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Prevalence Rate of Depression and Anxiety among College Going Adolescents in India

Dr. Jasbir Rishi

Associate Professor

Department of Psychology

HMV, Jalandhar

Abstract:

Adolescent by itself is a period of adjusting to the changes in one's body and at emotional, cognitive and behavioral level. Mental health issues like depression and excessive anxiety can lead to difficulty in academics, relationships, and other important day to day life challenges. The aim of the current study was to assess depression and anxiety in a group of college going adolescents. The measures used were Beck Depression Inventory (Beck, 1961) and Beck Anxiety Inventory (Beck, 1961). The results indicate that girls reported more symptoms of depression and anxiety in comparison to boys as revealed through the questionnaires. The findings of the current investigation also revealed that professional students reported more symptoms of depression and anxiety than the non-professional students. The current research suggests mental health evaluation and interventions for the college going students.

Keywords: Depression, anxiety, stress, mental health, counseling.

Introduction

Depression and anxiety on college campuses have risen to epidemic proportions. There are a variety of suspected causes for the alarming trend, which is supported by numerous studies, College years have long been a time of psychological stresses. As academic pressures rise and fall, so do anxiety levels. Roommate and relationship problems, homesickness, and adjustment to college life create a lot of stress among adolescents.

Adolescents face significant stress when they enter colleges because of developmental issues, societal pressures on them to perform well and hosts of psychological issues like identity formation and confusion, career and relationship issues, being on your own in a new environment, changes in family relations, changes in social life, exposure to new people ideas and temptations. Some of the salient problems specific to college students are, time pressure, fear of failure, struggle to establish identity, pressure of academic excellence and tough competence. Emotional problems such as feeling inferior to others, not able to think properly, worrying too much, feel life is not worth living. Adjustment to college life and attending a university for the first time can be a stressful experience for college students. Because of the challenges faced when adapting to these life changes, college students are at risk of developing mental health issues more specifically like excessive anxiety, depression and hence suicidal ideation.

The incidence of depressive symptoms has been increasing among college students. According to a study of college students receiving counseling services between the years of

1988 and 2001, a 20% increase occurred in the number of students seeking help for depressive symptoms during that time period (Benton, Robertson, Tseng, Newton, & Benton, 2003). In a survey of university counseling center directors completed in 2006, it was found that 91.6% of the respondents reported that they had observed an increase in the number of students experiencing psychological problems in the recent years (Blanco, et. al, 2008). The development of depressive symptoms may have a significant impact on the ability of college students to successfully complete academic requirements. In a nationwide study, 43% of college students reported feelings depressed that it was difficult for them to study (American College Health Association, 2009). In 2011, the American College Health Association–National College Health Assessment (ACHA–NCHA)—a nationwide survey of college students at 2- and 4-year institutions— found that about 30 percent of college students reported feeling —so depressed that it was difficult to functionl at some time in the past year. Depression can affect your academic performance in college. Studies suggest that college students who have depression are more likely to smoke. Research suggests that students with depression do not necessarily drink alcohol more heavily than other college students. But students with depression, especially women, are more likely to drink to get drunk and experience problems related to alcohol abuse, such as engaging in unsafe sex. Depression and other mental disorders often co-occur with substance abuse, which can complicate treatment. Anxiety and depression are particularly concerning because suicide is one of the leading causes of death during adolescence

Studies have also shown sex differences in depression. Women report more symptoms of depression than males (Boyd & Weissman, 1986) and appear to emerge in mid adolescents (Kandel & Davies, 1982). Behavioral problems are often more found among adolescent boys than girls. It puzzled researchers why the shift in depression is more prevalent among girls than boys. These differences appears not be explained on factors like response bias, greater openness to acknowledge psychological difficulties and other attributes apart from actual depression experienced by the individual. There are three possible explanations of this shift towards gender differences prevalence in favor of women.

Developmental models of anxiety and depression also treat adolescence as an important period, especially in terms of the emergence of gender differences in prevalence rates that persist through adulthood (Rudolph, 2009). Starting in early adolescence, compared with males, females have rates of anxiety that are about twice as high and rates of depression that are 1.5 to 3 times as high (American Psychiatric Association, 2013). Most of the research has shown that girls experience more anxiety than boys. In a study of gender differences in anxiety disorders and anxiety symptoms in adolescents, Lewinsohn et al. (1998) found that among current and recovered cases, female participants reported experiencing a significantly higher degree of anxiety symptomatology than male participants. Similarly, Hewitt and Norton (1993) have confirmed that women with anxiety disorders appear to report a significantly higher severity level of the cognitive and somatic symptoms of anxiety, compared to men, when using the Beck Anxiety Inventory

Objectives

The present study aims to find the prevalence rate of depression and anxiety in a group of college-going adolescents (boys and girls) and the difference between the two groups.

