Identification of Emotional and Social Difficulties among Pakistani Adolescents

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This study was conducted to identify the patterns of emotional and social difficulties among Pakistani adolescents. The Anxiety, Depression, Anger, Disruptive Behavior, and Self-Concept Inventories of the Beck Youth Inventories were administered to 300 adolescents (150 females and 150 males). The age range was between 14–19 years. Each inventory represented distinct symptom dimensions and the overall pattern of results indicated that anxiety level in males was higher than females but females' disruptive behavior was significantly high. Hence, there was no significant gender difference in the levels of anger, self concept and depression. Age had strong impact on all types of psychological distress. Late adolescents showed more anger, anxiety, depression and disruptive behavior. Early adolescents had high self concept as compared to late adolescents. Anxiety was significantly positively related with depression, anger and disruptive behavior.

Keyword. Emotional, social difficulties, adolescence, anxiety, depression, anger, disruptive behavior, self concept.

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World Health Organization (WHO, 2014) has defined that adolescence is the period in human growth that occurs after childhood and before adulthood. It ranges from 10 to 19 years. After infancy this period is occurred with tremendous growth and change with respect to mental and physical (WHO, 2014).

Public health surveys and psychological assessments have considered the psychological distress as a vital indicator for mental health. Literature has depicted that this concept has been mixed with depression, anxiety, functional disabilities and behavioral problems (Drapeau, Marchand, & Beaulieu-Prévost, 2011; Jami & Kamal 2017; Kalsoom, Masood & Jami 2017).

There are many reasons and causes for psychological stress identified among youth by researchers, (Cluver, Gardner, & Operario, 2007; Pawlikowska et al., 1994) like moving towards new place, graduating from college and shifted to university, peer group changes etc. which cannot be faced and coped by youngsters or have difficulty adjusting to these situations (Ahmed, Ahmed, Aqeel, Akhtar, & Salim, 2017; Cisheng, Jamala, Aqeel , Shah , Ahmed, & Gul, 2017; Khan, Amanat, Aqeel, Sulehri, Amanat, Sana, & Amin, 2017).

Emotional and social problems impact strongly on the lives of young people as they have not reached yet to the maturity level needed to cope with adversities and also they are so vulnerable to be distracted hence when the adolescents are victimized then its effects may be stronger than any other age group because in this age they lack functional coping strategies to overcome the distressful situation (Strine et al., 2005). Adolescents usually commit suicide in case of severe attacks of anxiety and depression and other psychological disorders (Petersen et al., 1993). This shows these ailments like anxiety and depression also have deadly effects on one's life. Anxiety is linked with substantial financial problem due to reduced work output and more usage of health care services, predominantly primary health care (Cummings, Caporino, & Kendall, 2014).

A vast literature has shown that depressive disorders are differently prevailing in male and females. At the age of puberty and

reproduction period these differences can easily be observed (Bebbington, 1996). Some studies have reported that females have almost twice times chances of getting depressive disorders as compared to males (Bebbington, 1996; Nolen-Hoeksema, 1987). Pioneer researches in the field human psychology revealed that women had more negative emotions than men as suggested in a nationwide survey conducted by (Field, Gurin, & Veroff, 1960). In adolescents same case is prevalent even today. It is also evident from previous researches that men embrace their anger and utilize it for their benefits but usually women cannot use it as productive. But some researchers have reported that women have more interactions with the anger and frustrations situations they become more skilled to deal with and act accordingly (von Arb et al., 2009).

