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SUMMARY
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INTRODUCTION

Man’s interest in mental health originally stemmed from his concern for and problems with the mentally ill. The history of man’s relationship to the mentally ill has not been resplendent with deeds of kindness, examples of human treatment, or attempts to understand the true nature of the problem.

Mental health is an index which shows the extent to which the person has been able to meet environmental demands-social, emotional or physical. However, when he finds himself trapped in a situation he does not have matching coping strategies to deal with it effectively; he gets himself mentally strained. This mental strain is generally reflected in symptoms like anxiety, tension, restlessness or hopelessness among others. If it is felt for too long and too extensively by the person, these symptoms may take a definite form (or get ‘Syndromized’), representing a given illness. Mental health, therefore, should not be confused with mental illness; it is a study of pre-illness mental condition of the person. Mental health as such, represent a psychic condition which is characterized by mental peace, harmony and content. It is identified by the absence of disability and debilitating symptoms, both mental and somatic in the person.

Mental health is a global term which refers to that condition of an individual which results from the normal organization and functioning of his mind. There are factors in school and community environment that contribute to the mental health of an individual. Mental health is a combined outcome of five types of health (i) Physical (ii) Emotional (iii) Moral (iv) Spiritual and (v) Social. Mental health is an important aspect of the total health of a person because it is both cause and effect of the other types of health. It means three things of an individual, (i) Right thoughts (ii)
Right attitudes and (iii) Right actions. Mental health can also be called the process of human self-relations, self satisfaction and fully successful existence. Mental health of a person among other things, is chiefly concerned with his total sense of growth and development, adjustment and peace, success and happiness and effective membership of level or community.

In the past, many attempts have been made to find out the relationship of mental health and its correlates at different levels of education. Wig and Nagpal (1971) attempted to find out the relationship of mental health with academic achievement; Goyal (1974) and Jayaswal and Nathawat (1977) with creativity; Gupta (1980) with sub-dimensions of religiosity; Bhattacharjee (1985) with frustration, but a very few scholars have investigated the relationship of mental health with intelligence and parental behaviour. Investigation regarding the relationship of mental health to moral judgement is negligible up to the recent times.

Moral judgement is a mode of moral reasoning where persons or events are rated as good or bad (James, 1974). We have negligible scientific study on record concerning the relationship of mental health to the moral judgement of adolescents. Study by Narayanan (1978) did not explore a clear result about the relationship of both the variables.

Intelligence also helps to build up the mental health of the adolescents. Intelligence is an important factor affecting mental health of an adolescent. As compared to less intelligent individuals, the more intelligent individuals have good mental health because an intelligent person by virtue of his rational adaptiveness in solving a problem and dealing effectively with complex situations which put him in a better position to maintain his good mental health. Dutta (1981), Mangotra (1982), Sehgal (1991) indicates significant relationship between intelligence and mental health but Kaur
(1982), Mirchandani (1970) did not show significant relationship between these two variables.

Parental behaviour is of crucial significance for the development of the child’s personality as a whole and is a factor of great consequence in the development of his mental health. Two types of parental behaviours, i.e., rejecting behaviour and accepting behaviour have been of special interest to research workers and this study was also related to the relationship of parental behaviour and mental health.

The studies done by Reer and Lutkins (1967), Neumeyer (1968), Hetherington, Cox and Cox (1977), John and Perry (1977) and Parikh (1975) have highlighted that one parent families are full of high mental disorder, hostility, insecurity and social isolation and thus provide different type of home environment to their children which is not conducive for growing the ability of moral judgement of the child.


The problem of the present study was to investigate the empirical relationship between the mental health of late adolescents with parental behaviour, intelligence and moral judgement. The field of mental health was chosen for research because of its exceeding importance in human life and also because mental health is deemed to be the great goal of education all over the world. Further, the said earlier studies were not very clear and definite regarding the relationship between mental health of adolescents with parental behaviour, intelligence and moral judgement. It is in the field of adolescence that the individual’s mental health is most threatened by several kinds of inner and outer forces. The heightened needs for self-
acceptance, personal identity, independence and social recognition in adolescents tend to put severe pressures on the mind of the individual.

