

Effect of Self Confidence on Depression among Adolescents

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ABSTRACT: The present study was undertaken to study the gender differences with regard to the effect of self-confidence on depression among adolescents. Keeping in view the main objective of the study, two levels of self-confidence (high and low) were grouped together with the two levels of sexes (boys and girls) to yield four conditions. All the subjects were matched on their educational level and SES level. The selection of the subjects was done using randomization technique. A 2x2 factorial design was made. A sample of 100 subjects was equally divided among high and low self-confidence which was further equally divided on the gender. “Self-confidence Inventory” developed by Rekha Gupta (2013) was administered to determine the level of Self-Confidence. “Manual for Depression scale” developed by Shammi Karim and Rama Tiwari (1986) was administered to determine the level of depression. The Mean and ANOVA were utilised to examine the outcome of the study. The results revealed that significant difference exists between adolescents with high and low level of self-confidence on depression and its dimensions but with no gender differences as such.

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I. INTRODUCTION

As defined by the Webster’s New Collegiate Dictionary [1977], adolescence refers to the, ‘process of growing up’ or to the ‘period of life from puberty to maturity’. Linguistically as well the word is a Latin word meaning ‘to grow up’ or to ‘come to maturity.’ If we start at the beginning as it were and set out to define the term adolescence from a psychological perspective, then immediately two aspects become apparent. First – that adolescence as a period cannot even be defined in a way that makes it a period of development independent or immune of human judgment. In other words, the question is as to whether adolescence is a social construction. Second – that it usually has to be defined with the sort of ambiguity that has left the door open for rival theories of adolescence [Vaness, 1960].

Taking for example, Buhler’s [1954] definition which has most likely reached general acceptance among developmental psychologists: Adolescence is an in-between period beginning with the achievement of physiological maturity and ending with the assumption of social maturity- that is with the assumption of social, sexual, economic and legal rights and duties of the adult. The definition is biological at the outset, but except for the word ‘sexual’, its termination is entirely in social terms. In other words, the termination of adolescence is subject to the particular customs of the culture- it is culturally specific. Adolescence is thus subject to human judgment. It has the implication that adults can wilfully prolong adolescence by decisions about what defines the termination of it.

Self-confidence is a person's belief or trust in their own ability. Confidence is a feeling of trust in someone or something. To be self-confident is to have confidence in yourself. Self-confident people don't doubt themselves. Self-belief has been directly connected to an individual's social network, the activities they participate in, and what they hear about themselves from others. Positive self-esteem has been linked to factors such as psychological health, mattering to others, and both body image and physical health. Low self-esteem in adolescents has been shown to be an important predictor of unhealthy behaviours and psychological problems such as suicidal ideation later in life.

According to World Health Organization, depression is a common mental disorder, characterized by sadness, loss of interest or pleasure, feelings of guilt or low self-worth, disturbed sleep or appetite, feelings of tiredness and poor concentration.

Mayo Clinic Staff, Mayo Foundation for Medical Education and Research, describes depression as a mood disorder that causes a persistent feeling of sadness and loss of interest. Also called major depressive disorder or clinical depression, it affects how one feels, thinks and behaves and can lead to a variety of emotional and physical problems. One may have trouble doing normal day-to-day activities, and sometimes he/she may feel as if life isn't worth living. In a study conducted by Marina Marcus, M. Taghi Yasamy, Mark van Ommeren, and Dan Chisholm, Shekhar Saxena (2012). "A Global Public Health Concern", depression has been pointed out as a significant contributor to the global burden of disease and affects people in all communities across the world. Today, depression is estimated to affect 350 million people. The World Mental Health Survey conducted in 17 countries found that on average about 1 in 20 people reported having an episode of depression in the previous year.

HYPOTHESIS

1. Adolescents with high and low self-confidence will differ significantly from each other on depression and its dimensions.
2. Boys and girls will differ significantly from each other on depression and its dimensions.

II. METHOD

Sample- The total sample is consistent of 100 subjects equally divided among high and low self-confidence and boys and girls. All the subjects will be matched on their educational level and SES level. The selection of the subjects has been done using randomization technique from the schools of Delhi. The sample for the study consists of 100 adolescent students studying in XI and XII class. The age range of the sample happens to be 16-18 years.

