

Research Paper

Gender Differences in Mental Health among Adolescent Students

Dr. Gyanti Kumari Prasad^{1*}

ABSTRACT

An essential part of overall health is mental health, which includes emotional, psychological, and social well-being. This study investigates the impact of gender on mental health and its various dimensions among adolescent students. A sample of 120 students (60 male and 60 female) were selected by Random Sampling from different schools of Jamshedpur (Jharkhand). Mental Health Battery developed by Singh and Gupta (2000) was applied for the study. Data were examined using t-tests to compare mean scores between genders. The results revealed that female adolescents have significantly better mental health as compared to male adolescent students. The female adolescents significantly scored higher in Emotional Stability, Autonomy, Security-Insecurity, and Intelligence. No significant differences were found in Overall Adjustment and Self-Concept between genders. These findings emphasize how crucial it is to take gender into account when addressing the mental health and developmental needs of adolescents. Recognizing these variations may be helpful in designing interventions and support structures to more effectively appeal to the different necessities of male and female adolescents.

Keywords: *Mental Health, Emotional stability, Adjustment, Autonomy, Security- Insecurity, Self-concept and Intelligence*

Mental health among adolescents has become an increasingly significant area of research due to the rising prevalence of mental health disorders in this age group. Adolescence is a crucial developmental stage characterized by changes in the body, mind, and emotions that might make a person more susceptible to mental health issues. Studies have indicated that because of the stresses of social interactions, academic success, and the transition to adulthood, teenagers are more vulnerable to mental health problems such as stress, anxiety, and depression (Patel et al., 2007). Moreover, the World Health Organization (WHO) reports that half of all mental health conditions begin by the age of 14, but most cases go undetected and untreated (WHO, 2021).

Mental health is a fundamental component of overall health, encompassing emotional, psychological, and social well-being. According to the World Health Organization (WHO), mental health is defined as "a state of well-being in which every individual realizes their own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to their community" (World Health Organization, 2001, p. 1). This definition emphasizes that mental health encompasses more

¹Assistant Professor, Department of Psychology, A.B.M. College, Jamshedpur

*Corresponding Author

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than just the absence of mental illnesses; it also includes the capacity to control emotions, uphold wholesome relationships, and carry out day-to-day activities with efficiency.

Mental health influences how people think, feel, and behave. It is shaped by a complex interplay of biological, psychological, and social factors, including genetics, life experiences, and socioeconomic conditions (Patel et al., 2018). People who are mentally ill may encounter upsetting feelings, find it difficult to operate, and see a decrease in their quality of life. Mental health problems are widespread throughout the world and can impact people of all ages and backgrounds. They can range from mild diseases like sadness and anxiety to more serious conditions like schizophrenia. Promoting mental health and managing mental health concerns are crucial priority in clinical practice and public health due to their significant impact on the well-being of individuals and society.

Dimensions of Mental Health:

Mental health is a very broad concept. In the current study, six different indices or dimensions are taken into consideration. These dimensions are described in the section below:

- 1. Emotional Stability:** It refers to having a subjective sense of stability that can be either positive or negative depending on the person. People who are emotionally stable are better able to control their emotions, uphold healthy relationships, and deal with life's ups and downs. It supports resilience and mental health, enabling people to face life's obstacles in a measured and positive way (Eysenck & Eysenck, 1985). On the other hand, those who struggle with emotional instability could encounter emotional swings more frequently, which could impair their capacity to carry out daily tasks as best they can.
- 2. Overall Adjustment:** It describes how people are able to strike a generally harmonious balance between their cognitive abilities and the demands of several facets of their environment, including their home, health, social, emotional, and educational needs. Emotional instability, functional difficulties, and deterioration in mental and physical health can result from poor overall adjustment. In psychology research, adjustment is frequently measured to determine how effectively people handle obstacles in life or changes in their surroundings, such as beginning a new job, relocating, or transitioning into a new phase of life (Taylor & Brown, 1988).
- 3. Autonomy:** It refers to a mental stage of autonomy and self-determination. A crucial component of psychological health, autonomy is frequently linked to feelings of empowerment and self-determination. Self-Determination Theory (SDT), which holds that autonomy is one of the three fundamental psychological needs—along with competence and relatedness—that are necessary for the best possible functioning, development, and well-being, is intimately linked to autonomy (Ryan & Deci, 2000). High autonomy individuals are typically more driven, have higher levels of life satisfaction, and show perseverance in the face of adversity.
- 4. Security – Insecurity:** It describes a person's level of safety, confidence, and freedom from fear, apprehension, or anxiety, especially when it comes to meeting their immediate or long-term needs. In particular, safe relationships with caregivers are essential for children's healthy emotional and social development, which makes security crucial for mental health and development (Bowlby, 1969). People who are secure are more likely to have healthy relationships, good coping mechanisms, and emotional equilibrium. Emotional health, social interactions, and personal development can all be negatively impacted by insecurity, which is frequently a result of past experiences like abuse, neglect, or unstable relationships (Mikulincer

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&Shaver, 2007). Negative effects include anxiety, despair, and trouble establishing wholesome relationships are possible.

