

Depression and Peer-Relationship among Adolescents in Haryana

Rupika Chopra¹, Shakuntla Punia² and Santosh Sangwan³

*Department of Human Development and Family Studies, I. C. College of Home Science,
CCS Haryana Agricultural University, Hisar, Haryana 125 001, India*

Mobile: ¹07206571200, ²09992072436, ³09466489181

*E-mail: ¹<rupikachopra90@gmail.com>, ²<shakuntlapoonia@gmail.com>,
³<sangwan.santosh@gmail.com>*

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ABSTRACT Depression is a psychological problem or condition that changes how one thinks and feels, and also affects social behavior and sense of physical wellbeing. The present study was undertaken on 460 adolescents of 11th and 12th grade, that is, 112 studying in university and 348 studying in the government school of the Hisar district of Haryana state falling in age group of 16 to 17 years. The Peer-Relationship Questionnaire (PRQ) was used to assess the peer-relationship and the Children Depression Inventory (CDI) was used to assess the depression status. Results of the study highlighted that university adolescents were more depressed as compared to school adolescents and two aspects of peer-relationship, that is bullying and victimization were positively and significantly correlated with depression whereas another aspect that is pro-social behavior was negatively as well as significantly correlated with depression.

INTRODUCTION

The scenario of adolescents clearly shows that the condition of youth has significantly deteriorated. Studies illustrate the increase in aggressiveness, depression and suicidal cases among adolescents. This gives the clear image of the struggle that adolescents go through, the problems they face. Adolescence, which is the transitional period from childhood to adulthood, is a stage of emotional instability making them vulnerable to depression. Depression among adolescents has emerged as a major mental health problem. Patil (2015) revealed that sixty-eight percent adolescents had mild and moderate degree of depression. Gender differences in depression have also been reported as girls' trend toward more severe depression on negative mood, anhedonia and self-esteem, while boys trend toward more interpersonal problems. Adolescents from urban areas and girls who faced gender discrimination had higher prevalence.

Objectives

- To find the extent of peer-relationship and depression among adolescents.
- Effect of the role of peer-relationship against depression.

METHODOLOGY

The study was conducted in Hisar district of Haryana state on two groups of adolescents, one having transitioned from school to a university atmosphere and another continuing their 11th and 12th in the same school atmosphere. To draw the rural sample, three villages namely Neoli Kala, Behbalpur and Mangali were randomly selected from the list having schools admitting both girls and boys. All the adolescents studying in 11th and 12th standard falling in the age group 16-17 years from both, College of Home Sciences and College of Agriculture of CCS HAU, Hisar were selected colleges of university were included in study to represent urban sample. In total 348 adolescents (132 male and 216 female) from rural and 112 adolescents (52 male and 60 female) from urban area constituted the sample for present study.

Tools

The Peer-Relationship Questionnaire (PRQ) for children developed and standardized by Rigby and Slee (1993) was used to assess the peer-relationship. PRQ comprised of 20 statements having 3 subscales that is bully scale comprising of six statements that is victim scale having five statements and pro-social scale contained a

total of 4 statements. Children Depression Inventory (CDI) developed and standardized by Kovacs (2003) was used to assess the depression status. Children Depression Inventory consisted of 27 items within five dimensions that is, negative mood, interpersonal problems, ineffectiveness, anhedonia and negative self-esteem.

Data Analysis

SPSS Program was run to analyze the data. Independent sample t- test, ANOVA and correlation were used to examine the peer-relationship and depression among adolescents.

RESULTS

Personal Profile of Respondents

Personal profile refers to the information with regard to school and university adolescents' with personal variables. Table 1 highlights that mean age of adolescents studying in university and school was 16.58 ± 06.43 years and 16.66 ± 06.44 years respectively, whereas the mean age of total sample was 16.58 ± 06.43 years. Gender distribution in case of total sample reveals that more than half (60.2%) respondents were females. Table further reveals that mean academic achievement of adolescents enrolled in univer-

sities were better academic achievers ($M=76.61 \pm 16.52$) than school -going adolescents ($M=61.88 \pm 09.75$). Almost similar distribution was observed across adolescents enrolled in school and university with regard to their academic class that is 11th (48.7%) and 12th (47.8%), respectively.