Tools – a) Gupta Rekha (2013). Description - The SCI has been designed to assess the level of Self-Confidence among adolescents and adults. The test consists of 56 statements related to one's thinking on different situations. Responses are given to all 56 statements as right or wrong.

b) Karim Shammi and Tiwari Rama (1986). "Manual for Depression Scale". Description - Since depression is closely associated with the physical and emotional problems and with the adjustment problems as well, it is essential that there should be a co-ordination between them. Hence, the items of the test are framed in such a manner that they don't only measure the depression in an individual but also the degree of depression in an individual. The test constitutes of 96 items related to 12 aspects of depression ie, apathy, sleep disturbance, pessimism, fatigability, irritability, social withdrawal and self-centeredness, dejected or sadness, self-dislike, self-acquisition, self-harm, somatic reoccupation and indecisiveness.

III. PROCEDURE

The above mentioned two scales were administered on the selected sample of adolescents. First, some basic personal information was collected with bio-data sheet prepared for the same purpose. A day was chosen for the administration of test basis the availability of the adolescents. The adolescents were seated in a separate room and briefed about the tests being conducted and taking them through the procedure of each test separately. After clarifying their doubts and queries, each student was handed over a set of the two tests each along with standard stationery like pen, pencils, erasers etc. The room was kept noise free as much as possible during the process of administration along with proper amenities like drinking water, air conditioning etc. After this, the tests were administered as per the time allotted for each test. Finally, all the test sheets were taken back from the adolescents and they were thanked for their time and effort for taking this test with us. Post this, the raw data was tabulated with the help of scoring keys and raw data was evaluated. The obtained responses were further processed with the help of statistical techniques using Mean, SDs and ANOVA to draw the inferences.

IV. RESULTS AND DISCUSSIONS

To test the proposed hypotheses the obtained data was statistically analysed by computing Means, SDs, and F-values. The results of which were summarised in tables below.

The first hypothesis which states that "adolescents with high and low self-confidence will differ significantly from each other on depression and its dimensions", to test this, F-value was computed. 'F' Value of High and Low for SCI was found to be significant at 0.01 level, hence the H1 hypothesis is approved assuming that significant difference exists between the two groups. On the basis of obtained findings, the proposed hypothesis is accepted and it can be confirmed that adolescents with high self-confidence will differ significantly from adolescents with low self-confidence on depression and its dimensions.

Cheng, Helen; Furnham, Adrian (2003), examined differences in the personality, self-esteem, and demographic predictions of happiness as opposed to depression. Barhum, Lana; (2018) writes about Depression being much like a lying bully and also that it makes you self-critical with depressive feelings and worsens lack of self-confidence.

The second hypothesis which states that “Boys and girls will differ significantly from each other on depression and its dimensions”, to test this hypothesis, F-value was computed. No gender difference was found on level of DEP and its values as the F value was not found to be significant, hence the H2 hypothesis is not approved assuming that no significant difference exists between the two groups.

Similar to the current study, Bennett DS, et al. (2005) concluded that in general, the experience of depression is highly similar for adolescent girls and boys

Table 3 shows the trend of the sample and the observation clearly shows that Analysis of Variance for Apathy showed no significant value for group that is high and low SC. It means, both the groups do not differ significantly on the level of AP. Likewise, no gender difference was found on level of AP as the F value was not found to be significant. The interaction between the two levels of groups and the two levels of sex showed significant impact on the level of AP in a combined manner. The obtained F-value as found to be significant at 0.05 level. It means that when the level of self-confidence matched with sex, significant impact is observed on the level of AP. The observation of mean values revealed that the interaction between the two levels of groups and the two levels of sex scored highest mean value on depression than other sources of variations.

Analysis of Variance for Sleep Disturbance showed significant value for group that is high and low SC as well as with the interaction between the two levels of groups and the two levels of sexes. The obtained F-value as found to be significant at 0.05 level. It means, both the groups differ significantly on the level of SLD and also when the level of self-confidence matched with sex, significant impact is observed on the level of SLD. Whereas no gender difference was found on level of SLD as the F value was not found to be significant. The observation of mean values revealed that the interaction between the two levels of groups and the two levels of sex scored highest mean value on depression than the other sources of variations.

