Chapter-VI

Analysis, Interpretation and Discussion of Results

Present chapter deals with the analysis of data interpretation and discussion of results, which have been presented in three sections. Section I deals with the co-relational analysis whereas section II deals with the calculation of t-ratio.

For different types of statistical treatment data were analyzed with the help of computer. Results were discussed on the basis of 0.05 and 0.01 level of significance.

SECTION-I

This section deals with the details of analysis of data, interpretation and discussion of results on the basis of co-relational analysis. Co-relational is a statistical technique, which is used to measure the relationship between two variables. If two variables are known to be related in some systematic way, it is possible to use one of the variables to make accurate prediction about the other.

The intensity degree of linear correlation is represented quantitatively by coefficient of correlation. Its value ranges from -1.00 to +1.00. A value of -1.00 describes a perfect negative correlation and +1.00 describes a perfect positive correlation. A zero value describes complete lack of between two variables.

This section accounts for the description and discussion of correlation of each of the four independent variables, namely level of aspiration, emotional intelligence, self-concept and home environment with the criteria variable of mental health as to know the analytical picture of relationship of different independent variables and dependent variable.
Relationship between the six measures of dependent variable mental health and total mental health with one measure of independent variable level of aspiration, ten measures of independent variable emotional intelligence, six measures of independent variables self-concept and ten measures of independent variables home environment were found with the help of Pearson's product moment method of correlation. Correlation was found out between independent variables taken one at a time on the one hand and dependent variable mental health on the other hand to test hypothesis 1, 2, 3 and 4 which are presented below for ready reference.

1. There will be significant correlation between measure of mental health and level of aspiration of adolescents.
2. There will be significant correlation between measure of mental health and emotional intelligence of adolescents.
   2(a) There will be significant correlation between mental health and self-awareness measure of emotional intelligence.
   2(b) There will be significant correlation between mental health and empathy measure of emotional intelligence.
   2(c) There will be significant correlation between mental health and self-motivation measure of emotional intelligence.
   2(d) There will be significant correlation between mental health and emotional stability measure of emotional intelligence.
   2(e) There will be significant correlation between mental health and managing relations measure of emotional intelligence.
   2(f) There will be significant correlation between mental health and integrity measure of emotional intelligence.
   2(g) There will be significant correlation between mental health and self-development measure of emotional intelligence.
   2(h) There will be significant correlation between mental health and value-orientation measure of emotional intelligence.
   2(i) There will be significant correlation between mental health and commitment measure of emotional intelligence.
2(j) There will be significant correlation between mental health and altruistic measure of emotional intelligence.

2(k) There will be significant correlation between mental health and emotional intelligence of adolescents.

3. There will be significant correlation between measures of mental health and self-concept of adolescents.

3(a) There will be significant correlation between mental health and physical appearance measure of self concept.

3(b) There will be significant correlation between mental health and social interaction measure of self concept.

3(c) There will be significant correlation between mental health and temperamental measure of self concept.

3(d) There will be significant correlation between mental health and educational measure of self concept.

3(e) There will be significant correlation between mental health and moral worth measure of self concept.

3(f) There will be significant correlation between mental health and intellectual measure of self concept.

3(g) There will be significant correlation between mental health and self-concept of adolescents.

4(a) There will be significant correlation between mental health and control measure of home environment.

4(b) There will be significant correlation between mental health and protectiveness measure of home environment.

4(c) There will be significant correlation between mental health and punishment measure of home environment.

4(d) There will be significant correlation between mental health and conformity measure of home environment.

4(e) There will be significant correlation between mental health and social isolation measure of home environment.

4(f) There will be significant correlation between mental health and reward measure of home environment.
4(g) There will be significant correlation between mental health and deprivation of privileges measure of home environment.
4(h) There will be significant correlation between mental health and nurturance measure of home environment.
4(i) There will be significant correlation between mental health and rejection measure of home environment.
4(j) There will be significant correlation between mental health and permissiveness measure of home environment.

CO-EFFICIENT OF CORRELATION BETWEEN MEASURES OF MENTAL HEALTH AND LEVEL OF ASPIRATION

TABLE 6.1
Values of co-efficient of correlation (N=800)

<table>
<thead>
<tr>
<th>Measures of mental Health</th>
<th>Level of Aspiration</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emotional stability (ES)</td>
<td>0.033</td>
</tr>
<tr>
<td>Over all adjustment (OA)</td>
<td>0.042</td>
</tr>
<tr>
<td>Autonomy (Ay)</td>
<td>-0.040</td>
</tr>
<tr>
<td>Security- Insecurity (SI)</td>
<td>0.008</td>
</tr>
<tr>
<td>Self-concept (SC)</td>
<td>-0.095**</td>
</tr>
<tr>
<td>Intelligence (IQ)</td>
<td>0.239**</td>
</tr>
<tr>
<td>Mental Health (Total)</td>
<td>0.077*</td>
</tr>
</tbody>
</table>

**Significant at 0.01 level.
*Significant at 0.05 level.

From the result of table 6.1 positive significant correlations were obtained between one measure of mental health i.e. intelligence and level of confidence and total mental health and level of aspiration ($r = 0.239$) at 0.05 level of confidence. It means high level of aspiration helps in enhancing mental health of adolescents. The correlation between one measure of mental health i.e. self-concept and level of aspiration was found to be negative and significant ($r = -0.095$) at 0.01 level of confidence. It means as per the results of present study high
level of aspiration deterrent the self-concept of adolescents. Relationships of other measures of mental health were found insignificantly correlated with the level of aspiration.

The positive and significant relationship between the level of aspiration and intelligence dimension of mental health may be due to the fact that the adolescents who have realistic level of aspiration feel comfortable and becomes successful in their chosen sphere of tasks and hence shows high level of rationality and intelligence.

The level of aspiration was found to be negatively and significantly correlated to the self-concept dimension of mental health. The reason for the same may be that the adolescents, who have high level of aspiration, strive to achieve high also for which they work hard. But in the most of the cases, the level of aspiration is not realistic and the capacities and abilities of the adolescents. Therefore, they face failure in achieving their goals and hence develop low level of self-concept.