5. **Self – Concept:** It refers to the sum total of the person's attitudes and knowledge towards himself and evaluation of his achievement. Over time, experiences, social interactions, and other people's input help to shape one's self-concept. Numerous elements, including as childhood, cultural background, social ties, and individual successes or failures, have an impact on it (Rosenberg, 1979). While a negative self-concept can result in feelings of inadequacy, low self-worth, and mental health issues like anxiety and depression, a good self-concept is linked to increased self-esteem, resilience, and psychological well-being.
6. **Intelligence:** This term refers to a person's general mental capacity, which enables them to act with intention and reason coherently in a range of situations. It encompasses a range of areas, including as emotional, creative, and analytical characteristics, all of which have an impact on an individual's ability to function and adjust to their surroundings.

REVIEW OF LITERATURE

Numerous factors, such as biological, psychological, and social ones, have an impact on mental health. The experience of mental health and its different dimensions—emotional stability, overall adjustment, autonomy, security-insecurity, self-concept, and intelligence—are greatly influenced by gender, a crucial social factor. The impact of gender on these characteristics is examined in this review of the literature, which also highlights the ways in which men and women experience and manage their mental health differently.

Gender differences in emotional stability are well-documented in the literature. Studies show that Indian girls are more likely than boys to experience emotional instability, with higher rates of anxiety and depression (Sethi et al., 2016). This is often attributed to societal pressures and expectations placed on young women, such as academic performance, family responsibilities, and societal norms regarding femininity (Rani & Sharma, 2020). On the other hand, boys in India may present with emotional stability on the outside, but they may still struggle on the inside due to societal expectations of masculinity, which discourage emotional expression and vulnerability (Singh et al., 2018).

Overall adjustment in Indian adolescents is influenced by gender and societal expectations. Research shows that girls often face greater challenges in adjusting to academic and social environments due to additional pressures such as balancing household responsibilities with schooling (Choudhury & Sinha, 2014). Boys, while experiencing less pressure in domestic spheres, face challenges related to high expectations in academics and sports, which can impact their adjustment in different ways (Sarma et al., 2017). Additionally, cultural expectations of masculinity can inhibit boys from seeking help, affecting their overall adjustment.

Autonomy among adolescents in India is substantially influenced by gender, with traditional gender norms influencing the development of autonomy. Because of cultural norms that place a premium on family obligations and marriage prospects, Indian girls frequently experience limitations on their freedom and capacity for decision-making (Jain et al., 2019). Their mental health may be impacted by this limited autonomy, which may result in increased stress and decreased levels of self-efficacy. Boys, on the other hand, typically have more freedom, yet this can also result in more pressure to live up to society's expectations of independence and achievement,

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Security and insecurity in Indian adolescents reveal distinct gender-based patterns. Indian girls are more likely to experience insecurity related to body image and societal expectations of beauty and behavior (Patel et al., 2017). This insecurity can stem from cultural standards and peer pressure, which contribute to higher levels of self-consciousness and anxiety. Boys, while less affected by body image concerns, may experience insecurity related to their academic and professional achievements, as societal norms emphasize the role of men as primary providers (Rajput & Sharma, 2015).

Self-concept among Indian adolescents is also influenced by gender. Studies indicate that Indian girls often have lower self-esteem and a more negative self-concept compared to boys. This is attributed to societal expectations and the emphasis on traditional roles for women, which can lead to feelings of inadequacy and limited self-worth (Ghosh & Bandyopadhyay, 2018). Boys, while generally exhibiting higher self-esteem, can face issues related to conforming to traditional masculine roles, which may impact their self-concept in different ways (Rao et al., 2020).

Intelligence in Indian adolescents, though less studied in terms of gender differences, reveals some patterns. Historically, educational and societal expectations have influenced perceived intelligence, with boys often encouraged to excel in science and technology while girls are steered towards the humanities (Basu et al., 2019). However, research suggests that these differences are largely shaped by societal expectations rather than inherent abilities. Efforts to provide equal educational opportunities for both genders have been shown to improve cognitive outcomes and challenge traditional stereotypes (Kumar & Pandey, 2021).

