Prediction of Teenager Depression Based on Social Skill, Peer Attachment, Parental Attachment and Self-esteem

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Abstract

The study examined prediction of teenager depression based on social skill, peer attachment, parental attachment and self-esteem. The type of this study is descriptive-corolation. Data from survey of 382 high school daughter students in basis of morgan sampling table were used. At this study we used Multistage Cluster Method for sampeling. Information of this study collecting by Kutcher Adolescent Depression Scale (2002), Social Skills Inventory and Foster teen Ayndrbytzn TISS (1992), Test Adolescent Attachment to Parent and Peer (IPPA-R) (1978) and Ruchester Self-Esteem Scale (1998). The Statistical method used for data analysis in the study is Multivariable regression and Pearson correlation. The results indicated that there was reversed significant relation between teenager Depression and Social Skills. There was also reverse significant realation between Depression, Peer and Parent Attachment and Self-Esteem. Furthermore it revealed that between mother attachment and father attachment, mother attachment had more share on prediction of adolescence depression. Among three variables of social skills, parental attachment, peer attachment and self-esteem the social skill had the least effect on prediction of adolescent depression but others had a significant effect.

Keywords: depression, teenager, attachment, peer, self-esteem

1. Introduction

Depression is the most common mental disorder and has significantly increased in the recent decades. Feeling dumb, being out of mood, sadness, hopelessness, frustration, unhappiness and dissatisfaction are all common experiences of depression (Rozengan, 2012). Depression has a particular meaning for everyone. It can be a diagnosable sign, symbol or disorder. Depression affects the areas like behavior, thought (recognition), physical performance and conduct (Grist, 2006). Different theories were discussed about depression such as biological theories which assume that the reason of depression is in genes or some incomplete physiological functions that may be rooted in inheritance. Psychoanalysis approach looks at depression as a reaction to lack (absence) (Sarason, 2009). According to the importance of adolescence, one of the reasons of teenager vulnerability in depression is their incomplete skills and sensitive conditions. Lack of skills causes the lack of protecting teenagers against damages especially depression. Social skills are: the abilities which are provided in the field of compatibility and positive and useful behavior or the ability to establish relationships with others in a special social filed accepted by the society and the person (Taromian, 2005).

Thus, creating or increasing self confidence in dealing with problems and solving them and also helping them with the development of social skills and emotions seem necessary in order to have a successful compatibility with social environment and a healthy life. By increasing social skills, in teenagers they can be protected against mental damages like anxiety and depression to have a desired and pleasant life. (Afrouz, 1993) Lack of these skills makes the person to use non-effective behaviors against stress and pressures. Such skills in teenagers create the sense of accomplishment, being effective to deal with problems and increase of self-concept to do planning and have a targeted and appropriate behavior (Taromian, 2005). In general, the people who have a low special skill and establish social relations with difficulty are more exposed to depression because the power of being social and using social skills allow the person to transfer his/her wishes, desires and needs easily, ask for help or help others and thereby decrease hostility. It was observed that if the person cannot establish an emotional and appropriate link to himself, he/she will not be able to establish right relationships with others in the adulthood and there will be a context (background) to suffer from some problems like anxiety and depression

(Ganji, 2011). Peers at the best mode are like a bridge between family and social roles of adults. During the adolescence, friendship change and move toward more intimacy and loyalty. (Laura Berg, 1390) Friendships are usually useful but can also have some disadvantages. When teenagers focus on deeper thoughts and feelings, they think about negative problems and feelings repeatedly that leads to anxiety or depression. Also, when there are some conflicts among intimate friends, one of them is more likely to hurt the other one through being aggressive. (Laura Berg, 2012)