Depression Status of Adolescents across Educational Institutes

Table 2 revealed depression status of adolescents across educational institutes. Results unfold that 44.10 percent adolescents had average negative mood feelings. Educational institute wise comparison shows that 45.50 percent school students reported average negative mood symptoms against their counterparts that is university students (39.80%). Regarding the interpersonal problems, the data highlights that almost equal respondents from school (31.10%) and university samples (31.90%) had average level of interpersonal problems. Looking at the data related to anhedonia, it was seen that majority of the respondents in all three groups that is, total sample had problems of anhedonia at various levels that is average (47.80%), slightly above average (17.40%) and much above average (12.40%). The clinical symptoms of depression were observed in seventeen percent of adolescents. University students were slightly more

Table 1: Personal profile of adolescents across educational institute

S. No.	Personal variables	School (n=347)	University (n=113)	Total (n=460)
1	Adolescent's Age (Mean)	16.66 $\pm$ 06.44	16.58 $\pm$ 06.43	16.58 $\pm$ 06.43
2	Sex			
	Male	131 (37.80)	52 (46.00)	183 (39.80)
	Female	216 (62.20)	61 (54.00)	277 (60.20)
3	Ordinal Position			
	1 st born	116 (33.40)	38 (33.60)	154 (33.50)
	2 nd born	96 (27.70)	41 (36.30)	137 (29.80)
	Up to 4	111 (32.00)	33 (29.20)	144 (31.30)
	>4	24 (06.90)	01 (00.90)	25 (05.40)
4	Academic Achievement (Mean)	61.88 $\pm$ 09.75	76.61 $\pm$ 16.52	65.01 $\pm$ 12.98
	Academic Achievement			
	Poor (3 rd division)	32 (09.20)	14 (12.40)	46 (10.00)
	Average (2 nd division)	89 (25.60)	06 (05.30)	95 (20.70)
	High (1 st division)	226 (65.10)	93 (82.30)	319 (69.30)
5	Academic Class			
	11 th	169 (48.70)	54 (47.80)	223 (48.50)
	12 th	178 (51.30)	59 (52.20)	237 (51.50)
6	Attending Coaching Classes			
	No	255 (73.50)	110 (97.30)	365 (79.30)
	Yes	92 (26.50)	03 (02.70)	95 (20.70)