Analysis of Variance for Pessimism, Fatigability, Dejected or Sadness, Self-harm and Depression showed significant value for group that is high and low SC. The obtained F-value as found to be significant at 0.05 level. It means, both the groups differ significantly on these levels. Whereas no gender difference was found on these levels as the F value was not found to be significant. The interaction between the two levels of groups and the two levels of sex also showed no significant impact on these levels in a combined manner. It means that when the level of self-confidence matched with sex, no significant impact is observed on these levels. The observation of mean values revealed that the group which is high and low SC scored highest mean value on depression than the other sources of variations.

Analysis of Variance for Irritability (IRR), Social Withdrawal and Self Centredness (SWS), Self-dislike (SD), Self-acquisition (SA), Somatic-Reoccupation (SR) and Indecisiveness (IND) showed no significant value for group that is high and low SC. It means, both the groups do not differ significantly on these levels. Likewise, no gender difference was found on these levels as the F value was not found to be significant. The interaction between the two levels of groups and the two levels of sex also did not show any significant impact on these levels in a combined manner. It means that when the level of self-confidence matched with sex, no significant impact is observed on these levels.

The overall results of the present study have shown that adolescents with high and low self-confidence differ significantly from each other on depression and its dimensions. However, no gender difference has been found on level of DEP and its values. The results have clearly showed that the adolescents scored highest SC value on AP (Apathy) and lowest SC value on IND (Indecisiveness) which are the dimensions of Depression. Also, in comparison to girls, the boys have scored highest mean value on AP while girls have scored higher mean value on IRR (Irritability), also a dimension of Depression.

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TABLE NO. 1

MEANS OF TOTAL BOYS AND TOTAL GIRLS

VARIABLES	BOYS MEAN	GIRLS MEAN
Self-Confidence Index (SCI)	20.36	20.24
APATHY	10.12	8.64
SLEEP DISTURBANCE	7.08	6.78
PESSIMISM	6.24	5.64
FATIGABILITY	6.32	5.14
IRRITABILITY	5.56	5.62
SOCIAL WITHDRAWAL & SELF CENTREDNESS	5.88	5.14
DEJECTED & SADNESS	5.66	4.82
SELF DISLIKE	4.92	4.34
SELF ACQUISITION	4.80	4.02
SELF HARM	4.56	3.62
SOMATIC REOCCUPATION	4.14	3.30
INDECISIVENESS	3.24	2.74
TOTAL DEPRESSION	68.12	59.82

TABLE NO. 2

MEANS OF TOTAL HIGH SC AND TOTAL LOW SC

VARIABLES	TOTAL HIGH SC MEAN	TOTAL LOW SC MEAN
Self-Confidence Index (SCI)	12.66	27.94
APATHY	8.98	9.78
SLEEP DISORDER	6.24	7.62
PESSIMISM	5.30	6.58
FATIGABILITY	5.00	6.46
IRRITABILITY	5.08	6.10
SOCIAL WITHDRAWAL & SELF CENTREDNESS	4.94	6.08
DEJECTED & SADNESS	4.72	5.76
SELF DISLIKE	4.16	5.10
SELF ACQUISITION	3.96	4.86
SELF HARM	3.50	4.68
SOMATIC REOCCUPATION	3.26	4.18
INDECISIVENESS	2.90	3.08
TOTAL DEPRESSION	57.88	70.06

TABLE NO. 3
ANALYSIS OF VARIANCE FOR TOTAL DEP AND ITS DIMENSIONS

VARIABLES	SOURCE OF VARIATION		
	H. L.	SEX	H.L. SEX
APATHY	0.83	2.90	4.03*
SLEEP DISTURBANCE	4.06*	0.17	4.36*
PESSIMISM	5.77*	0.88	2.43
FATIGABILITY	5.85*	3.90	1.32
IRRITABILITY	3.58	0.03	0.95
SOCIAL WITHDRAWAL & SELF CENTREDNESS	2.67	1.14	2.15
DEJECTED & SADNESS	4.08*	1.55	0.02
SELF DISLIKE	3.64	0.90	1.53
SELF ACQUISITION	3.57	2.24	1.35
SELF HARM	4.89*	2.82	2.89
SOMATIC REOCCUPATION	3.34	2.00	0.52
INDECISIVENESS	0.26	1.45	0.64
TOTAL DEPRESSION	5.01*	1.92	2.60

* Significant at 0.05 level

** Significant at 0.01 level

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