In the adolescence, peer attachment increases. Attachment is sustainable emotional nodes or links between two people, so that one of them attempts to protect closeness (intimacy) with the subject of attachment and act in such a way to make sure that the relationship will continue. (Balbi, cited in Khanjani, 2006) Balbi emphasizes the importance of the relationship between mother and child and believes that the experience of a warm, intimate and continuous relationship between mother (or her permanent alternative) and child is essential for the mental health of child. He believes that most forms of Neurosis are the personality disorders caused by the lack of a warm relationship between mother and child or the lack of stability in this relationship. The type of attachment in the childhood is one of the effective factors in creating psychological damages in the next periods of life. The results of most studies showed that insecure attachment in the childhood leads to many mental disorders in the adolescence and adulthood. (Mansour, 2012) Balbi states that the relationship and like between mother and child is the result of the activity of some behavioral systems in which the closeness to mother is a predictable result. (Cited in Khanjani, 2013)

The children who have an insecure history (background) are more likely to have negative intentions to important social situations and are less likely to provide successful solutions in solving imaginary conflicts and see themselves with others especially family members because attachment styles affect the ways of coping with stressful conditions and situations. Secure people confirm the situation and easily ask for help. Avoiders have a problem to confirm the situations and asking for help and the prominent sign of ambivalent people is too much sensitivity to negative emotions and attachment images. (Cited in Besharat, 2008) Mc Cord and McCord (1990) studied the role of teenager attachment in distinguishing depressed and non-depressed teenagers. They concluded that a high percentage of insecure attachment scales is related to high rate of depression and showed a negative exponent as a key factor in depression. The researchers like Smith, Marton and Strauds (Cited in Besharat, 2008) believe that the theory of attachment is one of the most powerful theories to explain and study mental damages like depression. The study of Lam, Wright and Smith (2004) showed that the teenagers with depression have more insecure attachment in comparison to normal teenagers. They need more social confirmation. The people who have a good self esteem are completely compatible, match, sociable and responsible while those with low self esteem have problems in all fields. The teenagers with low self esteem are anxious and depressed. Authoritarian parenting and encouraging and supporting by teachers predict high self esteem while he teenagers with faultfinding parents are instable and have low self esteem. Negative feedbacks are instable or independent to performance and in the best case, lack of confidence to ability and in the worst case, it causes sense of incompetency and not being respected. The teenagers who experience this type of training (bringing up), only rely on their peers in order to confirm their self esteem that is a risk factor for behavioral problems. According to some studies (Misner, 2009), the rate of depression is more in isolated and alone people with no self esteem and there is less depression in people with high social relations. (Laura Berg, 2012) In fact, self esteem is the evaluative dimension of self-concept and refers to how evaluate ourselves. Since self esteem is also related to mental compatibility (Schweitzer, Smith, & Callan, 1992). The people with low self esteem often experience the signs of mental problems and diseases like depression, anxiety and severe stress (Youngs, Rathge, Mallis, & Mullis, 1990) and the study results of Klose and Tinuis (2004) revealed that teaching social skills improves self esteem in depressed patients. According to the above –mentioned literature while is focused on the role of attachment with mental health and formation of self-concept and socialization of teenagers, the purpose of this study is to examine the relationship between teenager depression and parental attachment , peer attachments elf esteem and social skills.

2. Method

The present study is descriptive-correlational according to the nature of subject and desired objectives. The statistical population includes all the high school students of Tabriz in the academic year 2013-2015. The inquiry of the department of education in Tabriz in 2015 showed that the population size equals to 69429 subjects. The sample of this study includes 382 subjects that were calculated by Morgan sampling method. Multi-stage cluster sampling method was used in this study. Two regions of Tabriz were selected and from each region, five schools were selected randomly. Then, depression, self esteem, parental attachment, peer attachment and social skills tests were performed on all students of the selected classes. The students who received a score higher than 15 in

depression test were selected as statistical sample this method was repeated to an extent where 382 subjects were collected.

