited sample was chosen which is inadequate. Had the studied included the increased size of the sample the study would have been still more pronouncing. The religion was not a major variable in the study to examine its impact on mental health of the sample. It would have been better if the sample was also matched largely on this variable to assess its impact on mental health of the respondents. These observations will be addressed in an extended studied.

**Recommendations:**

1. The results of the study are informative in the process of promoting mental health among the youth who are the major stake holders of the country. The higher knowledge about mental health in the young generation produces more potentialities to serve to the mankind in general.
2. The results of the study can be used as a package of knowledge in order to enhance the influencing variables on the mental health of the sample of this backward region like Gulbarga.
3. The study may also imply the service to the policy makers in the process of health programme implementation.

4. The role of self concept and emotional intelligence in managing one's mental health assumes the significance from the point of student's population because the young generation is more responsible for the growth of any knowledge if mental healthy with increased emotional intelligence and of course the positive self concept.