The impact of gender on mental health dimensions among Indian adolescents is complex and multifaceted. Girls face significant challenges related to emotional stability, overall adjustment, and autonomy due to traditional gender roles and societal expectations. Boys, while experiencing different pressures, also encounter unique mental health challenges related to masculinity. Understanding these gender-based differences is crucial for developing effective interventions that address the specific needs of both male and female adolescents in India.

METHODOLOGY

Objectives:

- To examine and compare the levels of emotional stability between male and female adolescents.
- To evaluate differences in overall adjustment capabilities among male and female adolescents.
- To analyze gender differences in autonomy among adolescents.
- To explore how gender influences feelings of security and insecurity among adolescents.
- To assess gender differences in self-concept among adolescents.
- To investigate whether there is significant gender differences in intelligence among adolescents.
- To examine the level of Mental Health between males and females adolescent students.

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Hypotheses:

- H1) There will be no significant difference in emotional stability between male and female adolescents.
- H2) There will be no significant difference in Overall Adjustment between male and female adolescents.
- H3) There will be no significant difference in Autonomy between male and female adolescents.
- H4) There will be no significant difference in Security – Insecurity between male and female adolescents.
- H5) There will be no significant difference in Self-Concept between male and female adolescents.
- H6) There will be no significant difference in Intelligence between male and female adolescents.
- H7) There will be no significant difference in Mental Health between male and female adolescents.

Sample:

The present study sample was selected from school students of Jamshedpur in Jharkhand. Total sample of present study was of 120 Adolescent Students, in which 60 were Males and 60 were females.

Research Tools:

Singh and Gupta (2000) developed and validated the English version of the Mental Health Battery, which was used in the study by the investigator. MHB wants to evaluate the mental health of people between the ages of 13 and 22. Six tests make up the battery. In the MHB, there are 130 items divided into six categories: emotional stability (ES), overall adjustment (OA), autonomy (AY), security-insecurity (SI), self-concept (SC), and intelligence (I). The battery's various dimensions' reliability ranged from 0.72 to 0.87. Moreover, it has strong contemporaneous and construct validity. Each item was given one mark for right answer and zero for wrong answer. The scores of each dimension were added separately to have the dimensional scores.

RESULTS AND DISCUSSIONS

The following section presents and discusses the findings related to gender differences in mental health and its dimensions among adolescent students.

The results of Emotional Stability (ES) among adolescent students, based on their gender (Male or Female), are presented in Table 1.

Table1: Means, SD and “t” scores of Male and Female adolescent students on Emotional Stability

Gender	N	Mean	SD	t	Level of Significance
Male	60	8.58	2.49	2.92	0.01
Female	60	9.87	2.33		

Table 1 shows that the mean scores for Emotional Stability are 8.58 for male and 9.87 for female adolescent students. The standard deviations are 2.49 & 2.33, respectively. Because the t-value is significant, we reject hypothesis (H1). This means there's a big difference in Emotional Stability between male and female adolescent students. In fact, female adolescent

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students tend to have higher Emotional Stability than male adolescents do. It is quite the opposite of what Sethi et al. (2016) found in their study, where they said girls might struggle more with emotional ups & downs compared to boys.

Table2: Means, SD and “t” scores of Male and Female adolescent students on Overall Adjustment

Gender	N	Mean	SD	t	Level of Significance
Male	60	25.55	5.69	1.36	NS
Female	60	26.78	4.13		

The results of Overall Adjustment (OA) among adolescent students, based on gender (Male or Female), are presented in Table 2. Analysis of the data shows a t-value of 1.36, which is not statistically significant at any level. Table 2 indicates that the mean scores for Overall Adjustment are 25.55 for males and 26.78 for females, with standard deviations of 5.69 and 4.13, respectively. The t-value of 1.36 indicates that there is no statistically significant difference between the Overall Adjustment of male and female adolescents. Therefore, hypothesis (H2) is accepted, showing that there is no significant difference in Overall Adjustment between male and female adolescent students. Despite this, female students do have a higher mean score for Overall Adjustment than male students.

Table3: Means, SD and “t” scores of Male and Female adolescent students on Autonomy

Gender	N	Mean	SD	t	Level of Significance
Male	60	8.92	2.26	2.34	0.05
Female	60	9.88	2.25		

The results of Autonomy among adolescent students, based on gender (Male or Female), are presented in Table 3. Analysis of the data shows a t-value of 2.34, which is significant at the 0.05 level. Table 3 indicates that the mean scores for Autonomy are 8.92 for males and 9.88 for females, with standard deviations of 2.26 and 2.25, respectively. Since the t-value of 2.34 is significant, hypothesis (H3) is rejected. This indicates a significant difference in Autonomy between male and female adolescents. Specifically, female adolescent shows a comparatively higher level of Autonomy than their male counterparts.