Kutcher Adolescent Depression Scale was designed by Kutcher in 2002. The present questionnaire is of self report which includes 11 items. Answers were designed as Likert 4-point scale. The score of each subject is the total score of him/her in all items and scoring the test in all items directly. The minimum score of the subject is zero and its maximum score is 33. In the study of Brucz, Brooks, Cruluiz and Kutcher (2003), 1006 teenagers with MMD were treated with ineffective drugs (Placebo) for 8 weeks and then were measured by using different scales of depression evaluation (measurement) like KADS, CDRS-R, GAF and CGI in the days 7, 28, 21, 14 and 42. In this scale, KADS had the highest power of depression recognition. As the results of studies show the present scale has a high correlation with its similar scales.

Adolescent Social Skills Inventory (Tiss) was made by Inderbitzen and Foster (1992) and includes 39 five-option items. The subject represents his/her answer about each item in a scale from the options (never to always). The original version of this inventory has 40 items and one item was deleted according to the lack of match to the Iranian culture. (Item No. 22) Scoring method: The items of this questionnaire are in two fields of positive and negative behaviors. Each item has 6 options. In positive options, the related scores are: never =0, rarely =1, a little =2, sometimes =3, often =4, and always =5. In negative options, the scoring method is reverse. The validity of this inventory was reported as 90% by Inderbitzen and Foster (1992). The convergent validity of Inderbitzen and Foster social skill questionnaire was evaluated by different methods like comparing it to self evaluation data, evaluating the peers and sociometric data, studying the correlation of social skills scores and social desirability, socioeconomic status and other pen-paper tools by Inderbitzen and Foster . The obtained results show the convergent validity and acceptable reliability of this questionnaire. (Doran 1380) The reliability of this questionnaire was reported by Amiri (2000) as 0/71 and 0/68 for positive and negative options for the secondary school female students of the second grade in Tehran city. For the positive and negative parts of this questionnaire, the reliability coefficients were respectively obtained as 80/71 and 80/51. (Doran, 2002)

Rochester self esteem scale: This test that evaluates the perception and understanding of adults and self esteem was provided to be used in the longitudinal study of adult growth and according to Rosenberg (1965) self esteem scale. (1988) this scale was consisted of 9 items and the subject should express his/her agreement or disagreement in a Likert 4-point scale (from totally agree to totally disagree). In this test, totally agree has 4 scores, agree 4 scores, totally disagree 2 scores and disagree 1 score. The range of scores in this test varies from 1 to 4 and high scores in this scale show the high self esteem of the child. Psychometric features of this test were done on a sample of 4000 young people (729 boys and 271 girls) at the 7th and 8th grades of Rochester area in New York. According to the obtained results of this study, the internal consistency of the items of self esteem scale was equal to 0/78.

Parental and peer attachment test (IPPA-R) (Armsden & Greenberg, 1978) was designed on the base of Balbi attachment theory to evaluate the teenager thoughts about positive and negative emotional /cognitive aspects of the relationship with their parents and intimate friends. This test has 3 sub-scales of trust (confidence), quality of relationship, rate of hostility and sense of alienation. In parental and peer attachment scale, the options are scores as follows: always=5 scores, often=4 scores, sometimes=3 scores, rarely=2 scores, never=1 score. The re-test reliability of the scale in 3 weeks on a sample of 27 teenagers aged 18-20 years was 93% for parental attachment and 86% for peer attachment. Cronbach's Alpha coefficient of this scale was reported as follows: mother attachment=0/87, father attachment=0/89 and peer attachment= 0/92.

For data analysis, multivariate regression and Pearson correlation were used. Data were analyzed by using the 19th version of SPSS software.

3. Findings

To know the research variables, first their mean and standard deviation were considered. (Table 1)

Table 1 shows the mean and standard deviation of social skill in the studied students. The mean of social skill is M=103 and standard deviation is S=19/5. The mean and standard deviation of mother attachment are respectively 90/1 and 12/8, the mean and standard deviation of father attachment are respectively 9/71 and 15/4, and the mean and standard deviation of peer attachment are respectively 79/7 and 14/8. The mean and standard deviation of parental and peer attachment are respectively 80/61 and 10/48.