**STATEMENT OF THE PROBLEM**

"MORAL JUDGEMENT, INTELLIGENCE AND PARENTAL BEHAVIOUR AS CORRELATES OF MENTAL HEALTH."

**OBJECTIVES**

1. (a) To find out the relationship of mental health with moral judgement, intelligence and parental behaviour of school adolescents.
   (b) To study the relationship of moral judgement, intelligence and parental behaviour with high level of mental health.
   (c) To study the relationship of moral judgement, intelligence and parental behaviour with average level of mental health.
   (d) To study the relationship of moral judgement, intelligence and parental behaviour with low level of mental health.

2. (a) To find out the differences among the school adolescents at different levels of mental health (MH₁, MH₂ and MH₃) in respect of such correlates as moral judgement, intelligence and parental behaviour.
   (b) To find out the differences among the male adolescents at different levels of mental health (MH₁, MH₂ and MH₃) in respect of such correlates as moral judgement, intelligence and parental behaviour.
   (c) To find out the differences among the female adolescents with regard to moral judgement, intelligence and parental behaviour for each of the three levels of mental health.
   (d) To find out the differences between male and female adolescents at different levels of mental health (MH₁, MH₂ and MH₃) in
respect of such correlates as moral judgement, intelligence and parental behaviour.

3. (a) To find out the differences between Government and Private school adolescents with regard to moral judgement, intelligence and parental behaviour for each of the three levels of mental health.

(b) To find out the differences among Government school adolescents with regard to moral judgement, intelligence and parental behaviour for each of the three levels of mental health (MH₁, MH₂ and MH₃).

(c) To find out the differences among Private school adolescents at different levels of mental health (MH₁, MH₂ and MH₃) in respect of such correlates as moral judgement, Intelligence and parental behaviour.

4. (a) To find out the differences among male adolescents of Government schools at different levels of mental health, i.e., MH₁, MH₂ and MH₃ in respect of such correlates as moral judgement, intelligence and parental behaviour.

(b) To find out the differences among female adolescents of Government schools with regard to moral judgement, intelligence and parental behaviour for each of the three levels of mental health (MH₁, MH₂ and MH₃).

(c) To find out the differences between male and female adolescents of Government schools at different levels of mental health, i.e., MH₁, MH₂ and MH₃ in respect of such correlates as intelligence, parental behaviour and moral judgement.

5. (a) To find out the differences among male adolescents of Private schools with regard to moral judgement, intelligence and parental behaviour for each of the three levels of mental health (MH₁, MH₂ and MH₃).
To find out the differences among female adolescents of Private schools at different levels of mental health, i.e., MH
h, MH
a and MH
i in respect of such correlates as moral judgement, intelligence and parental behaviour.

to find out the differences between male and female adolescents of Private schools with regard to moral judgement, intelligence and parental behaviour for each of the three levels of mental health (MH
h, MH
a and MH
i).

To find out the differences between male adolescents of Government and Private schools at different levels of mental health, i.e., MH
h, MH
a and MH
i in respect of such correlates as moral judgement, intelligence and parental behaviour.

To find out the differences between female adolescents of Government and Private schools with regard to moral judgement, intelligence and parental behaviour for each of the three levels of mental health (MH
h, MH
a and MH
i).

To find out certain predictors which will forecast the variance towards mental health of adolescents contributed by major correlates such as moral judgement, intelligence and parental behaviour.

To find out certain predictors which will forecast the variance towards high level of mental health of adolescents contributed by major correlates such as moral judgement, intelligence and parental behaviour.

To find out certain predictors which will forecast the variance towards average level of mental health of adolescents contributed by major correlates such as moral judgement, intelligence and parental behaviour.

To find out certain predictors which will forecast the variance towards low level of mental health of adolescents contributed by
major correlates such as moral judgement, intelligence and parental behaviour.

HYPOTHESIS

1. (a) There would be significant positive relationship of mental health with moral judgement, intelligence and parental behaviour of school adolescents.

(b) There would be significant positive relationship of moral judgement, intelligence and parental behaviour of school adolescents with high level of mental health.