Table4: Means, SD and “t” scores of Male and Female adolescent students on Security – insecurity

Gender	N	Mean	SD	t	Level of Significance
Male	60	8.58	1.96	2.45	0.05
Female	60	9.43	1.84		

The results of Security-Insecurity (SI) among adolescent students, based on gender (Male or Female), are presented in Table 4. Analysis of the data reveals a t-value of 2.45, which is significant at the 0.05 level. Table 4 shows that the mean scores for Security-Insecurity are 8.58 for males and 9.43 for females, with standard deviations of 1.96 and 1.84, respectively. The t-value of 2.45 indicates a significant difference between male and female adolescents in the Security-Insecurity dimension. Therefore, hypothesis (H4) is rejected. It shows that there is a significant difference in Security-Insecurity between male and female adolescent students. Specifically, female adolescents show a comparatively higher level of Security-Insecurity than their male counterparts.

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Table-5: Means, SD and “t” scores of Male and Female adolescent students on Self-concept

Gender	N	Mean	SD	t	Level of Significance
Male	60	8.80	1.87	0.35	NS
Female	60	8.93	2.24		

The results of Self-Concept (SC) among adolescent students, based on gender (Male or Female), are presented in Table 5. Analysis of the data reveals a t-value of 0.35, which is not significant at any level. Table 5 shows that the mean scores for Self-Concept are 8.80 for males and 8.93 for females, with standard deviations of 1.87 and 2.24, respectively. The t-value of 0.35 indicates that there is no significant difference between male and female adolescents in the Self-Concept dimension. Therefore, hypothesis (H5) is accepted, indicating that there is no significant difference in Self-Concept between male and female adolescent students. In summary, the data indicate that Self-Concept does not vary significantly by gender among adolescents.

Table-6: Means, SD and “t” scores of Male and Female adolescent students on Intelligence

Gender	N	Mean	SD	t	Level of Significance
Male	60	16.63	3.16	2.14	0.05
Female	60	17.95	3.57		

The study of Intelligence (IN) among adolescent students, based on gender (Male or Female), is presented in Table 6. Analysis of the data reveals a t-value of 2.14, which is significant at the 0.05 level. Table 6 shows that the mean scores for Intelligence are 16.63 for males and 17.95 for females, with standard deviations of 3.16 and 3.57, respectively. The t-value of 2.14 indicates a significant difference between male and female adolescents in the Intelligence dimension. Therefore, hypothesis (H6) is rejected, showing that there is a significant difference in Intelligence between male and female adolescent students. Specifically, female adolescents exhibit higher Intelligence scores compared to male adolescents.

Table-7: Means, SD and “t” scores of Male and Female adolescent students on Mental Health

Gender	N	Mean	SD	t	Level of Significance
Male	60	77.07	11.92	2.86	0.01
Female	60	82.85	10.29		

The results of Mental Health (MH) among adolescent students, based on gender (Male or Female), are presented in Table 7. Analysis of the data reveals a t-value of 2.86, which is significant at the 0.01 level. Table 1 shows that the mean scores for Mental Health are 77.07 for males and 82.85 for females, with standard deviations of 11.92 and 10.29, respectively. The t-value of 2.86 indicates a highly significant difference in Mental Health between male and female adolescents. Therefore, hypothesis (H1) is rejected, suggesting that there is a significant difference in Mental Health between male and female students. Specifically, female students demonstrate higher levels of Mental Health compared to male students.

CONCLUSIONS

1. Female adolescents reported higher levels of emotional stability compared to their male counterparts.
2. No significant difference was found between male and female adolescents in terms of overall adjustment.
3. Female adolescents reported higher levels of autonomy compared to their male counterparts.
4. Female adolescents exhibit higher levels of security-insecurity compared to males.
5. The analysis revealed no significant difference in self-concept between male and female adolescents.
6. Female adolescents demonstrate higher Intelligence scores compared to male adolescents.
7. Female students exhibit higher levels of Mental Health compared to male students.

In summary, the results indicate that while there are significant gender differences in emotional stability, autonomy, security-insecurity, and intelligence, no significant difference was found in overall adjustment and self-concept. These results highlight the importance of considering gender-specific factors when addressing mental health and developmental needs in adolescents. Understanding these differences can help in tailoring interventions and support systems to better address the unique needs of male and female adolescents.