The level of aspiration was found to be positively and significantly correlated with total mental health. The reason for the same may be that adolescents who aspire high, work really hard to achieve it which also leads to their success which in turn leads to better mental health. Also, a mentally healthy person faces the life on real footing with clear view of his strengths and weakness and hence higher level of aspiration. Sharma (1979) also revealed in his study that level of aspiration had positive influence on mental health.

These results were also revealed by Kaur Jaspreet (2003) that there exited a significant correlation between level of aspiration and mental health of adolescents.

Therefore, hypothesis I stating that there will be significant correlation between measures of mental health and level of aspiration stands partially accepted.
COEFFICIENT OF CORRELATION BETWEEN MEASURES OF MENTAL HEALTH AND EMOTIONAL INTELLIGENCE

TABLE 6.2.

Values of co-efficient of correlation

<table>
<thead>
<tr>
<th>Measures of mental Health</th>
<th>Emotional Intelligence</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emotional stability (ES)</td>
<td>0.86*</td>
</tr>
<tr>
<td>Over all adjustment (OA)</td>
<td>0.060</td>
</tr>
<tr>
<td>Autonomy (Ay)</td>
<td>0.114**</td>
</tr>
<tr>
<td>Security- Insecurity (SI)</td>
<td>0.118**</td>
</tr>
<tr>
<td>Self-concept (SC)</td>
<td>-0.13</td>
</tr>
<tr>
<td>Intelligence (IQ)</td>
<td>0.067</td>
</tr>
</tbody>
</table>

**Significant at 0.01 level.
*Significant at 0.05 level.

RELATIONSHIP BETWEEN MEASURES OF MENTAL HEALTH AND EMOTIONAL INTELLIGENCE.

In order to find the correlation between six measures of mental health and emotional intelligence results are presented in table 6.2. Only those measures of mental health are discussed which are found significantly correlated with emotional intelligence.

From the results of table 6.2 positive and significant correlation was found between emotional stability measure of mental health and emotional intelligence (r = 0.86) at 0.05 level of confidence and similarly positive and significant correlation was found between autonomy measure of mental health and emotional intelligence (r = 0.114), security-insecurity as measure of mental health and emotional intelligence (r = 0.118) at 0.01 level of confidence. In other words close relationship was found between emotional stability, autonomy security-insecurity measures of mental health with emotional intelligence of adolescents. Other measures of mental health i.e. over-all adjustment, self-concept and intelligence were found to be insignificantly correlated with emotional intelligence. It means that emotional intelligence helps in enhancing emotional stability, autonomy, and security-insecurity of adolescents.
The emotional intelligence of adolescent was found to be positively significantly correlated with emotional stability dimension of mental health because the persons who are emotionally intelligent seem to be stable with regard to their positive emotions.

Emotional intelligence of adolescent was found to be positively significantly correlated with autonomy dimension of mental health because the emotionally intelligent people have the ability to perceive and express their own and others emotions accurately and use them to guide their own thinking and actions which makes them independent and self-determinant in their thinking and hence autonomy develops.

A positive and significant relationship was found between emotional intelligence and security insecurity dimension of mental health of adolescents. This may be due to the reason that the emotionally intelligent person experience less apprehensions and anxiety with respect to their present and future needs and develops higher sense of security.

Therefore, hypothesis 2 that there will be significant correlation between measures of mental health and emotional intelligence stands partially retained.
CO-EFFICIENT OF CORRELATION BETWEEN MENTAL HEALTH AND MEASURES OF EMOTIONAL INTELLIGENCE.

TABLE 6.3

Values of co-efficient of correlation (Dimension wise)

<table>
<thead>
<tr>
<th>Measures of Emotional Intelligence</th>
<th>Mental Health</th>
</tr>
</thead>
<tbody>
<tr>
<td>Self-Awareness (A)</td>
<td>0.094**</td>
</tr>
<tr>
<td>Empathy (B)</td>
<td>0.064</td>
</tr>
<tr>
<td>Self-Motivation (C)</td>
<td>0.071*</td>
</tr>
<tr>
<td>Emotional Stability (D)</td>
<td>0.079*</td>
</tr>
<tr>
<td>Managing Relation (E)</td>
<td>0.041</td>
</tr>
<tr>
<td>Integrity (F)</td>
<td>0.143**</td>
</tr>
<tr>
<td>Self-Development (G)</td>
<td>0.084*</td>
</tr>
<tr>
<td>Value Orientation (H)</td>
<td>0.062</td>
</tr>
<tr>
<td>Commitment (I)</td>
<td>0.094**</td>
</tr>
<tr>
<td>Altruistic Behaviour (J)</td>
<td>0.061</td>
</tr>
<tr>
<td>Emotional Intelligence (Total)</td>
<td>0.128**</td>
</tr>
</tbody>
</table>

**Significant at 0.01 level
*Significant at 0.05 level

RELATIONSHIP BETWEEN MENTAL HEALTH AND MEASURES OF EMOTIONAL INTELLIGENCE

In order to find the correlation between mental health and measures of emotional intelligence results are presented in table 6.3

SELF-AWARENESS MEASURE OF EMOTIONAL INTELLIGENCE AND MENTAL HEALTH

From the results of table 6.3 positive and significant correlation was found between self-awareness measure of emotional intelligence and mental health (r = 0.04) at 0.01 level of confidence. In other words self-awareness measure of emotional intelligence was found to be closely associated with mental health.

The mental health of adolescents was found to be positively and significantly correlated with self-awareness measure of emotional intelligence may be due to the reason that the person who can recognize and discriminate their own and other emotions and are
conscious of their potentialities and strengths, make intelligent
decision by using a healthy balance between emotions and reasons
which makes them mentally healthy.

Therefore, hypothesis 2 (a) that there will be significant
correlation between mental health and self-awareness measure of
emotional intelligence stands accepted.

**EMPATHY MEASURE OF EMOTIONAL INTELLIGENCE AND MENTAL
HEALTH**

Results of table 6.3 indicates positive but insignificant relation
between empathy measure of emotional intelligence and mental health
(r = 0.64).