(c) There would be significant positive relationship of moral judgement, intelligence and parental behaviour of school adolescents with average level of mental health.

(d) There would be significant positive relationship of moral judgement, intelligence and parental behaviour of school adolescents with low level of mental health.

2. (a) Significant mean differences would be there among the school adolescents at different levels of mental health ($MH_b$, $MH_a$ and $MH_i$) in respect of such correlates as moral judgement, intelligence and parental behaviour.

(b) Significant mean differences would be there among the male adolescents at different levels of mental health ($MH_b$, $MH_a$ and $MH_i$) in respect of such correlates as moral judgement, intelligence and parental behaviour.

(c) Significant mean differences would be there among the female adolescents with regard to moral judgement, intelligence and parental behaviour for each of the three levels of mental health.

(d) Significant mean differences would be there between male and female adolescents at different levels of mental health ($MH_b$, $MH_a$, $MH_i$).
MH₄ and MH₅) in respect of such correlates as moral judgement, intelligence and parental behaviour.

3. (a) Significant mean differences would be there between Government and Private school adolescents with regard to moral judgement, intelligence and parental behaviour for each of the three levels of mental health.

(b) Significant mean differences would be there among Government school adolescents with regard to moral judgement, intelligence and parental behaviour for each of the three levels of mental health (MH₄, MH₅, and MH₆).

(c) Significant mean differences would be there among Private school adolescents at different levels of mental health (MH₄, MH₅, and MH₆) in respect of such correlates as moral judgement, intelligence and parental behaviour.

4. (a) Significant mean differences would be there among male adolescents of Government schools at different levels of mental health, i.e., MH₄, MH₅, and MH₆ in respect of such correlates as moral judgement, intelligence and parental behaviour.

(b) Significant mean differences would be there among female adolescents of Government schools with regard to moral judgement, intelligence and parental behaviour for each of the three levels of mental health (MH₄, MH₅, and MH₆).

(c) Significant mean differences would be there between male and female adolescents of Government schools at different levels of mental health, i.e., MH₄, MH₅, and MH₆ in respect of such correlates as moral judgement, intelligence and parental behaviour.

5. (a) Significant mean differences would be there among male adolescents of Private schools with regard to moral judgement,
intelligence and parental behaviour for each of the three levels of mental health (MH\(_h\), MH\(_a\) and MH\(_i\)).

(b) Significant mean differences would be there among female adolescents of Private schools at different levels of mental health, i.e., MH\(_h\), MH\(_a\) and MH\(_i\) in respect of such correlates as moral judgement, intelligence and parental behaviour.

(c) Significant mean difference would be there between male and female adolescents of Private schools with regard to moral judgement, intelligence and parental behaviour for each of the three levels of mental health (MH\(_h\), MH\(_a\) and MH\(_i\)).

6. (a) Significant mean differences would be there between male adolescents of Government and Private school at different levels of mental health, i.e., MH\(_h\), MH\(_a\) and MH\(_i\) in respect of such correlates as moral judgement, intelligence and parental behaviour.

(b) Significant mean differences would be there between female adolescents of Government and Private schools with regard to moral judgement, intelligence and parental behaviour for each of the three levels of mental health (MH\(_h\), MH\(_a\) and MH\(_i\)).

7. (a) Significant variance towards mental health of school adolescents would be contributed by major correlates such as moral judgement, intelligence and parental behaviour.

(b) Significant variance towards high level of mental health of school adolescents would be contributed by major correlates such as moral judgement, intelligence and parental behaviour.

(c) Significant variance towards average level of mental health of school adolescents would be contributed by major correlates such as moral judgement, intelligence and parental behaviour.
(d) Significant variance towards low level of mental health of school adolescents would be contributed by major correlates such as moral judgement, intelligence and parental behaviour.

DELIMITATIONS

1. The present study would be delimited to adolescents studying in class X.
2. A restricted sample of 250 adolescents would be considered from Government schools and 250 from Privately managed Punjabi medium schools of Ludhiana Distt. (Punjab).
3. The study would be delimited to such variables as moral judgement, intelligence and parental behaviour.
4. The present study would be delimited to only accepting behaviour of parents.

