



DEPRESSIVE TENDENCIES AND ADJUSTMENT AMONG ADOLESCENTS OF NUCLEAR AND JOINT FAMILIES

Dr. Asha Sharma, Assistant Professor Department of Psychology, Sophia Girls' College (Autonomous),
Ajmer

Dr. Christina Davidson, Assistant Professor Department of Psychology, Sophia Girls' College
(Autonomous), Ajmer

ABSTRACT- The aim of the study is to examine the depressive tendencies and adjustment level among adolescents on nuclear and joint families. In the present times the concept or practice of nuclear family is increased either because of employment reasons or adjustment problems. Joint family set up provides a lot of support, love and guidance which leads to all round development of the child. Two standardized test on Depression and Adjustment was used for data collection. Mean, standard deviation, t- value and correlation was calculated for the interpretation of the raw scores. The Findings suggests significant difference in the level of social adjustment between nuclear and jointfamily adolescents.

Index Terms- Depressive tendencies, Adjustment, Nuclear family

INTRODUCTION

Depressive disorders are characterized by sadness, feelings of hopelessness and worthlessness. Its causes involves heredity, changes in neurotransmitter levels, altered neuro endocrine function, and psychosocial factors. The term depression is often used to refer to any of several depressive disorders. classified in the Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition □ Persistent depressive disorder (dysthymia) □ Other specified or unspecified depressive disorder □ Depressive disorder due to another medical condition □ Substance/medication-induced depressive disorder Depressive disorders occur at any age but typically develop during the mid teens, 20s, or 30s In primary care settings, as many as 30% of patients report depressive symptoms, but < 10% have major depression. The term depression is often used to describe the low or discouraged mood that results from However; better terms for such moods are demoralization and grief.

The negative feelings of demoralization and grief, unlike those of depression, However, events and stressors that cause demoralization and grief can also precipitate a major depressive episode, particularly in vulnerable people (eg, those with a past history or family history of major depression). This condition is termed prolonged grief disorder and exact cause of depressive disorders is unknown, but genetic and

environmental factors development of depressive responses to adverse events. and losses, commonly precede episodes of major depression; however, such events do not usually cause lasting, severe depression except in people predisposed to a mood disorder. People who have had an episode of major depression are at higher risk of subsequent likely to develop a depressive disorder.

In psychology, adjustment is that condition of a person who is able to adapt with his physical And in other words adjustment refers to the behavioural process of balancing conflicting needs, or needs challenged by obstacles in the environment. Humans and animals regularly adjust to their environment. Adjustment begins when a need is felt and ends when it is satisfied.

The stimulating condition that impelled them to activity, and they are thereby adjusted to this Adjustment means the modification to compensate for or meet special conditions. Adjustment is the establishment of a satisfactory relationship, as representing harmony, Adjustment is the process of finding and adopting modes of behaviour suitable to the Adjustment refers to any operation whereby an organism or organ becomes more favourably Shaffer (1961): Adjustment is the process by which a living organism maintains a balance Gates and Jersild (1951): Adjustment is a continual process in which a person varies his behaviour to produce a more harmonious relationship between himself and his environment. However, psychologists have been interested to examine adjustment as a process.

METHODOLOGY

Objectives

- To assess the level of depressive tendencies among children living in nuclear families.
- To assess the level of depressive tendencies among children living in joint families.
- To assess the level of adjustment among children living in nuclear families.
- To assess the level of adjustment among children living in joint families.
- To find out the difference in the level of depressive tendencies among children living innuclear and joint families.
- To find out the difference in the level of adjustment among children living in nuclear andjoint families.
- To examine the relationship between depressive tendencies and adjustment amongchildren living in nuclear and joint families.

HYPOTHESIS

- There exists no significant difference in the depressive tendencies among children livingin nuclear and joint families.
- There exists no significant difference in the level of adjustment among children living innuclear and joint families.
- There exists no significant relationship between depressive tendencies and adjustmentamong children living in nuclear and joint families.

VARIABLES

1. Depression

It is a mood state disorder wherein a person experiences state of sadness, gloomy mood, low energy, low motivation, feelings of hopelessness and worthlessness. Negative self criticism along with suicidal tendencies can also be experienced.

2. Adjustment

The process by which an individual tries to maintain a balance between all the aspects of functioning

TOOLS USED

For the study, standardized psychological tests on Depression and Adjustment was used . The description of the tests are as follows-

1. Beck Depression Inventory (BDI)

This test consists of 21 items or group of statements. It was instructed to the participants to read all the group of statements carefully and then pick out the one statement in each group that best describes the way they have been feeling during the past two weeks, including today. They need to circle the number beside the statement they have picked. If several statements in the group seem to apply equally well, then circle the highest number for that group. They were allowed to choose only one statement for any group including Item no. 16 (Changes in Sleeping Pattern) or Item 18 (Changes in Appetite). In the response category for each statement, respondents are presented with five alternatives: "I do not feel sad". "I feel sad" "I am sad all the time and I can't snap out of it". "I am so sad and unhappy that I can't standit."

Each item is rated on a 4-point Likert-type scale ranging from 0 to 3, The total score ranges from 0 to 63, with higher scores indicating more severe depressive **symptoms**. (Beck, Ward, Mendelson, Mock & Erbaugh, 1961).