Therefore, hypothesis 2 (b) there will be significant correlation
between mental health and empathy measure of emotional intelligence
stands rejected.

**SELF-MOTIVATION MEASURE OF EMOTIONAL INTELLIGENCE AND
MENTAL HEALTH**

Results of table 6.3 depicts positive and significant correlation
between self-motivation measure of emotional intelligence and mental
health (r = 0.071) at 0.05 level of confidence. In other words self-
motivation as measure of emotional intelligence was found to be
closely associated with mental health.

A positive and significant correlation was found between self-
motivation dimension of emotional intelligence and mental health of
adolescents may be due to the reason that self motivated person direct
themselves towards goals, are more focused, less impulsive and more
self controlled which make them mentally healthy.

Therefore, hypothesis 2 (c) that there will be -significant
correlation between mental health and self-motivation measure of
emotional intelligence stands accepted.

**EMOTIONAL STABILITY MEASURE OF EMOTIONAL INTELLIGENCE AND
MENTAL HEALTH**

From the result of 6.3 positive and significant correlation was
found between emotional stability measure of emotional intelligence
and mental health \((r = 0.079)\) at 0.05 level of confidence. In other words emotional stability was found to be closely associated with mental health.

A positive and significant relationship between emotional stability dimension of emotional intelligence and mental health of adolescent may be due to the reason that being clear and stable about positive and negative emotions of own and others, makes the individual to accept it, which in turn makes them mentally healthy. More over the control over emotions and the ability to exhibit right emotions at right place and in right quantity is a sign of mentally healthy person.

Therefore, hypothesis 2(d) that there will be significant correlation between mental health and emotional stability measure of emotional intelligence stands accepted.

**MANAGING RELATIONS MEASURE OF EMOTIONAL INTELLIGENCE AND MENTAL HEALTH**

From the results of table 6.3 positive but insignificant correlation was found between managing relations measure of emotional intelligence and mental health \((r= 0.041)\). Thus as per the results of the present study managing relation do not affect the mental health of the individual up to significant level.

The reason may be that during adolescent period perhaps the relationships are not so permanent that is why in the present study insignificant relations have been found.

Therefore, hypothesis 2 (e) that there will significant correlation between mental health and managing relations measure of emotional intelligence stands rejected.

**INTEGRITY MEASURE OF EMOTIONAL INTELLIGENCE AND MENTAL HEALTH**

Results of table 6.3 indicate positive and significant correlation between integrity measure of emotional intelligence and mental health \((r=0.143)\) at 0.01 level of confidence. In other words integrity of the adolescents helps in enhancing their mental health.
The positive and significant relationship between integrity measures of emotional intelligence of adolescents with their mental health may be that adolescents who are morally upright are deemed to be mentally healthy because honesty and morality gives inner strength and builds character.

Therefore, hypothesis 2(f) that there will be significant correlation between mental health and integrity measure of emotional intelligence stands accepted.

**SELF DEVELOPMENT MEASURE OF EMOTIONAL INTELLIGENCE AND MENTAL HEALTH**

Results of table 6.3 shows positive significant correlation between self-development measure of emotional intelligence and mental health ($r = 0.084$) at 0.05 level of confidence. In other words self-development was found to be enhancing the level of mental health of adolescents.

The reason may be that self-development is the all-round development of individual which also includes intellectual development. The adolescent who have better self-development develops intellectually also and self-developed persons strive to grow and mature with their own independent efforts, which makes them confident and self-reliant and hence mentally healthy.

Therefore, hypothesis 2(g) that there will be significant correlation between mental health and self-development of emotional intelligence is retained.

**VALUE ORIENTATION MEASURE OF EMOTIONAL INTELLIGENCE AND MENTAL HEALTH**

Results of table 6.3 depicts positive but insignificant correlation between value-orientation measure of emotional intelligence and mental health ($r = 0.062$). In other words value-orientation measure of emotional intelligence was found to be not helping the adolescents in the development of their mental health.
Therefore, hypothesis 2 (h) that there will be significant 
correlation between mental health and value orientation measure of 
emotional intelligence is not accepted.

**COMMITMENT MEASURE OF EMOTIONAL INTELLIGENCE AND MENTAL 
HEALTH**

Results of table 6.3 indicate positive significant correlation 
between commitment measure of emotional intelligence and mental 
health (r=0.094) at 0.01 level of confidence. In other words 
commitment measure of emotional intelligence was found to be closely 
associated with mental health.

The commitment dimension of emotional intelligence of 
adolescents was fond to be positively and significantly correlated with 
their mental health may be that the ability to keep promises and 
stand by others at the times of their needs leads to better adjustment 
in relations and the persons who are committed to their tasks and 
relationships have a sense of satisfaction and fulfillment which makes 
them mentally healthy.

Therefore, hypothesis 2(i) that there will be significant 
correlation between mental health and commitment measure of 
emotional intelligence stands accepted.

**ALTRUISTIC BEHAVIOUR MEASURE OF EMOTIONAL INTELLIGENCE 
AND MENTAL HEALTH**

Results of table 6.3 indicate positive insignificant correlation 
between altruistic behaviour measure of emotional intelligence and 
mental health (r = 0.061). In other words altruistic behaviour measure 
of emotional intelligence and mental health were found to be 
independent of each other.

Therefore, hypotheses 2(j) that there will be significant 
correlation between mental health and altruistic behaviour measure of 
emotional intelligence stands rejected.

**EMOTIONAL INTELLIGENCE AND MENTAL HEALTH**

From the results of table 6.3 positive and significant correlation 
was found between mental health and emotional intelligence (r =

154
0.128) at 0.01 level of confidence. In other words mental health and emotional intelligence were found to be dependable upon each other.

The reason may be that the persons who are emotionally intelligent are deemed to be positive in their attitude towards themselves and others. Emotionally intelligent persons are more stable, confident and results oriented and hence achieve their realistic goals, which make them mentally healthy. It suggests that emotional intelligence of the adolescents had a strong bearing on their mental health.