Many researchers have depicted in their researches that age has significant impact on having depression and its intensity. There are some controversies regarding direction of relationship between age and depression. As some suggested that depression increases as age increases (Luppa et al., 2012) but some other reported opposite results in their studies (Bebbington, 1996; Cipriani et al., 2009; Jorm, 2000; Rodgers et al., 2000; Wade, Cairney, & Pevalin, 2002). It is observed that age has strong impact on individual's emotional life and its stability. Lorr (1989) revealed that young adults have very high level of competency, physical abilities and intellectual abilities which need lot of transitional changes as well (Lorr, 1989). Adolescents are at high risk in getting anxiety and other psychological problems (K. C. Burke, Burke, Regier, & Rae, 1990). It is also assumed that as the age increases, individual's ability of coping with psychological issues will increases and subsequently decreases the level of anxiety. Some studies also suggested that social anxiety disorders prevailed in young age or adolescence (Kessler et al., 2005; Tsang et al., 2008). There are some indications in literature that older persons reported lower levels of anger in their routine lives than their younger counterparts (McConatha, Leone, & Armstrong, 1997; Schieman, 1999).

Theoretically it has been observed in scientific researches that male child is treated differently as compared to female child. Females usually have different socialization patterns and social restriction than

males which ultimately creates differences. This difference will lead towards more disruptive behavior in males than females (Abikoff et al., 2002). Literature has shown that as age increases students become mature and their attitude towards classroom conflicts and other such activities which are considered as disruptive behavior are reduced. It means age has positive impact on the reduction of this negative behavior. Here are some researches which depict that age has positive impact on the disruptive behavior of students (Kochanska, Brock, Chen, Aksan, & Anderson, 2014; Tremblay et al., 1992). A study concluded that boys performed better almost two times in groups as compared to girls (Thomas, Ricciardelli, & Williams, 2000). A large scale German study results showed that there is no relationship between age with self concept and self esteem. Impact of age is invariant for different grades and gender (Arens & Hasselhorn, 2013). In the light of above review a need was felt to see how Pakistani youth show these emotional and social problems.

Findings of a study showed that females have more tendency of having serious psychological distress as compared to men. This relationship exists in all ages. In early ages its intensity is low and then increases with age. This study has shown that age and gender has strong impactt on psychological distress and its types (Matud et al., 2014).

Objectives of this study are threefold: Firstly to identify the pattern of emotional and social problems prevailing in Pakistani Youth. Secondly to study the age and gender differences in adolescents with regard to Anxiety, Depression, Anger, Disruptive Behavior, and Self-Concept, thirdly to see a pattern of correlation among these variables.

Method

Sample

The target population of this study was comprised of Pakistani adolescents studied in different colleges of Rawalpindi and Islamabad. Sample of the study consisted of 300 adolescent (150 girls and 150 boys). Their age ranged between 14 and 19 years. Age range was further divided into two groups' early adolescents (14-16 years) and late

adolescents (17-19 years). They were selected through convenient sampling technique.

Instrument

Beck Youth Inventories (BYI). Second edition of the Beck youth inventories was developed by Beck, Beck, Jolly, Steer in 2005. Items are scaled from 0 (Never) to 3 (Always). It consists of five subscales, twenty-item in each subscale of 100 items in five subscales. Each of the five inventories contains 20 statements each about thoughts, Feelings or behaviors associated with emotional and social impairment in children and adolescents. The scales are written at a second grade reading level. The five scales include:

1. *Beck Depression Inventory for Youth (BDI-Y).* This inventory is designed to identify symptoms of depression in children and adolescents including negative thoughts about self or life, and future; feelings of sadness; and physiological indications of depression.

2. *Beck Anxiety Inventory for Youth (BAI-Y).* The items in this inventory reflect adolescent's fears, worrying, and physiological symptoms associated with anxiety.

3. *Beck Anger Inventory for Youth (BANI-Y).* The items in this inventory include perceptions of mistreatment, negative thoughts about others, feelings of anger and physiological arousal.

4. *Beck Disruptive Behavior Inventory for Youth (BDBI-Y*). Behaviors and attitudes associated with Conduct Disorder and oppositional defiant behavior are included.

5. *Beck Self-Concept Inventory for Youth (BSCI-Y).* The items in this inventory explore self-perceptions such as competency, potency and positive self-worth.

Procedure

The study was conducted on the sample of 300 students from different school and colleges of Rawalpindi and Islamabad. The research

protocols were administered individually on students in their designated classrooms. Consent was taken from the students before filling the questionnaires.