SAMPLE

Sampling may be defined as the process of obtaining information about an entire population by examining only a part of it. Generally, the researchers select only a part of the whole population which can act as representative of the population and is called sample.

Various techniques have been devised for obtaining a sample which represents its population. The adequacy of a sample (i.e., its lack of bias) depend upon our knowledge of the population as well as upon the method used in drawing the sample. Commonly used sampling methods are random sampling, stratified or quota, incidental and purposive sampling. In the present study random sampling was used.

The random sampling technique was employed in the present study due to heterogeneous characteristics of the population and according to the purpose of the study. The criteria for randomization in sample are met when every individual in the population has the same chance of being chosen for
the sample and when selection of one individual or thing has no influence on the choice of another.

The sample of the present study was drawn from ten high/ Senior Secondary Government and Privately managed Punjabi medium schools of Ludhiana District. Five Government and five privately managed Punjabi medium high/ Senior Secondary schools were randomly selected. From each school 60 adolescents (30 females and 30 males) were taken up randomly. The original sample comprised 600 adolescents out of whom 500 were retained for the analysis; others had to be ignored because complete data about them was not available. Out of the total sample of 500 adolescents, 250 adolescents were selected each from Government and Private schools respectively. Out of 250 Government school adolescents, 125 females and 125 males were selected. Similarly, out of 250 Private school adolescents, 125 were females and 125 were males.

**DESIGN OF THE STUDY**

The Present study was descriptive survey, which was conducted on 500 Government and Privately managed Punjabi medium school adolescents of Ludhiana District studying in class X. The study was conducted in different phases.

Phase I: During the first phase the investigator classified the sample into three categories of mental health, i.e., high (MHₜ), average (MHₐ) and low (MHₙ). The classification was done on the basis of Kelley’s (1939) criteria of top and bottom 27% cases. Top 27% cases were considered as falling into high mental health level (MHₜ) while the bottom 27% cases were considered as falling into low mental health (MHₙ). The rest of the adolescents were regarded as having average mental health level (MHₐ).

Phase II: In second phase of the study, the investigator measured such variables as moral judgement, intelligence and parental behaviour. In
the present study the techniques of correlational analysis and regression analysis were employed. In order to find out the nature and the extent of relationship of moral judgement, intelligence and parental behaviour with mental health product-moment correlations and regression equations were worked out.

The t-ratios were worked out to find the differences at different levels of mental health. Later on, multistage analysis of these correlates with mental health was done. A diagrammatic representation of the design of the study is shown in Figure 4.1.

TOOLS USED

The following tools were used to collect data:


PROCEDURE OF DATA COLLECTION

Prior to the administration of the Mental Health Battery, Group Test of General Mental Ability, Parental Behaviour Differential and Moral Judgement Test in every school, the investigator sought the co-operation of the heads of the institutions and teachers. First of all, the purpose of tests was clarified to the students and rapport was established with them. Then Mental Health Battery by Singh and Gupta was administered according to the instructions given in the manual. The time limit for the test is 35 minutes. After getting the response sheets and questionnaires of this test, students were asked to take rest for 5 minutes and then, the Group Test of General Mental Ability was administered to them. Instructions were given to them. Time limit was 25 minutes. After getting the response sheets and
questionnaires of the test students were asked again to take rest for 5 minutes and then, the Parental Behaviour Differential was administered to them. Like other tests instructions were given to them and the time limit for this test was not fixed. However, generally a normal examinee takes about 10 minutes in giving complete answers. After completion of this test students were again asked to take a rest for 5 minutes. After that the Moral Judgement Test was administered to them by giving instructions to them according to the manual. Time limit for this test was 35 minutes.

The tool Mental Health Battery by Singh and Gupta, (1983) was scored with help of scoring-key. The answers of these items (in each part) which tallied with the answers given in the scoring key were given a score of +1. If they did not tally, they were given a score of zero.

The scoring of Group Test of General Mental Ability by Jalota and Singh, (1982) was done by giving weightage of one point if the response was correct and no or zero weightage was given if the responses was wrong.