Therefore, hypothesis that there will be significant correlation between mental health and emotional intelligence stands accepted.

The findings of the above study are in line with Reijo (1988), Catherine (1992), Sprowl(1993), Harper(1994), Manhas(2004) and Lekhi(2005) who also found significant and positive association between mental health and emotional intelligence.

**CO-EFFICIENT OF CORRELATION BETWEEN MEASURES OF MENTAL HEALTH AND SELF-CONCEPT**

**TABLE 6.4**

Values of coefficient of correlation

<table>
<thead>
<tr>
<th>Measures of mental Health</th>
<th>Self-concept</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emotional stability (ES)</td>
<td>0.053</td>
</tr>
<tr>
<td>Over all adjustment (OA)</td>
<td>0.111**</td>
</tr>
<tr>
<td>Autonomy (Ay)</td>
<td>0.155**</td>
</tr>
<tr>
<td>Security- Insecurity (SI)</td>
<td>0.104**</td>
</tr>
<tr>
<td>Self-concept (SC)</td>
<td>0.047</td>
</tr>
<tr>
<td>Intelligence (IQ)</td>
<td>0.093**</td>
</tr>
</tbody>
</table>

**Significant at 0.01 level.**  
*Significant at 0.05 level.

**RELATIONSHIP BETWEEN MEASURES OF MENTAL HEALTH AND SELF-CONCEPT**

In order to find the correlation between six measures of mental health and self-concept, technique of Pearson's Product Moment
method was employed. Only those dimensions of mental health are presented in table 6.4 and are discussed which are found significantly correlated with self-concept.

From the results of table 6.4 positive and significant correlation was found between four measures of mental health i.e. over-all adjustment \( (r = 0.111) \), autonomy \( (r = 0.155) \), security-insecurity \( (r = 0.104) \), intelligence \( (r = 0.093) \) and self-concept at 0.01 level of confidence. In other words close relationship was found between over-all adjustment, autonomy, security-insecurity, intelligence measures of mental health with self-concept of the adolescents. Though positive correlation was found between emotional stability and self-concept measures of mental health with self-concept yet this correlation was not found to be significant.

The self-concept of adolescents was found to be positively and significantly correlated with over-all adjustment dimension of mental health because the adolescents with better self-concept have a realistic view about themselves, their feelings and relations, which help them in making better over-all adjustment and better mental health.

The positive and significant relationship between self-concept and autonomy dimensions of mental health is because a better self-concept makes an individual independent in thinking which in turn leads to good mental health.

The positive and significant relationship between self-concept and intelligence dimension of mental health may be due to the reason that high self-concept leads to the realistic appraisal of one self and others on one hand and the setting of achievable goals on the other which automatically leads to the intelligent way of connecting them and is the outcome of high intelligence and good mental health.

These results are in line with the results of Sharma (1979) that mental health was positively and significantly related to self-concept.
Therefore, hypothesis 3 that there will be significant correlation between measures of mental health and self-concept stands partially accepted.

**COEFFICIENT OF CORRELATION BETWEEN MENTAL HEALTH AND MEASURES OF SELF-CONCEPT**

**TABLE 6.5**

Values of Coefficient of correlation (Dimension wise)

<table>
<thead>
<tr>
<th>Sr. No.</th>
<th>Measures of self-concept</th>
<th>Mental Health</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Physical Appearance (A)</td>
<td>0.089*</td>
</tr>
<tr>
<td>2.</td>
<td>Social interaction (B)</td>
<td>0.073*</td>
</tr>
<tr>
<td>3.</td>
<td>Temperamental (C)</td>
<td>0.111**</td>
</tr>
<tr>
<td>4.</td>
<td>Education (D) (Views regarding school, teachers and co-curricular activities)</td>
<td>0.246**</td>
</tr>
<tr>
<td>5.</td>
<td>Moral Worth (E) (Recognition of right and wrong activities)</td>
<td>0.204**</td>
</tr>
<tr>
<td>6.</td>
<td>Intelligence Awareness (F) (i.e. Awareness of one’s own intelligence)</td>
<td>-005</td>
</tr>
<tr>
<td>7.</td>
<td>Self-concept (Total)</td>
<td>0.174**</td>
</tr>
</tbody>
</table>

**Significant at 0.01 level**

*Significant at 0.05 level

Results of table 6.5 indicate positive and significant correlation between physical appearance measures of self-concept and mental health \( r = 0.89 \) at 0.05 level of confidence. In other words physical appearance measures of self-concept was found to be closely related with mental health.

The reason for the above results may be that the adolescents who have better view of their body, health, physical appearance and strengths are better adjusted with others and feel more secure and confident about themselves which in turn make them mentally healthy persons.
Therefore, hypothesis 3(a) that there will be significant correlation between measures of mental health and physical appearance measures of self-concept is retained.

**SOCIAL-INTERACTION MEASURE OF SELF-CONCEPT AND MENTAL HEALTH**

From the results of table 6.5 positive and significant correlation was found between social interaction, measures of self-concept and mental health ($r = 0.073$) at 0.05 level of confidence. In other words social interaction measure of self-concept was found to be closely associated with mental health.

The social interaction dimension of self-concept is positively and significantly correlated with mental health may be that the adolescents who are aware of the worth of social interactions, carry the social relations more effectively and good social interactions gives the meaning and worth of individual in society which leads to better mental health.

Therefore, hypothesis 3(b) that there will be significant correlation between mental health and social interaction measures of self-concept stands accepted.

**TEMPERAMENTAL MEASURE OF SELF-CONCEPT AND MENTAL HEALTH**

Results at table 6.5 reveal positive and significant correlation between temperamental measure of self-concept and mental health ($r = 0.111$) at 0.01 level of confidence. In other words temperamental measure of self-concept was found to be closely related with mental health.

The temperamental dimension of self-concept is positively and significantly correlated with mental health may be because the realistic view of individual about his prevailing emotional state and the predominance of a particular kind of emotional reaction helps the individual in understanding himself and others and hence improves his mental health.
Therefore, hypothesis 3(c) that there will be significant correlation between mental health and temperamental measure of self-concept stands accepted.