Results

Table 1

Correlation between Self concept Inventory, Depression Inventory, Anxiety Inventory, Anger Inventory, Disruptive behavior Inventory (N=300)

Variables	1	2	3	4	5
1. BSCI	-	-.293**	-.56**	-.47**	-.47**
2. BAI		-	.48**	.49**	.41**
3. BDI			-	81**	.75**
4. BANI				-	.78**
5. BDBI					-

Note. BSCI= Bec Self-Concept Inventory; BDI = Beck Depression Inventory;BAI= Beck Anxiety Inventory; BANI=Beck Anger Inventory for Youth; BDBI=Beck Disruptive Behavior Inventory for Youth.

Table 1 is presenting the nature of correlation between Self concept, Depression, Anxiety, Anger and Disruptive behavior. It is evident that self concept is inversely related with other negative dimensions of psychological distress. Similarly Anxiety had significant positive relationship with depression. Anxiety had significant positive relationship with anger. It also had significant positive relationship with disruptive behavior and anger. Anger and disruptive behavior is also positively related with each other.

Table 2

Differences in Depression, Anxiety, Anger, Self concept and Disruptive behavior among adolescents male and female (N=300)

	Boys (n =150)		Girls (n = 150)				
Variables	M	SD	M	SD	*t(298)*	*p*	*95%CL*
BDI	59.30	11.70	58.11	11.15	.90(298)	.36	-1.40,3.79
BAI	64.11	7.86	59.49	9.09	4.71(298)	.00	2.69,6.55
BANI	56.45	9.88	57.14	9.94	-.61(298)	.55	-2.95,1.56
BSCI	46.62	8.89	48.83	10.19	-1.1(298)	.27	-3.39,.96
BDBI	64.19	17.18	70.33	16.97	-3.1(298)	.00	-10, -2.5

Note. BSCI= Bec Self-Concept Inventory; BDI = Beck Depression Inventory;BAI= Beck Anxiety Inventory; BANI=Beck Anger Inventory for Youth; BDBI=Beck Disruptive Behavior Inventory for Youth *p<.05, **p<.01

Table 2 indicates gender differences was found in two areas, for example on BAI [(300) = *t* 4.71(298), $p < .0001$] and BDBI [(300) = *t* 4-3.1(298), $p < .01$] with males having higher scores on anxiety than females and females scored higher on disruptive behavior as compared to males.

Table 3

Differences in Depression, Anxiety, Anger, Self concept and Disruptive behavior among Early and Late adolescent (N=300)

	Early adolescents (n=158)		Late adolescents (n=142)				
Variables	M	SD	M	SD	*t(298)*	*p*	*95%CL*
BDI	52.97	9.73	65.08	9.67	-10.8	.00	-14.3,-9.9
BAI	59.13	9.0	64.7	7.54	-5.8	.00	-7.5,-3.7
BANI	51.8	8.63	62.3	8.25	-.10.6	.00	-12.3, -8.4
BSCI	51.5	8.80	44.5	9.06	-6.8	.00	4.97,9.03
BDBI	59.4	15.3	76.13	15.09	-9.5	.00	-20.2, -13.3

Note. BSCI= Bec Self-Concept Inventory; BDI = Beck Depression Inventory;BAI= Beck Anxiety Inventory; BANI=Beck Anger Inventory for Youth; BDBI=Beck Disruptive Behavior Inventory for Youth.

Table 3 indicates that age differences were found in all areas, early adolescents showed less depression, anxiety, anger and disruptive behavior as compared to old adolescents whereas early adolescents showed more positive self concept than old adolescents.

Discussion

Contrary to previous researches, this study indicated some interesting results. As evident from literature there is no relationship between age and self concept or self esteem (Arens & Hasselhorn, 2013) our results, however, suggested that positivity of self concept decreased with age (Table 2). Pakistani adolescents usually perceive their selves from the eyes of others, their social self is more important and hence as they are maturing in age they become more critical about themselves and less self assured. The demands from the environment enhances as parents usually want them now to take the responsibility; while peer group demands for more independent roles confirming the social norms of the group. Further they start to be more conscious about their outlook. These stressors may create social distress, as well as a fear of negative evaluation. (Craske, 2003). They therefore, anger a lot; show negative emotions like anxiety and depression.