The scoring of Parental Behaviour Differential by Kaur (1989) was done by scoring stencil. A weightage of one point was given if the responses of the subject reflected parental acceptance and zero weightage was given if the responses reflected parental rejection.

The scoring of Moral Judgement test by Rani (1991) was also done by scoring key. Each correct answer has been assigned a score of one and an incorrect answer a value of zero and in this way, the total score obtained by a student is the total number of his correct responses.

**STATISTICAL TECHNIQUES USED**

Descriptive statistics such as mean and S.D. were computed. Coefficient of correlation, multiple regression and t-values were computed to test the hypotheses.
CONCLUSIONS

The analysis and interpretation of results presented in this chapter leads to the following conclusions:

1. (a) A significant positive relationship of mental health with moral judgement, intelligence and parental behaviour of school adolescents was found. Further, a significant positive relationship of moral judgement with intelligence and parental behaviour was found. Similarly, a significant positive relationship of parental behaviour with intelligence was found.

(b) A significant positive relationship of moral judgement, intelligence and parental behaviour with high level of mental health was found. Further, a significant positive relationship of intelligence and parental behaviour with moral judgement of school adolescents with high level of mental health was found. In addition, no significant relationship of parental behaviour with intelligence of school adolescents with high level of mental health was found.

(c) A significant positive relationship of moral judgement and parental behaviour with average level of mental health was found but there is no significant relationship of intelligence with average level of mental health. Further, a significant positive relationship of intelligence and parental behaviour with moral judgement of school adolescents with average level of mental health was found. Similarly, intelligence also significantly related to parental behaviour.

(d) A significant positive relationship of moral judgement with low level of mental health was found but intelligence and parental behaviour had no significant relationship with low level of mental health. Further, moral judgement of school adolescents with low level of mental health was significantly related to intelligence and parental
behaviour. In addition, intelligence of school adolescents with low level of mental health was not related to parental behaviour.

2 (a) A significant difference was found among the school adolescents at different levels of mental health regarding their moral judgement, intelligence and parental behaviour. This implies that school adolescents with high level of mental health were higher in moral judgement, intelligence and more accepted by their parents from the adolescents with average and low level of mental health. Likewise, adolescents with average level of mental health were higher in moral judgement, intelligence and more accepted by their parents from those with low level of mental health.

(b) A significant difference was found among the male adolescents at different levels of mental health regarding their moral judgement, intelligence and parental behaviour. This implies that the male adolescents with high level of mental health were higher in moral judgement, intelligence and more accepted by their parents from the male adolescents with average and low level of mental health. Similarly, male adolescents with average level of mental health were higher in moral judgement, intelligence and more accepted by their parents from those with low level of mental health.

(c) A significant difference was found among the female adolescents with regard to moral judgement, intelligence and parental behaviour at all the three levels of mental health. This implies that the female adolescents with high level of mental health were higher in moral judgement, intelligence and more accepted by their parents from the female adolescents with average and low level of mental health. Likewise, female adolescents with average level of mental health were higher in moral judgement, intelligence and more accepted by their parents from those with low level of mental health.
A significant difference was found between male and female with high level of mental health in moral judgement and intelligence but they do not differ significantly in parental behaviour. It means female adolescents were higher in moral judgement as compared to their male counterparts whereas male adolescents were higher in intelligence as compared to female adolescents. Further, a significant difference was found between male and female adolescents with average level of mental health regarding moral judgement but they do not differ in intelligence and parental behaviour. This indicates that female adolescents were higher in moral judgement as compared to their male counterparts. In addition no significant difference was found between male and female adolescents with low level of mental health in moral judgement, intelligence and parental behaviour.

A significant difference was found between Private and Government school adolescents with high level of mental health in intelligence and parental behaviour but they do not differ significantly in moral judgement. This reveals that Private school adolescents with high level of mental health were higher in intelligence as well as in parental behaviour as compared to Government school adolescents with high level of mental health. Further, a significant difference was found between Private and Government school adolescents with average level of mental health in parental behaviour but they do not differ in moral judgement and intelligence. These findings implies that Private school adolescents with average level of mental health were more accepted by their parents as compared to Government school adolescents. In addition, a significant difference was found between Private and Government school adolescents in moral judgement but they do not differ in intelligence and parental behaviour. This reveals that Government school adolescents with
low level of mental health were higher in moral judgement as compared to Private school adolescents.