**EDUCATIONAL MEASURE OF SELF-CONCEPT AND MENTAL HEALTH**

From the results of table 6.5 positive and significant correlation was found between educational measures of self-concept and mental health ($r=0.246$) at 0.01 level of confidence. In other words close relationship was found between educational measure of self-concept and mental health.

The reason may be that the adolescents, who are aware of their relationship with schoolteachers and extra-curricular activities, develop intellectually, become more secure and confident and have higher level of adjustment with others and hence are mentally healthy individuals.

Therefore, hypothesis 3(d) that there will be significant correlation between mental health and educational measure of self-concept is retained.

**MORAL WORTH MEASURE OF SELF CONCEPT AND MENTAL HEALTH**

From the results of table 6.5 positive and significant correlation was found between moral worth measure of self concept and mental health ($r = 0.204$) at 0.01 level of confidence. In other words moral worth measure of self-concept and mental health were found to be closely related.

The moral worth dimension of self-concept of adolescents was found to be positively and significantly correlated with mental health may be due to the reason that the adolescents who have better estimation of their moral worth and sense of right and wrong and also intellectually sound, secure and confident are capable of making better adjustment which leads to good mental health.

Therefore, hypothesis 3(e) that there will be significant correlation between mental health and moral worth measure of self-concept stands accepted.
INTELLIGENCE AWARENESS MEASURE OF SELF-CONCEPT AND MENTAL HEALTH

Result of table 6.5 reveals negative but insignificant correlation between intelligence awareness measure of self-concept and mental health \( r = 0.005 \). In other words intelligence awareness measure of self-concept and mental health were found to be not related.

The above results may be due to the fact that to have good mental health the person has to remember certain mental health rules. This may be done by any person of low mental ability or high mental ability.

Therefore, hypothesis 3(f) that there will be significant correlation between mental health and intelligence awareness measure of self-concept stands rejected.

SELF-CONCEPT AND MENTAL HEALTH

From the results of table 6.5 positive and significant correlation was found between mental health and self-concept \( r = 0.174 \) at 0.01 level of confidence. In other words self-concept was found to be enhancing mental health of adolescents.

Self-concept was found to be associated with the mental health of adolescents may be because high self-concept leads to positive attitude towards oneself and life and hence in turn leads to better mental health.

These results are similar to the results of Sharma (1979) that mental health was positively and significantly related to self-concept.

Therefore, hypothesis 3(g) that there will be significant correlation between mental health and self-concept is retained.
### COEFFICIENT OF CORRELATION BETWEEN MENTAL HEALTH AND MEASURES OF HOME ENVIRONMENT

**TABLE 6.6**

Values of coefficient of correlation (Dimension wise)

<table>
<thead>
<tr>
<th>Sr. No.</th>
<th>Measures of Home Environment</th>
<th>Mental Health</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Control (A)</td>
<td>0.072*</td>
</tr>
<tr>
<td>2.</td>
<td>Protectiveness (B)</td>
<td>0.146**</td>
</tr>
<tr>
<td>3.</td>
<td>Punishment (C)</td>
<td>0.015</td>
</tr>
<tr>
<td>4.</td>
<td>Conformity (D)</td>
<td>0.152**</td>
</tr>
<tr>
<td>5.</td>
<td>Social Isolation (E)</td>
<td>-0.126*</td>
</tr>
<tr>
<td>6.</td>
<td>Reward (F)</td>
<td>0.207**</td>
</tr>
<tr>
<td>7.</td>
<td>Deprivation of privileges (G)</td>
<td>-0.191**</td>
</tr>
<tr>
<td>8.</td>
<td>Nurturance (H)</td>
<td>0.108**</td>
</tr>
<tr>
<td>9.</td>
<td>Rejection (I)</td>
<td>0.001</td>
</tr>
<tr>
<td>10.</td>
<td>Permissiveness (J)</td>
<td>0.005</td>
</tr>
</tbody>
</table>

*Significant at 0.05 level
**Significant at 0.01 level

**RELATIONSHIP BETWEEN MENTAL HEALTH AND MEASURES OF HOME ENVIRONMENT**

In order to find the correlation between mental health and ten measures of home environment technique of Pearson's Product Moment method was employed.

**CONTROL MEASURE OF HOME ENVIRONMENT AND MENTAL HEALTH**

Results of table 6.6 shows the positive and significant correlation between control measure of home environment and mental health ($r = 0.072$) at 0.05 level of confidence. In other words close relationship was found between control measure of home environment and mental health.

The reason for it may be that adolescent who have under control and supervision of the parents feel more secure due to the constant care from their parents and also become mentally healthy.
Therefore, hypothesis 4(a) that there will be significant correlation between mental health and control measure of home environment stands accepted.

**PROTECTIVENESS MEASURE OF HOME ENVIRONMENT AND MENTAL HEALTH**

From the results of table 6.6 positive and significant correlation was found between protectiveness measure of home environment and mental health ($r = 0.146$) at 0.01 level of confidence. In other words protectiveness measure of home environment was found to be closely associated with mental health.

The protectiveness dimension of home environment was also found to be positively and significantly correlated with mental health may be due to the reason that the protective environment at home gives a sense of security to the adolescents which in turn leads to their better mental health.

Therefore, hypothesis 4(b) that there will be significant correlation between mental health and protectiveness measure of home environment is retained.

**PUNISHMENT MEASURE OF HOME ENVIRONMENT AND MENTAL HEALTH**

From the results of table 6.6 insignificant correlation was found between punishment measure of home environment and mental health($r=0.015$). In other words punishment measure of home environment was found not to be associated with mental health.

It may be due to the reason that punishment being a negative phenomenon may be counteracted with certain defence mechanisms adopted by adolescents and hence does not contribute significantly to their mental health.

Therefore, hypothesis 4 (c) that there will be significant correlation between mental health and punishment measure of home environment stands rejected.
CONFORMITY MEASURE OF HOME ENVIRONMENT AND MENTAL HEALTH

Results of table 6.6 reveals positive and significant correlation between conformity measure of home environment and mental health \( (r=0.152) \) at 0.01 level of confidence. In other words close relationship was found between conformity measure of home environment and mental health.