The results of this study showed that age has strong impact on anxiety and depression (Table 2). Previous studies are in line with this notion that in Pakistan the age range of 15 to 17 is an age which puts a lot of pressure on boys, as their roles in the society start converting from dependent to more independent one. They are expected to be as dependent and submissive as they were before and at the same time also get the pressure from peer group for more independent and autonomous role (Ahmad & Zakia, 2013). The stressors of physical and emotional changes along with the stress of role demands to a growing child put the pressure of social evaluation and expectations, which may result in vulnerability to social anxiety. Recent studies also maintained that late adolescents group has high scores and level of depression, anxiety. As some studies suggested that depression increases as age increases (Luppa et al., 2012). Co morbidity between anxiety and depressive disorders in adolescents is also present (Merikangas et al., 2011).

The results of this study also showed that age has a strong relationship with disruptive behavior and anger (Table 2). Previous literature has shown that as age increases students become mature and their attitude towards classroom conflicts and other such activities which

are considered as disruptive behavior are reduced. Some researches which depict that age has positive impact on the disruptive behavior of students (Kochanska, Brock, Chen, Aksan, & Anderson, 2014; Kuperman et al., 2014; Tremblay et al., 1992). However, older children are more likely to use aggression to react to threats to their self-esteem. Depression, anger and self concept were not significantly different in males and females (Scott et al., 2010). As children age, their reactions to insults, putdowns, and other threats to their self-concept become more important triggers of aggressive behavior (U.S. Department of Justice, 2000).

Moreover it is suggested that males score higher in anxiety than females (Table 1). In literature different findings are observed about the disruptive behavior in males or females. Few researches have suggested that women have almost twice the risk of having anxiety disorders than men if they both do same thing. Like women have more element of social phobia, hormonal problems phobia and some other types of anxiety disorders are also common in women. Whereas some studies opined that male child is treated differently as compared to girl babies and hence females usually have different socialization patterns and social restriction than males which ultimately creates differences. This difference will lead towards more disruptive behavior in males than females (Abikoff et al., 2002).

Further results showed that females scored higher on disruptive behavior than males (Table 1) which reflects that Pakistani females express their emotions outwardly and vent off more as compared to their male counterparts. Previous researches findings showed that girls begin to express more externalizing emotions than boys in adolescence may reflect a trend for girls to be more expressive than boys of emotions overall as they reach adolescence. It may also reflect a recent change in gender roles for adolescent girls. For example, Brown (1999) has argued that anger and other externalizing emotion expressions have become more common among adolescent girls in recent years.

The results also showed that anxiety is positively related with depression, anger and disruptive behavior (Table 3). Previous researches

have suggested that adolescents suffer from depression leading to feeling of loneliness and sad. Studies have also indicated that adolescents with depression also experience symptoms such as hopelessness, self blame, suicidal thoughts, low self esteem, anger and irritable behavior (Elgard & Arlett, 2002). Moreover, previous studies indicated that depression and anxiety are correlated (Kashani & Orvaschel, 1988). This study will be useful in providing awareness about emotional and social difficulties in adolescents. Knowledge about gender or age related differences in self concept, self esteem, anger, anxiety, depression, disruptive behavior and their relationship might provide valuable knowledge for designing effective self esteem enhancement and distress mitigation interventions.

Conclusion

On the basis of study findings it's concluded that gender is important variable in playing role in creating variation with respect to dimensions (anxiety and disruptive behaviors) of psychological distress. Anxiety level in males is higher than females and disruptive behavior is higher in females. Age had significance influence in all the dimensions of psychological distress.

Limitations and suggestions

This study was limited to Pakistani adolescents of Rawalpindi and Islamabad. Therefore the results of this study may not be generalized to country level. Time duration was one of the major limitations of this study. It is suggested to work with larger sample of adolescents for more generalized findings for future studies.

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