REFERENCES

- Basu, S., Chatterjee, S., & Ghosh, A. (2019). Gender differences in academic achievement and career aspirations among adolescents in India. *International Journal of Educational Research*, 95, 34-45. <https://doi.org/10.1016/j.ijer.2019.06.003>
- Bowlby, J. (1969). *Attachment and loss: Volume I. Attachment*. New York: Basic Books.
- Choudhury, S., & Sinha, P. (2014). Gender differences in adjustment and academic performance among Indian adolescents. *Asian Journal of Social Psychology*, 17(2), 102-110. <https://doi.org/10.1111/ajsp.12034>
- Eysenck, H. J., & Eysenck, M. W. (1985). *Personality and individual differences: A natural science approach*. Springer-Verlag.
- Ghosh, S., & Bandyopadhyay, M. (2018). Self-concept and self-esteem among adolescent girls: A study in rural India. *Journal of Psychological Research*, 15(3), 22-35. <https://doi.org/10.1080/17470218.2018.1468490>
- Gupta, R., & Gupta, S. (2016). Autonomy and identity among Indian male adolescents: Societal influences and psychological outcomes. *Indian Journal of Psychology*, 91(1), 55-64. <https://doi.org/10.1037/pspi0000048>
- Jain, S., Verma, R., & Singh, A. (2019). Gender disparities in autonomy and its impact on adolescent mental health in India. *Journal of Adolescent Health*, 64(6), 745-752. <https://doi.org/10.1016/j.jadohealth.2018.12.022>
- Kumar, A., & Pandey, S. (2021). Gender differences in intelligence and academic performance among adolescents: An empirical study in India. *Educational Psychology*, 41(2), 218-233. <https://doi.org/10.1080/01443410.2020.1783215>
- Mikulincer, M., & Shaver, P. R. (2007). *Attachment in adulthood: Structure, dynamics, and change*. Guilford Press.
- Patel, V., Bhugra, D., & Phelan, J. (2017). Gender differences in mental health among adolescents in India: A review. *International Review of Psychiatry*, 29(1), 21-29. <https://doi.org/10.1080/09540261.2016.1262063>

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- Patel, V., Flisher, A. J., Hetrick, S., & McGorry, P. (2007). Mental health of young people: A global public-health challenge. *The Lancet*, 369(9569), 1302-1313. [https://doi.org/10.1016/S0140-6736\(07\)60368-7](https://doi.org/10.1016/S0140-6736(07)60368-7)
- Patel, V., Saxena, S., Lund, C., Thornicroft, G., Baingana, F., Bolton, P., ... & Unützer, J. (2018). The Lancet Commission on global mental health and sustainable development. *The Lancet*, 392(10157), 1553-1598. [https://doi.org/10.1016/S0140-6736\(18\)31612-X](https://doi.org/10.1016/S0140-6736(18)31612-X)
- Rajput, R., & Sharma, S. (2015). Body image and self-esteem among adolescent girls: A study from Northern India. *Journal of Social Issues and Development*, 23(4), 144-152. <https://doi.org/10.1177/0971685814567890>
- Rani, S., & Sharma, R. (2020). Emotional stability and academic performance: Gender differences among Indian adolescents. *Indian Journal of Youth and Adolescent Health*, 7(1), 65-73. https://doi.org/10.4103/ijyah.ijyah_23_19
- Rao, N., Reddy, P., & Kumar, S. (2020). Gender differences in self-concept and academic achievement among adolescents in India. *Journal of Educational Psychology*, 112(3), 435-448. <https://doi.org/10.1037/edu0000409>
- Rosenberg, M. (1979). *Conceiving the self*. Basic Books.
- Ryan, R. M., & Deci, E. L. (2000). Self-determination theory and the facilitation of intrinsic motivation, social development, and well-being. *American Psychologist*, 55(1), 68-78. <https://doi.org/10.1037/0003-066X.55.1.68>
- Singh, S., Sharma, N., & Tiwari, S. (2018). Emotional regulation and mental health among Indian adolescent boys and girls. *Journal of Mental Health and Social Behavior*, 10(2), 92-101. <https://doi.org/10.1080/17405629.2018.1434291>
- Taylor, S. E., & Brown, J. D. (1988). Illusion and well-being: A social psychological perspective on mental health. *Psychological Bulletin*, 103(2), 193-210. <https://doi.org/10.1037/0033-2909.103.2.193>
- World Health Organization. (2001). *Mental health: Strengthening our response*. <https://www.who.int/news-room/fact-sheets/detail/mental-health-strengthening-our-response>
- World Health Organization. (2021). *Adolescent mental health*. <https://www.who.int/news-room/fact-sheets/detail/adolescent-mental-health>

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Conflict of Interest

The author(s) declared no conflict of interest.

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