Table 2 shows the Pearson correlation between teenager depression and the variables of social skill, parental attachment, peer attachment and its dimensions and self esteem.

Table 1. Descriptive statistics (mean, standard deviation), social skill, parental attachment, peer attachment and its dimensions, self esteem and depression

Variable		Mean	Standard deviation
Social skill		103.01	19.509
Parental attachment, peer attachment and its dimensions	Mother attachment	90.1211	12.84723
	Father attachment	71.9814	15 .42215
	Peer attachment	79.7749	14 .87539
	Parent and peer attachment	80.6118	10 .48969
Self esteem		2 .4314	53004
Depression		19.5366	4.20442

Table 2. Correlation coefficient between teenager depression and the variables of social skill, parental attachment, peer attachment and its dimensions and self esteem

		Depression
Social skill	Pearson coefficient	0 .110[*]
	Significance level	.003
Mother attachment	Pearson coefficient	-.502[*]
	Significance level	.000
Father attachment	Pearson coefficient	. .300[*]
	Significance level	.000
Peer attachment	Pearson coefficient	-.221[*]
	Significance level	.000
Self esteem	Pearson coefficient	-.304[*]
	Significance level	.000

Significant correlation at 0/05 level

The results of the correlation table show that there is a negative (reverse) and significant relationship between teenager depression and social skill (r=-0/110 and significance level p<0/05). It means that depression decreases with the increase of social skill. There is a negative (reverse) and significant relationship between teenager depression and mother attachment (r=-0/502 and significance level p<0/05). It means that depression decreases with the increase of mother attachment. There is a negative (reverse) and significant relationship between teenager depression and father attachment (r=-0/300 and significance level p<0/005). It means that depression decreases with the increase of father attachment. Also, there is a negative (reverse) and significant relationship between teenager depression and peer attachment (r=-0/221 and significance level p<0/005). It means that depression decreases with the increase of peer attachment. The results of the correlation table show that there is a negative (reverse) and significant relationship between teenager depression and self esteem (r=-0/304). It means that self esteem decreases with the increase of depression.

Table 3. Shows the concurrent regression analysis of depression based on social skills, father attachment, mother attachment, peer attachment and self esteem

Model	Multiple correlation coefficient (R)	Coefficient of determination (R2)	Pure (net) determination coefficient (R2)	Estimate standard error	Observed F	Significance level
Model 1	.455	.207	.196	.73044	18 .42	0 .000

Predictor variables: social skills, father attachment, mother attachment, peer attachment and self esteem.

Table 4. Beta coefficients of predictor variables affecting depression

		Non- Standardized coefficients		Standardized coefficients	T test	Significance level
		Beta coefficient	standard error	Beta coefficient		
Model 1	Constant value	34 .812	1 .820		19 .127	.000
	Social skill	.020	.011	.093	1 .827	.069
	Mother attachment	-2 .035	.390	-.259	-5 .218	.000
	Father attachment	-.052	.015	-.185	-3 .532	.000
	Peer attachment	- .002	.014	.007	- .133	.894
	Self esteem	-.089	.017	-.272	-5 .243	.000

According to multivariate regression test (concurrent method) and according to the tables in explaining depression from social skills, father attachment, mother attachment, peer attachment, and self esteem. It can be seen that multiple correlated coefficient is equal to R=0/45, coefficient of determination R2=0/20 and net coefficient of determination R=0/19. Predictor variables explain about 19% of the variance of depression score.

According to the standardized Beta coefficients and significance level, predictor variables affecting depression, mother attachment with B=0/25 (P<0/05), father attachment with B=0/18 (P<0/01) and self esteem with B=0/27 (P<0/01) were considered. The study of Beta coefficients shows that the variables of social skill and peer attachment do not have enough power to predict and explain depression.