(b) A significant difference was found among Government school adolescent students at different levels of mental health in moral judgement, intelligence and parental behaviour except in moral judgement of Government school adolescents with average and low levels of mental health. It implies that Government school adolescents with high level of mental health were higher in moral judgement, intelligence and more accepted by their parents as compared to Government school adolescents with average and low level of mental health. Similarly, Government school adolescents with average level of mental health were higher in intelligence and more accepted by their parents as compared to Government school adolescents with low level of mental health.

(c) A significant difference was found among Private school adolescents at different levels of mental health in moral judgement, intelligence and parental behaviour. This implies that the Private school adolescents with high level of mental health were higher in moral judgement, intelligence and more accepted by their parents from the Private school adolescents with average and low level of mental health. Likewise, Private school adolescents with average level of mental health were higher in moral judgement, intelligence and more accepted by their parents from those with low level of mental health.

4.(a) A significant difference was found among male adolescents of Government schools with high and average level of mental health in intelligence but they do not differ in moral judgement and parental behaviour. This implies that Government school male adolescents with high level of mental health were higher in intelligence as compared to those with average level of mental health. Further, a
significant difference was found among Government school male adolescents with high and low level of mental health in intelligence and parental behaviour but they do not differ in moral judgement. This reveals that Government school male adolescents high level of mental health were higher in intelligence and more accepted by their parents from those with low level of mental health. In addition, a significant difference was found among Government school male adolescents with average and low level of mental health in intelligence but they do not differ in moral judgement and parental behaviour. This indicates that Government school male adolescents with average level of mental health were higher in intelligence as compared to those with low level of mental health.

(b) A significant difference was found among female adolescents of Government schools with high and average level of mental health in intelligence but they do not differ in moral judgement and parental behaviour. It means that Government school female adolescents with high level of mental health were higher in intelligence as compared to those with average level of mental health. Further, a significant difference was found among Government school female adolescents with high and low level of mental health in intelligence and parental behaviour but they do not differ in moral judgement. This reveals that Government school female adolescents with high level of mental health were higher in intelligence as well as more accepted by their parents from those with low level of mental health. In addition, a significant difference was found among Government school female adolescents with average and low level of mental health in intelligence and parental behaviour but they do not differ in moral judgement. This indicates that Government school female adolescents with average level of mental health were higher in intelligence as well as more accepted by their parents from those with low level of mental health.
intelligence and more accepted by their parents as compared to those with low level of mental health.

(c) No significant difference was found between male and female adolescents of Government schools at all the three levels of mental health in moral judgement, intelligence and parental behaviour except in moral judgement of Government school male female adolescents with average level of mental health. It means that Government school female adolescents with average level of mental health were higher in moral judgement as compared to their male counterparts.

5.(a) A significant difference was found among Private schools male adolescents at different levels of mental health in moral judgement, intelligence and parental behaviour except in moral judgement of Private school male adolescents with high and average level of mental health. It implies that Private school male adolescents with high level of mental health were higher in intelligence and more accepted by their parents from those with average and low level of mental health. Further, Private school male adolescents with high level of mental health were higher in moral judgement from those with low level of mental health. In addition, Private school adolescents with average level of mental health were higher in moral judgement, intelligence and more accepted by their parents as compared to those with low level of mental health.

(b) A significant difference was found among Private schools female adolescents at different levels of mental health in moral judgement, intelligence and parental behaviour. This indicates that Private school female adolescents with high level of mental health were higher in moral judgement, intelligence and more accepted by their parents as compared to those with average and low level of mental health.
health. Similarly, Private school female adolescents with average level of mental health were higher in moral judgement, intelligence and more accepted by their parents from those with low level of mental health.

(c) No significant difference was found between male and female adolescents of Private schools at different levels of mental health in moral judgement, intelligence and parental behaviour except in moral judgement of male and female Private schools adolescents with high level of mental health. It means that Private school female adolescents with high level of mental health were higher in moral judgement as compared to their male counterparts.