Note: Figures in parentheses indicate percentages

Table 2: Depression status of adolescents across educational institute

<i>Educational institute</i>	<i>Aspects of depression</i>	<i>School (n=183)</i>	<i>University (n = 277)</i>	<i>Total (n=460)</i>
<i>Negative Mood</i>				
	Much below average (35 to below 39)	27 (07.80)	14 (12.40)	41 (08.90)
	Slightly below average (40 – 44)	82 (23.60)	27 (23.90)	109 (23.70)
	Average (45 – 55)	158 (45.50)	45 (39.80)	203 (44.10)
	Slightly above average (56 – 60)	42 (12.10)	13 (11.50)	55 (12.00)
	Much above average (61 and above)	38 (11.00)	14 (12.40)	52 (11.30)
<i>Interpersonal Problems</i>				
	Much below average (35 to below 39)	03 (00.90)	-	03 (00.60)
	Slightly below average (40 – 44)	139 (40.10)	47 (41.60)	186 (40.40)
	Average (45 – 55)	108 (31.10)	36 (31.90)	144 (31.40)
	Slightly above average (56 – 60)	30 (08.60)	10 (08.80)	40 (08.70)
	Much above average (61 and above)	67 (19.30)	20 (17.70)	87 (18.90)
<i>Ineffectiveness</i>				
	Much below average (35 to below 39)	164 (47.30)	26 (23.00)	190 (41.30)
	Slightly below average (40 – 44)	36 (10.40)	11 (09.70)	47 (10.20)
	Average (45 – 55)	117(33.70)	44 (38.90)	161 (35.00)
	Slightly above average (56 – 60)	18 (05.20)	19 (16.80)	37 (08.00)
	Much above average (61 and above)	12 (03.50)	13 (11.50)	25 (05.40)
<i>Anhedonia</i>				
	Much below average (35 to below 39)	18 (05.20)	04 (03.50)	22 (04.80)
	Slightly below average (40 – 44)	61 (17.60)	20 (17.70)	81 (17.60)
	Average (45 – 55)	176 (50.70)	44 (38.90)	220 (47.80)
	Slightly above average (56 – 60)	59 (17.00)	21 (18.60)	80 (17.40)
	Much above average (61 and above)	33 (09.50)	24 (21.20)	57 (12.40)
<i>Negative Self – esteem</i>				
	Much below average (35 to below 39)	56 (16.10)	12 (10.60)	68 (14.80)
	Slightly below average (40 – 44)	22 (06.30)	15 (13.30)	37 (08.00)
	Average (45 – 55)	222 (64.00)	63 (55.80)	285 (62.00)
	Slightly above average (56 – 60)	26 (07.50)	11 (09.70)	37 (08.00)
	Much above average (61 and above)	21 (06.10)	12 (10.60)	33 (07.20)
<i>Depression</i>				
	Much below average (35 to below 39)	22 (06.30)	06 (05.30)	28 (06.00)
	Slightly below average (40 – 44)	80 (23.10)	16 (14.20)	96 (20.90)
	Average (45 – 55)	193 (55.60)	66 (58.40)	259 (56.30)
	Slightly above average (56 – 60)	28 (08.10)	10 (08.80)	38 (08.30)
	Much above average (61 and above)	24 (06.90)	15 (13.30)	39 (08.50)

Note: Figures in parentheses indicate percentages

depressed as higher percentage of university students (22%) had above average and much above average of depression symptoms against school students (15%). The results of present study are in line with findings of Punia et al. (2013) who found that out of the total sample 1/4 of the respondents displayed depressive symptoms (23.7 %) and the rest that is 76.3 percent were non-depressed as they were in average category of depression.

Comparison of Depression against Peer-Relationship

Table 3 displays the comparison of depression among adolescents against different levels

of peer-relationship components. Significant differences were observed in depression mean scores categorized on the basis of different levels of bullying ($F_{(2, 457)} = 9.07, p < 0.05$), victimization ($F_{(2, 457)} = 40.26, p < 0.05$), and pro-social behavior ($F_{(2, 457)} = 3.08, p < 0.05$). The mean scores predicted that the adolescents who were bullied and victimized more frequently ($M = 18.50$ and $M = 22.66$ respectively) reported more depression against their counterparts reporting moderate ($M = 14.00$ and $M = 12.97$) and low ($M = 9.80$ and $M = 9.09$) levels of bullying and victimization respectively. Abdirahman et al. (2013) found the strong association between bullying and poor mental health in the Caribbean emphasizes the need to develop and implement strate-

Table 3: Comparison of depression against peer-relationship

S. No.	Peer-relationship			
1	Low Mean±SD 09.80 ^a ±05.32	Bullying Moderate Mean±SD 14.00 ^{ab} ±06.16	High Mean±SD 18.50 ^b ±12.02	F value 9.07 ^m
2	Low Mean±SD 09.09 ^a ±04.70	Victimization Moderate Mean±SD 12.97 ^b ±05.86	High Mean±SD 22.66 ^c ±11.83	40.26 ^m
3	Low Mean±SD 11.11 ^a ±06.35	Pro-social Behavior Moderate Mean±SD 11.89 ^b ±07.35	High Mean±SD 09.80 ^b ±05.18	3.08 ^m

^m Significant at 5 percent level

Note: Means in the same row that do not share superscripts differ at $p < 0.05$ using Duncan multiple difference comparison.