4. Discussion and Conclusion

The present study was aimed to study the relationship between teenager depression and parental attachment, peer attachment, self esteem and social skills. The results of this study showed that there is a negative and significant relationship between teenager depression and social skill. The findings of the present study are consistent with the results of the studies by Amiri (2010), and Mirzamani et al. (2013). Sergin (2000) in a study entitled as social skills and their relationship to depression found that poor social skill is one of the reasons of depression and vice versa. Depression can weaken social skills in people. Cruwys, Genevieve, Haslam, Jetten et al. (2013) studied the role of membership in social groups in preventing depression and found that membership in social groups plays a protective and treatment role in depression. Nilson, Karevold, Roysamb, Gustavson, Mathiesen (2013) in a study entitled as social skills and symptoms of depression in teenagers: social support as a mediator in girls and boys found that teaching social skills in school programs and schedules prevents teenager depression.

Behaviorism theory states that the real deficit in social skills is one of the main reasons of low rate of positive reinforcement. In addition, as people get depressed, their behaviors make them less lovely. Thus, a kind of vicious cycle is created and people avoid spending time on the depressed person and this problem reduces social skills in them. (Sarason, 2009) The people with symptoms of depression have a negative attitude toward facing situations. This fact refers to the judgment of the person about the ability to do specific actions and there is a big probability that the low sense of efficiency is an accurate reflection of the lack of social skills and the ability of the depressed person in obtaining reinforcement. (Dadsetan, 2009) It should be noted that the ability of people in group activities and healthy social relations are very useful for their mental health and ignoring this aspect of life among the depressed people will lead to the intensification of the disease in them. The increase of social skills has currently a significant and prominent effect in predicting and treating depression. The increase of social skills develops social competencies and abilities in people and using social skills affects the educational, occupational and social functions of people.

The next finding of the study showed that there is a relationship between teenager depression, mother attachment, (mother and father) and peer attachment. According to the results of the correlation table, there is a negative and significant relationship between teenager depression and parental attachment. In other words, depression decreases with the increase of parental and peer attachment.

Different studies that investigated the relationship between attachment style and depression showed that there is a negative relationship between depression and secure attachment style and there is a positive relationship between ambivalent and insecure attachment style with depression. (Asqari, 2008) In another study that is consistent with the present study, Howard and Medway (2009) studied the relationship between the quality of attachment and depression and stated that the anxiety of insecure attachment significantly predicts depression and anxiety. Marchand (2009) in another study examined the relationship between attachment quality and

depression in students and through a regression analysis; he found that insecure attachment predicts depression. It should be noted that if no sensitivity is paid to the person since the childhood, insecure attachment will be formed in the child and his/her internal –practical patterns from others will be as non-achievable and unconfident people. These unhealthy perceptions prevent the formation of interpersonal relationships and put the person in exposure to the risk of some mental and mood problems. Secure people have a low depression and sense of loneliness due to their satisfactory relationships with others and since the secure attachment style is described with the internalized sense of self-worth, comfort and intimacy in close relationships, these people show higher self esteem in comparison to the people who have insecure attachment style. However, the people with insecure attachment have a high sense of self-worth and neglect the establishment of close relationships with others. But this sense is unreal because insecure children show a pattern of physiological arousal that is a sign of hidden anger and aggression. (Spengler, 1993)

The study results of Armsden and Greenberg (2009) in consistent with the present study revealed that there is an important relationship between peer attachment and mental health of teenagers and its effect can be seen on different aspects. The highest rate is mental health and the lowest rate is depression and the level of happiness and positive attitude to life are the symptoms and signs of mental health and the level of anxiety, stress, and negative attitude show mental depression among teenagers. In a study, Millingers, Buck, Montgomery and Stalard (2012) in consistent with the present study, there is a relationship between school and peer attachment that can be a key to mental health in the adulthood. There is a negative and reverse relationship between adult depression and peer attachment. Peer attachment in their study was the highest predictor of low mood in the adolescence. In another study, Wilkenson (2010) in consistent with the present study, it was shown that peer attachment has a negative and reverse relationship with the prediction of mental health regulation in the adulthood and is an appropriate method to study mental-social match in the adulthood. According to the data, it can be concluded that emotional regulation and the quality of parental and peer attachment are strongly dependent on each other. Thus, psychological problems in the adolescence and adulthood are in a close relationship with a deficit in cognitive processing and emotional regulation. Some disorders like depression that is somehow a personality trait related to the current deficits in cognitive and emotional processing and is correlated to attachment insecurity. (Tervis, Argino, Perachio, & Pit, 2001)