Methodology

Sample

The entire sample consisted of 250 undergraduate and post-graduate students pursuing professional and non-professional courses from 10 different colleges of Jalandhar city (Punjab). Of the total sample, 125 were the boys and 125 were the girls. The age range being from 18 to 26 years with a mean age of 22.15 years and SD of 2.61. Of the total sample, 100 students belonged to undergraduate and 150 belonged to post-graduate courses.

Measures

(i) **Sociodemographic Data Sheet:** It was developed by the investigators to obtain information about respondents' name, age, gender, class/course, its year and stream.

(ii) **Beck Depression Inventory (BDI, Beck et al, 1961).** It is a 21-item self-reporting scale which examines characteristics, attitude and symptoms of depression. Internal consistency for the BDI ranges from 0.73 to 0.92 with a mean of 0.86. The BDI demonstrates high internal consistency, with alpha coefficients of 0.86 and 0.81 for psychiatric and non-psychiatric populations respectively. The score ranges from 0-63. The higher the score, more severe the symptoms. It is not used for diagnosis purpose but rather to know the severity of depressive symptoms.

(iii) **Beck Anxiety Inventory (BAI, Beck, et al, 1993).** It is a four-point rating scale consisting of twenty-one adjectives related to different domains of anxiety symptoms like cognitive, physiological, emotional and behavioral. The patient has to tick on the concerned anxiety symptom depending on the experience of its severity. The score ranges from 0-63. The higher the score, more severe the symptoms. The Inventory has sufficient reliability, validity and internal consistency. The cut-offs for the various categories of depression were 0-9 no depression, 10-19-mild depression, 20-29-moderate depression, above 30-severe depression.

Results and discussion

Descriptive statistics like mean and SD were calculated and t-ratio was also found out to know the difference between the two groups.

Table 1. Distribution of students according to Gender

S.No	Gender	Students	
		Frequency	Percentage
1	Boys	125	50%
2	Girls	125	50%
	Total	250	100%

Table2 : Mean, SD, t-value of Depression Scores On BDI of Boys and Girls

S.No	Mean	SD	
Boys (N-125)	12.64	2.10	7.34**
Girls (N-125)	14.30	2.67	

As shown in table no 3, when boys and girls are compared on the variable of depression, t-value (7.34) has been found to be significant. It is, therefore, inferred from this that boys and girls differ on the measure of depression. Girls have higher scores on BDI than boys. It means that girls report more depressive symptomology than boys. The gender difference in depression is one of the most robust findings in psychiatric epidemiology. The report on Global Burden of Disease estimates the point prevalence of unipolar depressive episodes to be 1.9% for men and 3.2% for women, and the one-year prevalence has been estimated to be 5.8% for men and 9.5% for women. Similar findings were obtained by Bebbington (1996) and Nolen-Hoeksema (1987). Similarly, Kessler et al. (1994) reported that women in the United States are about two-thirds more likely than men to be depressed, and a national psychiatric morbidity survey in Britain showed a similar greater risk of depression for women. A comprehensive review of almost all general population studies conducted to date in the United States of America, Puerto Rico, Canada, France, Iceland, Taiwan, Korea, Germany and Hong Kong, reported that young women predominated over men in lifetime prevalence rates of major depression (Piccinelli & Homen, 1997). In India similar findings were obtained by Verma, Jain & Roy (2014).

Table3 : Mean, SD, t-value of Anxiety scores on BAI of Boys and Girls.

S.No	Mean	SD	t
Boys (N-125)	17.74	3.76	6.29S**
Girls (N-125)	20.19	4.56	

As shown in table no 3, when boys and girls are compared on the variable of anxiety, t-value (6.29) has been found to be significant. It is, therefore, inferred from this that boys and girls differ on the measure of anxiety. Girls have higher scores on BAI than boys. It means that girls report more anxiety symptoms than boys. Similar findings were obtained by Campbell & Rapee (1994) and (Costello, Egger & Angold, 2003). However inconsistent findings were, however, obtained by Deb, Chatterjee & Walsh (2010). In their study of 460

adolescents (Boys= 220, girls=240) in different schools and colleges in Calcutta, they found that boys have significantly higher anxiety than the girls.

This study suggests that there should be a more comprehensive comparative study to assess the prevalence of depression and anxiety among male and female population. Moreover the counsellors in colleges should identify these traits and as these traits do not have negative effects on the mental and physical health, and overall performance of the adolescents in India.

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