6.(a) A significant difference was found between intelligence of Government and Private school male adolescents with high level of mental health but they do not differ in moral judgement and parental behaviour. This reveals that Private school male adolescents with high level of mental health were higher in intelligence as compared to Government school male adolescents with high level of mental health. Further, a significant difference was found between Government and Private school male adolescents with average level of mental health in parental behaviour but they do not differ in moral judgement and intelligence. It means that Private school male adolescents with average level of mental health were more accepted by their parents as compared to Government school male adolescents. In addition, a significant difference was found between Government and Private school male adolescents with low level of mental health in moral judgement but they do not differ in intelligence and parental behaviour. It indicates that Government school male adolescents with low level of mental health were higher in moral judgement than Private school male adolescents.
(b) A significant difference was found between Government and Private school female adolescents with high level of mental health in moral judgement and intelligence but they do not differ significantly in parental behaviour. This indicates that Private school female adolescents with high level of mental health were higher in moral judgement and intelligence as compared to Government Schools female adolescents with high level of mental health. Further, no significant difference was found between Government and Private school male adolescents with average level of mental health in moral judgement, intelligence and parental behaviour. In addition, a significant difference was found between Government and Private school female adolescents with low level of mental health in moral judgement but they do not differ significantly in intelligence and parental behaviour. It means Government school female adolescents with low level of mental health were higher in moral judgement as compared to Private school female adolescents.

7.(a) It was found that the moral judgement and intelligence are the causal factor in the variance of mental health of school adolescents whereas parental behaviour does not contribute to its total variance.

(b) It was found that the independent variables, i.e., intelligence and parental behaviour are not good predictors of high level of mental health whereas, moral judgement is the only causal factor in the variance of high level of mental health of school adolescents.

(c) It was found that the independent variables, i.e., moral judgement and parental behaviour are not good predictors of average level of mental health whereas, intelligence is the only causal factor in the variance of average level of mental health of school adolescents.

(d) It was found that the independent variables, i.e., intelligence and parental behaviour are not good predictors of low level of mental
health whereas, moral judgement is the only causal factors in the variance of low level of mental health of school adolescents.

EDUCATIONAL IMPLICATIONS

On the basis of results and conclusions, the following implications can be drawn. The study has revealed that moral judgement, intelligence and parental behaviour affected at all the three levels of mental health of the school adolescents. It means all these variables have a considerable effect on the mental health of all the male adolescents as well as the female adolescents. Therefore, there is a dire need for the teachers and educators to take care of the moral judgement, intelligence and parental behaviour of the students.

Difference was found at all the three levels of mental health differently, among the Government and Private School adolescents regarding their moral judgement, intelligence and parental behaviour. It means that the behaviour at Government and Private Schools be modified according to their moral judgement, intelligence and parental behaviour.

The study may also provide help to academic staff to arrange lectures on adolescents mental health, parental behaviour and moral judgement, to provide orientation to teachers and school adolescents. These lectures may be given weightage in developing teaching skills among teachers. They may learn how to deal with adolescents. They may also be provided with the opportunities in class rooms to enhance mental health and morality in the adolescents. Only then they may become effective teachers after getting information and knowledge about the mental health of the adolescents.

SUGGESTIONS FOR FURTHER STUDIES

As pointed out, the study was delimited with respect to sample studied, tools and techniques implied and the statistical operation carried
out. These limitations point to the necessity of conducting a series of research projects in the area of research covered by the study.

1. In the present study investigated, conclusions are based on the study of five hundred adolescents of Government and Private schools. Therefore, there is a need for cross validation of the findings yielded in this study. The present study should be replicated on a wider sample.

2. The study can also be conducted on adults and children of 6 – 11 years age level.

3. The study can also be conducted to see the difference between the adolescents of Public schools and Kendriya Vidyalaya schools.

4. Predictor variables other than used in the present investigation (i.e., creativity, achievement, socio-economic status, urban-rural background, frustration, modernization, life satisfaction, anxiety and religiosity) may also be used to find out the relationship with the mental health of the subjects.