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Depression among the SC And ST Students at Higher Secondary Level in Motihari District

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Abstract:

As estimated by WHO, depression shall become the second largest illness in terms of morbidity by another decade in the world, already one out of every five women, and twelve men have depression.The objective of present cross-sectional survey-based study was to find out the existence of depression among SC and ST students in Jalpaiguri district. A total 426 number of adolescents' response were collected with Beck Depression Inventory (BDI) from high schools in both rural and urban areas. It was found that, the mean difference in between Rural and Urban areas students regarding their level of depression were statistically significant ($\chi 2 = 11.589$, $p=.009$) at $p<.0.01$level.

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Introduction:

Depression is a common mental disorder that is manifested in depressed mood, loss of interest or pleasure, feelings of guilt or low self-esteem, disturbed sleep or appetite, low energy, and poor concentration (WHO, 2004). According to WHO, Adolescents is defined by the age group of 10-19 years. In India, the adolescent children constitute about 25% of the country's population which came to around 243 million. This figure is about 20% of the world's 1.2 billion adolescents (UNICEF). The average age of depression in India is 31.9 years compare to 18.8 years in China, and 22.7 years in the US. The female: male ratio in this regard was about 2:1 (Bhowmik et. al, 2012).The social structure of our country has led to develop significant disparities among the different sections of the society in almost every aspect of living. People from backward classes, being deprived from the mainstream society for long time, have developed a sense of insecurity and disconnection in every sphere like education, employment, rights and social status. Adolescents from these backward classes naturally enters the battleground of life having in mind those pre-occupied misconceptions of long deprivation by the society. Therefore, very little disappointment or failure is attributed by them as the continuation of their deprivation by the upper classes. It is seen in general, that they become very much vulnerable when exposed to catastrophes of life, and as a result either withdraw their effort or feel anxious, worried and lastly depressed. In this journey of preventing suicide through prevention of depression, the researcher found scarcity of significant studies on adolescents of the weaker section of society which is very ambiguous to generalize the actual causes and status of their depressed state of mind. The present study will be an effort for identifying the adolescents from the weaker section of society, suffering from depression, and a learned inquiry toward the underline causes of the same.

Review of Literature:

Depression was more in girls and still higher in girls who attended the tuition classes (p = 0.035). There was a significant correlation between the prevalence of depression and stream of subjects selected, p = 0.001 (Urmila K.V., Usha K., Mohammed M.T.P, Kavitha Pavithran et al. 2017). Depression was found more in females 59.49% as compare to male 56.24%. The percentage of depressed students was highest among students of I.C.S.E. board (48.33). Depression measured by using Centre for epidemiological studies-depression scale (CES-D). Among many factors observed for association with depression, statistically significant factors identified were working mothers, students staying away from home, poor relationship with family and self or parental dissatisfaction with academic achievement. Peer pressure also had significant association. Having a hobby acted as a protection against depression (Nimal Verma, Meeta Jain, Pritam Roy (2014). According to Neetu Beniwal, Gajender K. Verma, Chander K. Chahar, K. K. Verma (2016) depression was found 2.33% in 6-12- year-old children. Depressed children were showed very high level of social separation, deprivation of privileges, rejection and punishment in their home environment. Vivek Bansal, Sunil Goyal and Kalpana Srivastava (2009) conducted a research entitled as "Study of prevalence of depression in adolescents of a public school". In this study 125 students were selected to find out the prevalence of depression among adolescents' students of a public school. In this study the researcher measured depression by GHQ-12 and BDI. The result show that 15.2% of children were distress (GHQ-12 score e "14; 18.4% depressed (BDI score e "12); 5.6% adolescents were positive score both the instruments. Depression was found more in females 59.49% as compare to male 56.24%. The percentage of depressed students was highest among students of I.C.S.E. board (48.33). Singh, Gupta & Grover (2017) in this study based on cross-sectional method and the researcher 542 randomly selected school going adolescents (13-18 yr.), from eight school by multistage sampling technique. Depression was assessed by using Patient Health Questionnaire-9 (PHQ-9) and associated factors by pretested semi structured interview schedule. The result show that a significant proportion of school going adolescents suffered from depression. The presence of depression was associated with a large number of modifiable risk factors.

Objectives of the Study:

The following objectives were established for the study:

- To know the existing status of level depression among the SC and ST students at higher secondary level in Motihari district.
- To identify significant variations of children's level of depression in term of few demographic (social, personal and economic) indicators.

Hypotheses of the Study:

- **$H_0$1**: There is no significant difference in depression among the SC and ST students with respect to their locality of school.
- **$H_0$2**: There is no significant difference in depression among the SC and ST students with respect to their category of Caste.
- **$H_0$3:** There is no significant difference in depression among the SC and ST students with respect to their Number of Siblings.
- **$H_0$4:** There is no significant difference in depression among the SC and ST students with the respect to their class.

- **$H_0$5:** There is no significant difference in depression among the SC and ST students with the respect to their education of father.
- **$H_0$6:** There is no significant difference in depression among the SC and ST students with respect to their education of mother.
- **$H_0$7:** There is no significant difference in depression among the SC and ST students with respect to their family income.