2. Adjustment Inventory for School Students Revised (AISSR-ss)

The Adjustment Inventory has been designed for use with Hindi knowing school students of India. The inventory seeks to segregate well adjusted secondary school students (age group 14 to 18 years) from poorly adjusted students in the three areas of adjustment: *Emotional, Social and Educational*.

The Adjustment Inventory for Students Revised (AISSR-ss) focuses on the three areas of adjustment to assess the difficulties in the adjustment of students, namely-

1. Emotional
2. Social
3. Educational

It has three response alternatives: 'Always' and 'Sometimes' and 'Never'.

Reliability of the test was calculated by split half and test retest method, which was significant at 0.01 level. Item analysis validity was calculated for the test.

PARTICIPANTS

Participants were selected on the basis of the purposive sampling method. The participation was willing and a sample of 100 individuals involving adolescents of age group 13-17 was taken for the data collection.

1. Inclusive Criteria

Basis/Criteria's included	Description
AREA	Reputed schools of Ajmer
AGE GROUP	13-17 years
LANGUAGE KNOWN	Bi-lingual (English and Hindi)
MENTAL STATE	Normal mental state
FAMILY TYPE	Joint or Nuclear

PROCEDURE

Participants were selected according to the inclusion criteria of the study. Google forms were created; consent was taken from the participants beforehand. Confidentiality was maintained, Rapport was built, Instructions were given properly, all the queries were solved and then the forms were circulated among the participants. Collection of the filled forms was done and participants were shown gratitude for giving their precious time. Statistical analysis was done and results were interpreted.

STATISTICS APPLIED

Descriptive statistics, t- test and correlation was applied to analyze the obtained raw data.

RESULTS**TABLE 1: LEVEL OF DEPRESSION BETWEEN NUCLEAR AND JOINT FAMILY ADOLESCENTS**

FAMILY TYPE	N	MEAN	SD	SEM	SED	t- VALUE
NUCLEAR	50	12.21	8.74	1.786	2.681	0.10 (Non-Significant)
JOINT	50	11.94	8.01	1.945		

The above table no. 1 indicates that there is no significant difference in the level of depression between nuclear and joint family adolescents.

TABLE-2: LEVEL OF ADJUSTMENT BETWEEN NUCLEAR AND JOINT FAMILY ADOLESCENTS

FAMILY TYPE	N	MEAN	SD	SEM	SED	t-value
NUCLEAR	50	31.88	12.557	2.563	4.194	1.723 (non-significant)
JOINT	50	44.65	14.142	3.430		

The above table no. 2 indicates that there is no significant difference in the level of adjustment between nuclear and joint family adolescents.

TABLE 3- LEVEL OF EMOTIONAL ADJUSTMENT BETWEEN NUCLEAR AND JOINT FAMILY ADOLESCENTS

FAMILY TYPE	N	MEAN	SD	SEM	SED	t-value
Nuclear	50	13.75	6.578	1.380	2.504	0.35 (Non-Significant)
Joint	50	12.86	8.529	2.280		

Table 3 indicates that there is no significant difference in the level of emotional adjustment between joint family and nuclear family adolescents.

TABLE 4- LEVEL OF SOCIAL ADJUSTMENT BETWEEN NUCLEAR AND JOINT FAMILY ADOLESCENTS

Family Type	N	MEAN	SD	SEM	SED	t-value
Nuclear	50	18.71	4.723	0.964	2.504	2.190*
Joint	50	15.80	5.547	1.482		

* significant at 0.05 level

Table 4 indicates a significant difference in the level of social adjustment between nuclear and joint family adolescents.

This reflects that family structure plays significant role in development of social adjustment among children studying at higher secondary level. In majority of nuclear families both the parents are working and hardly giving quality time to children for their social development and adjustment.

The joint family structure provides better opportunity to children to learn better socialization skills and competency. Their adjustment in different social situation is better than the children belongs to nuclear family. The joint family children interact with variety of situations and face competition amongst the members which built better adjustment capacity.

TABLE 5 : LEVEL OF EDUCATIONAL ADJUSTMENT BETWEEN NUCLEAR AND JOINT FAMILY ADOLESCENTS

FAMILY TYPE	N	MEAN	SD	SEM	SED	t-value
NUCLEAR	50	19.08	5.324	1.087	1.849	1.088 (non-significant)
JOINT	50	17.07	5.797	1.547		

Table no. 5 indicates no significant difference between the level of educational adjustment between nuclear and joint family adolescents.

TABLE 6 : RELATIONSHIP BETWEEN DEPRESSIVE TENDENCIES AND ADJUSTMENT AMONG ADOLESCENTS

VARIABLE	N	MEAN	SD	R
DEPRESSION	50	12.10	8.351	0.288
ADJUSTMENT	50	48.88	13.552	(Non-Significant)

The above table no. 6 depicts means that there is no significant relationship between Depression and Adjustment among children living in nuclear and joint family.

CONCLUSION

- There is no significant difference in the level of depression between nuclear and joint family adolescents.
- There is no significant difference in the level of adjustment between nuclear and joint family adolescents.
- There is no significant difference in the level of emotional adjustment between joint family and nuclear family adolescents.
- A significant difference exists in the level of social adjustment between nuclear and joint family adolescents.
- There is no significant difference between the level of educational adjustment between nuclear and joint family adolescents
- There is no significant relationship between Depression and Adjustment among children living in nuclear and joint family.

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