gies for reducing bullying among children and adolescents. The finding is also consistent with a previous study conducted by Jamir et al. (2014) who found that 138 (83.6%) of the sample are bullied. Bullied adolescents have poorer academic performance and males are bullied more compared to females with 86.1 percent. Results show significant negative correlation between being bullied and self-esteem level. Also, significant positive correlation is found between being bullied and depression. When depression scores were compared against pro-social dimension, it was reflected that adolescents who perceived relatively more pro-social elements in relationship with their peers reported less depression scores ($M = 9.80$) against the group of adolescents perceiving poor ($M = 11.11$) and good ($M = 11.89$) pro-social element in their relationship with peers. This result supports the notion that pro-social behavior is related to psychological wellbeing.

Relation between Depression and Peer-relationship among Adolescents

Going through data presented in Table 4, results pertaining to correlation between depression and peer-relationship were apparent. Pertaining data determined that bullying was pos-

itively as well as significantly correlated with various aspects of depression that is, negative mood ($r = 0.12$), interpersonal problems ($r = 0.21$), ineffectiveness ($r = 0.29$), anhedonia ($r = 0.09$) and total depression ($r = 0.27$) at 0.05 level of significance. This indicates that when bullying from peers increased, the level of total depression along with its components also increased during adolescence. It was noticed that another aspect of peer-relationship that is, victimization is also positively and significantly correlated with all the depression aspects that is, negative mood ($r = 0.25$), interpersonal problems ($r = 0.19$), ineffectiveness ($r = 0.31$), anhedonia ($r = 0.13$), negative self-esteem ($r = 0.10$) and total depression ($r = 0.38$) at 0.05 level of significance. This reflects that victimized adolescents were more depressed. Malhi et al. (2015) also found that physical bullying was reported by eight percent, relational bullying by twelve percent, and four percent reported being victims of both physical and relational bullying. Boys reported more direct victimization while girls were more likely to be victims of relational bullying. Victimization status was significantly related to self-reported depression ($F = 9.48$) and total difficulties score ($F = 17.38$). Victims of relational aggression had relatively higher depression scores and conduct problems,

Table 4: Correlation between depression and peer – relationship among adolescents

S. No.	Depression Peer-relationship	Negative mood	Interpersonal problems	Ineffecti- veness	Anhedonia	Negative self-esteem	Total depression
1	Bullying	0.12 ^m	0.21 ^m	0.29 ^m	0.09 ^m	0.05	0.27 ^m
2	Victimization	0.25 ^m	0.19 ^m	0.31 ^m	0.13 ^m	0.10 ^m	0.38 ^m
3	Pro-social behavior	-0.06	-0.09 ^m	-0.11 ^m	-0.06	-0.01	-0.14 ^m

^mCorrelation is significant at the 0.05 level

while physically victimized adolescents reported more peer problems. When adolescents' perception about the element of pro-social behavior in peer-relationships was correlated with depression scores, it was concluded that pro-social behavior is negatively as well as significantly correlated with interpersonal problems ($r = -0.09$), ineffectiveness ($r = -0.11$) and with total depression ($r = -0.14$) at 0.05 level of significance. Results pinpoint the fact that presence of pro-social behavior in peer-relationship decreases interpersonal problems, lowers the feeling of ineffectiveness and also, overall depression symptoms. This unfolds that better peer-relationship with peers lowers down the risk of depression in adolescents.

CONCLUSION

University students were slightly more depressed as higher percentage of university against school students. Adolescents who were bullied and victimized more frequently reported more depression. Adolescents who perceived relatively more pro-social elements in relationship with their peers reported less depression.

RECOMMENDATIONS

- As academic achievement was found to influence depression of adolescents, therefore, families in conjunction with schools can work on improving this area by noticing the child's behavior and achievement

or failure graph and thus help children by winning his confidence.

- Professionals in the field can frame strategies to reduce depression among adolescents keeping in account the results of the study and most importantly within the limits of the families pertaining parental educational and occupational status.

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