It may be due to the reason that when the adolescents are made to work in accordance with parental desires and expectations, they learn to make adjustments with parents and others. All these make them mentally healthy persons.

Therefore, hypothesis 4(d) that there will be significant correlation between mental health and conformity measure of home environment stands accepted.

SOCIAL ISOLATION MEASURE OF HOME ENVIRONMENT AND MENTAL HEALTH

From the results of table 6.6 negative and significant correlation was found between social-isolation measure of home environment and mental health \( (r = -0.126) \) at 0.01 level of confidence. In other words social isolation measure of home environment is negatively associated with mental health. It means social isolation decreases the mental health of adolescents.

The reason for it may be that the adolescents who are isolated from their loved ones leads to negative emotions like aggression and anxiety etc. and they become demoralized, emotionally unstable and insecure. Such persons loose their confidence and become mentally unhealthy.

Therefore, hypothesis 4(e) that there will be significant correlation between mental health and social isolation measure of home environment stands accepted.

REWARD MEASURE OF HOME ENVIRONMENT AND MENTAL HEALTH

Results of table 6.6 depicts positive and significant correlation between reward measure of home environment and mental health.
(r = 0.207) at 0.01 level of confidence. In other words reward measure of home environment and mental health were found to be closely associated. It means reward increases the mental health of adolescents.

The reason may be that the reward whether material or symbolic boosts the morale of the adolescents. Therefore, the adolescents who are reward for constantly for their desirable behaviour feel confident about themselves and develop a realistic attitude of themselves and their achievements, which make them secure and adjustable in their social relations and hence contribute positively towards their mental health.

Therefore, hypothesis 4(f) that there will be significant correlation between mental health and reward measure of home-environment stands accepted.

DEPRIVATION OF PRIVILEGES MEASURE OF HOME ENVIRONMENT AND MENTAL HEALTH

Results of table 6.6 reveals negative and significant correlation between deprivation of privileges measure of home environment and mental health (r= -0.191) at 0.01 level of confidence. In other words deprivation of privileges measure of home environment and mental health were found to be negatively associated. It means deprivation of privileges decreases the mental health of adolescents.

It may be due to the reason that depriving the adolescents of their rights to seek love, respect and care makes them emotional imbalanced. Such adolescents develop lack of confidence and poor self-concept due to constant anxiety and tension and hence become mentally unhealthy.

Therefore, hypothesis 4(g) that there will be significant correlation between mental health and deprivation of privileges measure of home environment stands accepted.
NURTURANCE MEASURE OF HOME ENVIRONMENT AND MENTAL HEALTH

From the results of table 6.6 positive and significant correlation was obtained between nurturance measure of home environment and mental health \( (r= 0.108) \) at 0.01 level of confidence. In other words nurturance measure of home environment was found to be associated with mental health. It means nurturance increases the mental health of adolescents.

The nurturance dimension of home environment was found to have positive and significant relationship with mental health of adolescents because the nurturance depicts the parents keen interest and love for the child which gives a sense of acceptance, worth and belongingness to the adolescents and hence their good mental health.

Therefore, hypothesis 4(h) that there will be significant correlation between mental health and nurturance measure of home environment stands accepted.

REJECTION MEASURE OF HOME ENVIRONMENT AND MENTAL HEALTH

From the results of table 6.6 in significant correlation was found between rejection measure of home environment and mental health \( (r= 0.001) \). In other words rejection measure of home environment and mental health were found to be not closely related. It means rejection has no effect upon the mental health of adolescents.

It may be due to the reason that rejection of the child's right as a person, his right to express his feelings and the right to become an independent individual is a negative phenomenon and the adolescents may adopt certain mechanisms to counteract it and hence it does not contribute significantly in the mental health of adolescents.

Therefore, hypothesis 4(i) that there will be significant correlation between mental health and rejection measure of home environment stands rejected.
PERMISSIVENESS MEASURE OF HOME ENVIRONMENT AND MENTAL HEALTH

Results of table 6.6 indicate insignificant correlation between permissiveness measure of home environment and mental health ($r = 0.005$). In other words permissiveness measure of home environment was found not to be related with mental health. In other words permissiveness has no effect upon the mental health of adolescents.

Therefore, hypothesis 4(j) that there will be significant correlation between mental health and permissiveness measure of home environment stands rejected.

SECTION II

Since coefficient of correlation revealed simple association between different variables, therefore, an efforts was made to do the extreme group analysis for obtaining casual relationship between major variables i.e. mental health, level of aspiration, emotional intelligence, self-concept and home environment.

The most important parametric statistic is t-test; A parametric statistical test is one which specifies certain conditions about the parameter of the population from which a sample is drawn.

In order to test the significance of difference between two means, t-test is used. The computation of it involves the computation of a ratio between the experimental variance i.e. the obtained difference between two means and the error variance i.e. standard error of the mean difference.

t-test is considered to be more powerful than non-parametric statistical tests if its basic requirements or assumptions are met. These assumptions are:

- The observations must be independent. In other words, the selection of one case must not be dependent upon the selection of any other case.
- The observation must be drawn from a normal distribution.
- The variable must be expressed in interval scale.
The variable under study should be continuous. All the above assumptions of t test were fulfilled before using this statistics.

T-test in the present study was used in order to test the following hypothesis which were already given in chapter – III. These hypotheses are again presented here for ready reference:

5. There will be significant difference in the mental health of male and female adolescents.

6. There will be significant difference in the mental health of adolescents belonging to urban and rural areas.

7. There will be significant difference in the mental health of adolescents studying in government and private schools.

8. There will be significant difference in the mental health of adolescents at high and low levels of aspiration.

9. There will be significant difference in the mental health of adolescents at high and low levels of emotional intelligence.

10. There will be significant difference in the mental health of adolescents at high and low levels of self-concept.

11. There will be significant difference in the mental health of adolescents at good and poor levels of home environment.

