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**"A study of Mental Health and Emotional Maturity among
Child Labour students and other adolescence"**

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Abstract

The present study aims to determine the status of mental health and emotional Maturity among child labour and other adolescence. The sample consist of 300 subject 150 child labour students, 150 regular school going students. Total sample select in to the Indus Child labour project from Jalna dist. in Maharashtra. The subject selected in the sample was in the age group of 10 to 26 who are living in urban areas only. Standardized Psychological Tools was used for data collection that is Emotional Maturity Scale and Mental Health Scale. After done of scoring data were treated as two way analysis. The results indicate that child labour and regular school going students thus differ from each other significantly on the emotional maturity. According to mean value regular school going children's more emotional mature than the child labour.

▪ The 'F' ratios indicate that there is significant difference between male and female of both child labour and school going students on emotional maturity. These result favorable to female students. The significant difference of Mental Health, child labour and regular school going students is represented by main effect A. summary of two way ANOVA shows that main effect 'A' is highly significant ($F = 64.25$, $df = 1$ and 296 , $P < 0.01$). The result indicates that child labour and regular school students thus, differ from each other significantly on the Mental Health. The second factor was related to the gender. It is represented by main effect 'B'. Main effect 'B' is also significant ($F = 33.52$, $df = 1$ and 296 , $P < 0.01$). These F ratios indicate that there is significant difference between male and female of both child labour and school going children's on mental health.

▪ Key words: Mental Health and Emotional Maturity.

▪ Introduction:-

▪ In pursuit of India's development goals and strategies, A National Child Labour Policy, was

adopted in 1987. The national policy reiterates the directive principle of state policy in India's Constitution. It seeks to focus on general development programs to benefit children wherever possible and have project based action plans in areas of high concentration of child labour engaged in wage/quasi-wage employment. The National Child Labour Policy was adopted following the Child Labour Act, 1986.

▪ The Ministry of Labour has been implementing the NCLP through the establishment of various projects for the rehabilitation of child workers since 1988. Initially these measures were industry specific and aimed at rehabilitating children working in traditional labour intensive industries. A renewed commitment to fulfilling the constitutional mandate resulted in enlarging the ambit of NCLPs in 1994 to rehabilitate children working in hazardous occupations.

▪ The emotional patterns of adolescence, while similar to those of childhood, differ in the stimuli that give rise to the emotions and, even

more important, in the degree of control the individuals exercise over the expression of their emotions. For example, being treated "like a child" or being treated "unfairly" is more likely to make the adolescent angry than anything else.

- Instead of having temper tantrums, however adolescents express their anger by sulking, refusing to speak, or loudly criticizing those who angered them. Adolescents also become envious of those with more material possessions. While they may not complain and feel sorry for themselves, as children do, they are likely to take a part-time job to earn money for the material possessions they crave or even drop out of school to get these things.

•Emotional Maturity

- Boys and girls are said to have achieved emotional maturity if, by the end of adolescence, they do not "blow up" emotionally when others are present but wait for a convenient time and place to let off emotional steam in a socially acceptable manner. Another important indication of emotional maturity is that the individual assesses a situation critically before responding to it emotionally instead of reacting to it unthinkingly as would a child or an immature person. This results in adolescents ignoring many stimuli that would have caused emotional outburst when adolescents are stable in their emotional responses and they do not swing from one emotion or mood to another, as they did earlier.

- To achieve emotional maturity, adolescent most learn to get a perspective on situations which otherwise would lead to emotional reactions. They can do this best by discussing their problems with others. Their willingness to disclose their attitudes, feelings and personal problems is influenced partly by how secure they feel in their social relationships, partly by how much they like the "target person" (the person to whom they are willing to make the disclosure,) and by how much the target person is willing to disclose to them.

- In addition, if adolescents are to achieve emotional maturity, they must learn to use emotional catharsis to clear their systems of pent-up emotional energy. This they can do by strenuous physical exercise, in play or work, by laughing or by crying. While all of these provide an outlet for pent-up emotional energy that accompanies control over emotional expressions, social attitudes toward crying are unfavorable, as they are toward laughing, unless the laughter is held in check and occurs only when the social group approves.