Another study showed that there is a negative and significant relationship between teenager depression and their self esteem. It means that depression increases with the decrease of self esteem. This finding is consistent with the study of Terry (2002). He showed that the increase of self esteem is essential for predicting the problems like depression that may occur due to low self esteem for teenagers. In fact, self esteem is the predicting factor of depression and also the predicting factor of depression until the next 5 years in teenagers. (Brandan & Black, 2008) The studies of Moradi et al. (2010) also in consistent with the present study showed that teaching social skills has a positive and significant effect on self esteem and progression. In a study, Resnik, Bearman, Blum, Bowman and Harria et al. (1997) studied self esteem with other social and individual variables as the predictors of emotional disorder and the probability of committing suicide, but did not report any particular relationship. The study results of Ashuri et al. (2013) in consistent with the present study showed that teaching social skills in teenagers significantly increase self esteem in them that predicts the prediction of depression. It should be noted that self esteem is the important aspect of function or general action of people and is related to other areas like mental, social health and their academic performance. Self esteem is another important factor in self-concept of each person and significantly determines his/her behaviors. It also plays a very important role in mental health and even the evolution of the person. In general, self esteem in depressed people is significantly lower than the normal people. Low self esteem is significantly correlated to the symptoms and is related to many problems of mental health and usually leads to mental damages. Self esteem is an attitude toward oneself. Female teenagers feel less value to them for different happiness and can finally create depression in them over time. (Najarian, 1992)

Another finding showed that only parental attachment especially mother attachment has a significant role in the prediction of teenager depression. But peer attachment does not play a role in the explanation of depression. Although in Pearson correlation analysis, there was a significant relationship between peer attachment and depression, it seems that this variable is in line with two important variables of parental attachment and has no significant effect on teenager depression. Protective base in mother-teenager relationships significantly explain the variance of teenager mental health because there is a close relationship between the efficiency of teenager-parental relationships with communicative phenomenon based on security in which teenagers can discover their intellectual and verbal independency from this parental relationships secure base. In other words, the access of teenagers to mental health and independence in different dimensions is related to their relationships

with parents especially mother as a supportive base. The last finding of the present study showed that among the variables of social skills, parental attachment, peer attachment and self esteem, only the variables of parental attachment, peer attachment and self esteem can explain teenager depression and social skills have no significant role in predicting depression. This is while social skill had a significant and negative relationship with depression through Pearson correlation model. It seems that it has no significant role in the variance of depression. According to the internal practical pattern or visual model of attachment, as emphasized by Balbi, there is a direct relationship between the internal patterns of child from mother with his internal pattern. Confidence and trust to the response of attachment has a significant role in the creation of a positive pattern of oneself and formation of high self esteem. On the contrary, when the child considers that he/she is humiliated by his/her parents, he/she will not only feel that the parents do not want him/her, but also believes that he/she is not essentially valuable and for this reason will have low self esteem in the adulthood and feels himself alone in problematic situations. Such a person has a negative attitude to the world and him/her and will be ready to suffer from depression.

The present study had some limitations including: this study was conducted in Tabriz, thus the obtained results should be cautious and discreet in their generalization to other geographical and cultural areas. This study was only performed on female teenagers and its results cannot be generalized to other ages and groups. It is also suggested to perform this study in other geographical and cultural areas.

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