**SIGNIFICANCE OF DIFFERENCE IN THE MENTAL HEALTH OF MALE AND FEMALE ADOLESCENTS**

**TABLE 6.7**

Values of means, S.D.'s and t-ratio to locate difference in the mental health due to gender difference.

<table>
<thead>
<tr>
<th>Sex</th>
<th>N</th>
<th>Mean</th>
<th>S.D.</th>
<th>Std. Error of difference</th>
<th>t-ratio</th>
<th>Level of significance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>400</td>
<td>86.39</td>
<td>9.19</td>
<td>0.66</td>
<td>-1.25</td>
<td>Not significant</td>
</tr>
<tr>
<td>Female</td>
<td>400</td>
<td>87.22</td>
<td>9.58</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
DIFFERENCE IN THE MENTAL HEALTH OF ADOLESCENTS DUE TO GENDER DIFFERENCES

The results of table 6.7 reveals insignificant difference in the mental health of male and female adolescents as the obtained t-value were found to be insignificant at 0.05 level of confidence (t= -1.25). The mean score of mental health of female adolescents was found to be (M=87.22) which is higher than that of male adolescents (M = 86.39), yet sex did not significantly affect their mental health.

The reason for insignificant difference in the mental health of male and female adolescents may be due to the fact that nowadays equal opportunities are provided by the parents and school authorities to both male and female adolescents and they are equally concerned and conscious for the all-round development of male and female adolescents and provide care, security and affection at the same level.

These results are similar with the findings of Srivastava , Rai and Rai (1987), Taak(1999), Garg(2000), Gupta(2002) and Richa(2006) that there was no significant difference between male and female students on mental health.

Therefore, hypothesis 5 that there will be significant difference in the mental health of male and female adolescents stands rejected.

DIFFERENCE IN THE MENTAL HEALTH OF URBAN AND RURAL ADOLESCENTS

TABLE 6.8

Values of means, S.D.'s and t-ratio to locate difference in the mental health on the basis of locale.

<table>
<thead>
<tr>
<th>Location</th>
<th>N</th>
<th>Mean</th>
<th>S.D.</th>
<th>Std. Error of difference</th>
<th>t-ratio</th>
<th>Level of significance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Urban</td>
<td>400</td>
<td>86.29</td>
<td>10.94</td>
<td>0.66</td>
<td>-1.56</td>
<td>Not significant</td>
</tr>
<tr>
<td>Rural</td>
<td>400</td>
<td>87.33</td>
<td>7.52</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

The results of table 6.8 reveals no significant difference in the mental health of adolescents belonging to urban and rural areas as the obtained t-value was found to be insignificant at 0.05 level of
confidence (t= -1.56). The mean score of mental health of adolescents belonging to rural areas was found to be (M=87.33) which is just similar to the adolescents belonging to the urban areas (M = 86.29), yet the locale of adolescents did not affect their mental health.

The reason for insignificant difference in the mental health of adolescents belonging to rural and urban areas may be attributed to the fact that both urban and rural parents are nowadays equally concerned and conscious for the all-round development of their wards and provide care, security and affection at the same level.

Similar results were also found by Veereshwar(1979) in the study of mental health and adjustment problems of college going girls that the difference in adjustment of urban and rural girls were not significant in the area of mental health. Both the groups showed quite satisfactory health adjustment. Richa (2006) also focused similar results.

Therefore, hypothesis 6 that there will be significant difference in the mental health of adolescents belonging to urban and rural areas stands rejected.

**DIFFERENCE IN THE MENTAL HEALTH OF ADOLESCENTS STUDYING IN GOVERNMENT AND PRIVATE SCHOOLS**

**TABLE 6.9**

Values of means, S.D.'s and t-ratio to locate difference in the mental health on the basis of type of schools.

<table>
<thead>
<tr>
<th>School</th>
<th>N</th>
<th>Mean</th>
<th>S.D.</th>
<th>Std. Error of difference</th>
<th>t-ratio</th>
<th>Level of significance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Government</td>
<td>400</td>
<td>84.64</td>
<td>9.98</td>
<td>0.65</td>
<td>-6.71**</td>
<td>0.01 level of significant</td>
</tr>
<tr>
<td>Private</td>
<td>400</td>
<td>88.98</td>
<td>8.22</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

The results of table 6.9 reveals significant difference in the mental health of adolescents studying in government and private schools as the obtained t-value was found to be significant at 0.01 level of confidence (t= -6.71). The mean score of mental health of
adolescents studying in privates’ schools was found to be (M=88.98) as compared to the adolescents studying in government schools (M = 84.64).

The reason for significant difference in the mental health of adolescents studying in government and private recognized schools may be due to the fact that adolescents of private schools must have high level of mental health as compared to the adolescents studying in government schools as it is generally said that in private schools, students get more individual attention, more teaching learning facilities and planned curriculum. In many private schools there is a provision for the guidance corner and the guidance worker solve most of the personal, social, emotional and psychological problems of the adolescents. All the above factors may make difference in the mental health of adolescents studying in government and private schools.

These results are in the line with the results of Gupta (2002) that there is a significant difference between mental health of adolescents studying in government and private schools. Therefore, hypothesis 7 that there will be significant difference in the mental health of adolescents studying in government and private schools stands retained.

DIFFERENCE IN THE MENTAL HEALTH OF ADOLESCENTS AT HIGH AND LOW LEVELS OF ASPIRATION

TABLE 6.10

Values of means, S.D.’s and t-ratio to locate difference in the mental health adolescents on the basis of high and low levels of aspiration

<table>
<thead>
<tr>
<th>Variable</th>
<th>Group</th>
<th>N</th>
<th>Mean</th>
<th>S.D.</th>
<th>df</th>
<th>t-value</th>
<th>Level of significance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Level of aspiration</td>
<td>High</td>
<td>145</td>
<td>87.24</td>
<td>8.16</td>
<td>3.22</td>
<td>1.43</td>
<td>Not significant</td>
</tr>
<tr>
<td></td>
<td>Low</td>
<td>179</td>
<td>85.85</td>
<td>8.99</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Table 6.10 shows the mean score of mental health of adolescents with high and low levels of aspiration as 87.24 (N = 145) and 85.85 (N = 179) respectively and their S.D. is 8.16 and 8.99
respectively. The t-ratio was calculated as 1.43 which is insignificant at 0.05 level of confidence and hence depicting that there exists insignificant difference in the mental health of adolescents with high and low levels of aspiration.