•Mental Health

- Adolescent depression resembles adult depression. The similarities include recurring symptoms of "negative self-cognition, depressed mood, sleep and appetite disturbances, tearfulness, difficulty functioning at job or school due to poor concentration and suicidal ideation" (Mufson et al., 1993, p. 25). There are some developmental differences between adolescent and adult depressives. Adolescents experience more hypersonic and hyperplasia (i.e., sleeping and eating disorders) than do adults. An important distinction between these two groups is that depressed adolescents make more suicide attempts than depressed adults. Female adolescent depression has its own distinct causes. Girls are often unprepared for the bodily and social changes that mark their lives during this period. These changes engender feelings of shame, guilt and inferiority (Grinspoon, 1993; McGrath et al., 1990; Mufson et al., 1993; Pipher, 1994).

- There has been a substantial rise in the rate of adolescent suicide in the last 30 years. Suicide has been found to be correlated with depression in adolescents and one in three depressed adolescents has suicidal thoughts (McGrath et al., 1990; Nolen-Hoeksema, 1990). Mary Pipher, a clinical psychologist and expert in the field of female adolescent psychotherapy, describes the manifestations of female adolescent depression in the following statement:

- It makes some adolescent girls sluggish and apathetic, others angry and hate-filled. Some girls manifest their depression by starving themselves or carving their bodies. Some withdraw and go deep within themselves and some swallow pills. Others drink heavily or are promiscuous. Whatever the outward form of the depression, the inward form is the grieving for the lost self, the authentic girl who has disappeared with adolescence. (1994, p. 149)

- There are many types of psychological and biochemical therapies that have been utilized for the treatment of depression in the adult population. But there are few studies that "address the issue of differential effectiveness of treatment strategies for depressed female adolescents. It should not be surprising, therefore, that the literature on treatment outcomes for depressed females adolescents is almost nonexistent" (McGrath et al., 1990, p. 83). The information that we do have indicates that therapeutic interventions that are effective for treating adult depression (e.g., traditional "talk" therapy and antidepressant

drugs) are often ineffective for adolescents (Grinspoon, 1993; Harrington, 1992; Mufson et al., 1993). Published studies on the efficacy of pharmacotherapy for depressed adolescents have not yielded significantly positive results (Garland, 1994; Harrington, 1992; Hazell, O'Connell, Heathcote, Robertson, & Henry, 1995; Kutcher et al., 1994). The reasons that adolescents fail to respond to antidepressant medication are not yet known (Grinspoon, 1993; Mufson et al., 1993). Additionally, for some clients there are mild to serious side effects in response to antidepressant drug therapy (Johnsgard, 1989; Mufson et al., 1993).

•Aim of the study:

▪ In order to bring out the realistic evaluation, of emotional maturity and mental health among child labour and regular school going children this study has been carried out. Keeping in view the probable sex difference, it may be appropriate to discuss the results in three parts.

•Objective of the study:

- I. To investigate the level status of emotional maturity among child labour and regular child.
- II. To investigate the level of mental health among child labour and regular child.
- III. To find out the gender wise difference of emotional maturity.
- IV. To find out the gender wise difference of mental health.
- V. To investigate the relationship between emotional maturity and mental health.

•Hypothesis:

- I. There will be significant difference of emotional maturity between Child labours and regular Childs students.
- II. There will be significant difference of emotional maturity between male and female students.
- III. There will be significant difference of mental health between Child labours and regular Childs students.
- IV. There will be no significant difference between male and female students of mental health.

•Variable:

- In the present study there are four variables was treated as dependent and independent variables. Mental Health and Emotional Maturity these are the dependent variables and type of the School children and Gender these are independent variables.
- The independent variables of sex are

natural dichotomous variables with two levels: Male and female. Type of school Adolescence is a second independent variables with two type : regular school going adolescent and child labour.

•Sample:-

▪ The sample consist of 300 subject 150 child labour students 75 male and 75 female, 150 regular school going students 75 male and 75 female. The sample of the present study is shown as below. Total sample select in to the Indus Child labour project from Jalna dist. in Maharashtra.

▪ The subject selected in the sample was in the age group of 10 to 26 who are living in urban areas only.

•Tools:

▪ In the present study there will be three psychological tests will be used for data collection.

•1. Emotional Maturity Scale:

•This scale developed by Dr. YashvirShingh and Dr. Mahesh Bhargava. Emotional maturity scale has a total of 48 items under the five categories. The reliability of scale was determine by test-retest method .75 and the scale was validated against external criteria was .64.

•2. Mental Health:

•This inventory developed by Dr. A.K. Srivastava. The reliability of the inventory was determined by spilt half method using add even procedure the reliability coefficients was .73 found. Construct validity of the inventory is determined by finding coefficients of correlation between scores on mental health inventory and general health questionnaire.