Though the mean score of mental health of adolescents with high level of aspiration is higher than that of adolescents with low level of aspirations yet no significant difference was found between them. It may be due to the reason that the adolescents nowadays have realistic aspirations of life, which are in accordance to their capacities and capabilities, and hence it does not their affect their mental health.

Therefore, hypothesis 8 stating that there will be significant difference in the mental health of adolescents at high and low level of aspiration is rejected.

**DIFFERENCE IN THE MENTAL HEALTH OF ADOLESCENTS AT HIGH AND LOW LEVELS OF EMOTIONAL INTELLIGENCE**

**TABLE 6.11**

Values of means, S.D.'s and t-ratio to locate difference in the mental health adolescents on the basis of high and low levels of emotional intelligence

<table>
<thead>
<tr>
<th>Variable</th>
<th>Group</th>
<th>N</th>
<th>Mean</th>
<th>S.D.</th>
<th>df</th>
<th>t-value</th>
<th>Level of significance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emotional intelligence</td>
<td>High</td>
<td>112</td>
<td>86.42</td>
<td>8.91</td>
<td>2.30</td>
<td>3.72**</td>
<td>significant at 0.01 level</td>
</tr>
<tr>
<td></td>
<td>Low</td>
<td>120</td>
<td>81.57</td>
<td>10.77</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Table 6.11 shows the mean score of mental health of adolescents with high and low levels of emotional intelligence as 86.42 (N = 112) and 81.42 (N = 120) respectively and their S.D. is 8.91 and 10.77 respectively. The t-ratio was calculated as 3.72, which is significant at 0.01 level of confidence. This reveals that there exists significant difference in the mental health of adolescents with high and low levels of emotional intelligence.
The reason for the same is attributed to the fact that emotionally intelligent persons have the qualities like self-awareness, empathy, self motivation, emotional stability, integrity etc. which in turn leads to better mental health where as the persona having low emotional intelligence are poor in these qualities leading to poor mental health.

Therefore, hypothesis 9 that there will be significant difference in the mental health of adolescents at high and low level of emotional intelligence stands accepted.

**DIFFERENCE IN THE MENTAL HEALTH OF ADOLESCENTS AT HIGH AND LOW LEVELS OF SELF-CONCEPT**

**TABLE 6.12**

<table>
<thead>
<tr>
<th>Variable</th>
<th>Group</th>
<th>N</th>
<th>Mean</th>
<th>S.D.</th>
<th>df</th>
<th>t-value</th>
<th>Level of significance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Self-concept</td>
<td>High</td>
<td>107</td>
<td>88.48</td>
<td>9.35</td>
<td>2.37</td>
<td>4.18**</td>
<td>0.01 level of significance</td>
</tr>
<tr>
<td></td>
<td>Low</td>
<td>132</td>
<td>83.04</td>
<td>10.47</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Results of table 6.12 reveals significant difference in the mental health of adolescents with high and low levels of self-concept as the obtained t-value was found to be as 4.18 which is significant at 0.01 level of confidence. The mean score of mental health of adolescents with high level of self-concept was found to be higher as 88.48 (N = 107) as compare to the adolescents with low level of self-concept as 83.04 (N= 132) and hence depicting that there exists significant difference in the mental health of adolescents with high and low levels of self-concept.

The above results may be due to the fact the persons with high self-concept have realistic view of their own and they are good in social interactions which leads to good mental health among them.
whereas the person with low self-concept are vague in their views and thoughts and hence suffer from poor mental health.

Therefore, the hypothesis 10 that there will be significant difference in the mental health of adolescents at high and low level of self-concept is retained.

**DIFFERENCE IN THE MENTAL HEALTH OF ADOLESCENTS AT GOOD AND POOR LEVELS OF HOME ENVIRONMENT**

**TABLE 6.13**

Values of means, S.D.’s and t-ratio to locate difference in the mental health adolescents on the basis of good and poor levels of home environment

<table>
<thead>
<tr>
<th>Variable</th>
<th>Group</th>
<th>N</th>
<th>Mean</th>
<th>S.D.</th>
<th>df</th>
<th>t-value</th>
<th>Level of significance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Home environment</td>
<td>Good</td>
<td>168</td>
<td>87.58</td>
<td>8.62</td>
<td>2.93</td>
<td>1.66</td>
<td>Not significant</td>
</tr>
<tr>
<td></td>
<td>Poor</td>
<td>127</td>
<td>85.74</td>
<td>10.37</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Table 6.13 shows the mean score of mental health of adolescents’ with good and poor home environment as 87.58 (N = 168) and 85.74 (N = 127) respectively and their S.D.’s 8.62 and 10.37 respectively. The t-ratio was calculated as 1.66, which is not significant at 0.05 level of confidence and hence depicting that there exists no significant difference in the mental health of adolescents with good and poor home environment.

Therefore, hypothesis 11 that there will be significant difference in the mental health of adolescents at good and poor levels of home environment is rejected.
Fig. 1: Showing Difference of Mean of Mental Health of Male of Female Adolescents
Fig. 2: Showing Difference of Mean of Mental Health of Urban and Rural Adolescents

Mean

Urban

Rural
Fig. 3: Showing Difference of Mean of Mental Health of Adolescents studying in Government and Private Schools
Fig. 4: Showing Difference of Mean of Mental Health of Adolescents with High and Low Levels of Aspiration
Fig. 5: Showing Difference of Mean of Mental Health of Adolescents with High and Low levels of Emotional Intelligence
Fig. 6: Showing Difference of Mean of Mental Health with High and Low Levels of Self-Concept
Fig. 7: Showing Difference of Mean of Mental Health with Good and Poor Levels of Home Environment.