•Procedure:

▪ The Personal data sheet, Emotional Maturity Scale and Mental Health inventory were administered to four groups of 75 children each in there leisure time after they finish their daily classes by the researchers with the help of some of his colleagues. Students were instructed according to the instructions and procedures given in the test manual. Students filled their personal information about sex, age and area of residence on the PDS form. They responded directly on the test. The total time taken for administrations including time for instructions and explanations was one hours. The PDS, Emotional Maturity Scale and Mental Health inventory were collected. The scoring for Emotional Maturity scale and Mental Health inventory was don according to the procedure describe in the test manual.

▪ After the completion of scoring, appropriate list and tables were prepared for recording row scores and their totals. Data sheets

for Emotional Maturity Scale and Mental Health Inventory were prepared for statistical analysis.

•Statistical Analysis:

The sample for statistical analysis consisted of 300 subjects. For the each subjects, initially data of each group were separately tabulated by employing frequency distribution, and descriptive statistics. The statistical analysis was manly consisted of factorial analysis of two way analysis of variance.

•Result & Discussion:

The result for the emotional maturity as measured by emotional maturity scale. Type of students is represented by main effect A. summary of two way ANOVA shows that main effect 'A' is highly significant (F = 19.067, df=1 and 296, P< 0.01).

The results indicate that child labour and regular school going students thus differ from each other significantly on the emotional maturity.

According to summary of ANOVA, the hypothesis no. 1 "there will be significant difference of emotional maturity between child labour and regular school going children" was accepted.

The second factor was related to the gender. It is represented by main effect 'B'. Main effect 'B' is also significant. (F = 5.890, df=1 and 296, P< .01). According to this 'F' ratio the second Hypothesis cited in third chapter that is 2 "There will be significant difference between male and female students of emotional maturity" has been accepted.

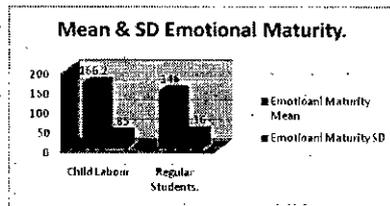
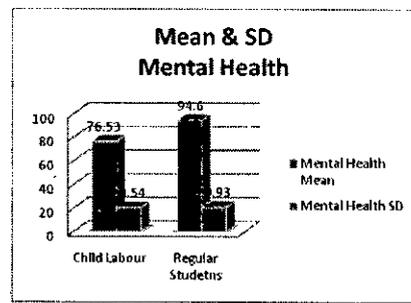


Figure shows mean and SD values of emotional maturity form child labour and Regular school going children's. It indicates that mean value of Child labour found 166.2 and SD 38.85 is comparatively larger than mean-value of regular school going children 146.00 and SD 42.16 on Emotional Maturity. According to mean value regular school going children have less mean value than child labour mean values, but according to Emotional maturity scales manual high score indicate low emotional stability and low score high

Emotional stability. So that the according to mean value by manual regular school going children's more emotional mature than the child labour.

The second factor was related to the gender. It is represented by main effect 'B'. Main effect 'B' is also significant (F= 5.890, df=1 and 296, P < 0.01). These F ratios indicate that there is significant difference between male and female of both child labour and school going students on emotional maturity. These result favorable to female students.



of students (child labour and regular school going students) is represented by main effect A. summary of two way ANOVA shows that main effect 'A' is highly significant (F = 64.25, df=1 and 296, P<0.01). The result indicates that child labour and regular school students thus, differ from each other significantly on the Mental Health.

According to summary of ANOVA, the hypothesis no. 3 "there will be significant difference of Mental Health between child labour and regular school going children" was accepted.

The second factor was related to the gender. It is represented by main effect 'B'. Main effect 'B' is also significant (F= 33.52, df = 1 and 296, P < 0.01). These F ratios indicate that there is significant difference between male and female of both child labour and school going children's on mental health. The result indicates that male student's fond better mental health than female students, according to the result hypothesis no. 4 "There will be no significant difference between male and females students of mental health" was rejected.

Result of ANOVA showed that main effect 'A' and main effect 'B' function independently. Interaction AxB is significant (F= 5.87, df 1 and 296, P > 0.01).

Conclusions:

1. There is an effect on child labour on their

emotional maturity

2. The child labour students very poor on emotional maturity than the other students' e.g. regular school going children.

3. There is gender wise difference on emotional maturity. Female students more emotionally matured than male students.

4. There is very poor mental health among child labors than the regular students.

5. There is no gender effect on mental health. Both are equal range on mental health.

6. There is no relation between emotional maturity and mental health.

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