Methodology:

It was a cross-sectional study, carried out over a period of one month from December 2024 to January 2025, among adolescents studying in selected nine higher secondary schools of Motihari district. From the selected school three classes 9th, 10th and 11th were selected randomly and from the 3 selected classes all the students who were present on the day of visit and willing to participate were included in the study. The data was collected using a predesigned, semi-structured questionnaire after obtaining informed consent from the concerned adolescent.

The study tool used for detecting early symptoms of depression in adolescents was simple screening psychological instrument: Beck Depression Inventory (BDI-II). BDI-II is a series of 21 item with each item rated with a set of four possible answer choices of increasing intensity developed to measure cognitive, behavioural, affective, and somatic component of depression. When the test is scored, a value of 0 to 3 is assigned for each answer and then the total score is compared to a key to determine the depression's severity. The sum of all BDI-II item scores indicates the severity of depression. Score of 0-13 was taken as minimal Depression, 14-19 as Mild, 20-28 as moderate as and more than 29 as severe depression.

Findings and Interpretation:

Out of total 426 participant, 307 (72.1%) were found to have scores corresponding to some degree of depression and 119 (27.9%) were found minimal depression. Table no 1 shows prevalence of depression on the basis of Beck Depression Inventory (BDI-II).

Table 1: Prevalence of depression on the basis of BDI-II Criteria (n=426)

Depression on the basis of BDI-II Criteria (n=426)			Total
Depression Level	Severe Depression	Total Number	33
		% of Total	7.7%
	Moderate Depression	Total Number	127
		% of Total	29.8%
	Mild Depression	Total Number	147
		% of Total	34.5%
	Minimal Depression	Total Number	119
		% of Total	27.9%
Total		Total Number	426
		% of Total	100%

Table 2: Descriptive statistics based on Chi-square test of independence.

Variable	Levels	N	Mean	Result	p-value	Remarks
Locality of School	Urban	143	33.57	$\chi2 = 11.589$	.009	Significant
	Rural	283	66.43			
Caste of the Students	SC	392	92.02	$\chi2= 4.152$	.246	Not Significant
	ST	34	7.98			
Number of Siblings	Single	11	2.58	$\chi2= 10.954$	.090	Not Significant
	One Sibling	145	34.04			
	More than one	270	63.38			
Class of the students	Class-IX	36	8.45	$\chi2= 8.494$	.204	Not Significant
	Class-X	147	34.51			
	Class-XI	243	57.04			
Father's Education	Illiterate	81	19.01	$\chi2= 2.605$	.978	Not Significant
	Up to MP	305	71.6			
	Up to HS	26	6.1			
	Higher Studies	14	3.3			
Mother's Education	Illiterate	120	28.17	$\chi2= 3.526$	.940	Not Significant
	Up to MP	278	65.26			
	Up to HS	19	4.46			
	Higher Studies	9	2.11			
Family Income	Below 5000	274	64.32	$\chi2= 16.488$	.057	Not Significant
	5000-9000	93	21.83			
	10000-15000	37	8.67			
	>15000	22	5.16			

From the data in Table 2, we can see that:

- Out of the total sample, 283 students were attending schools located in the rural area and 143 students in urban area. Chi-square test of independence was computed for locality of school variable

and found that the mean difference in between Rural and Urban areas students regarding their level of depression was statistically significant ($\chi 2 = 11.589$, p=.009) at p<.0.01level. Therefore, the result reject Null Hypothesis 1.

- Out of the total sample, 392 students were from Scheduled caste category and 34 students were from Scheduled Tribes category. Chi-square test of independence was computed for caste of the student's variable and found that the mean difference in between SC and ST students regarding their level of depression was statistically not significant (P > 0.05).

- Out of the total sample, 11 children (2.58%) were single child of their parents without any sibling(s), 145 children (34.04%) had one sibling and 270 children (63.38%) had more than one sibling. Chi-square test of independence was computed for number of siblings variable and found that regarding their level of depression was statistically not significant (P > 0.05).

- Out of the total students, 36 students (8.45%) students were from class IX, 147 students (34.51%) were from class X and maximum 243 students (57.04%) were from XI standard. Chi-square test of independence was computed for class of the student's variable and found that regarding their level of depression was statistically not significant (P > 0.05).

- Out of the total sample, 81 students whose father were Illiterate, maximum number 305 students (71.6%) whose father were educated up to secondary level and were educated up to HS level 26 and only 14 students whose father were higher educated. Chi-square test of independence was computed for father's education variable and found that regarding their level of depression was statistically not significant (P > 0.05).

- Out of the total sample, 120 students whose mother were Illiterate, maximum number 278 students whose mother were educated up to secondary level and up to HS level 19 and only 9 students whose mother were higher educated respectively. Chi-square test of independence was computed for mother's education variable and found that regarding their level of depression was statistically not significant (P > 0.05).

- Out of the total sample, 274 students were identified in their family income below five thousand, 93 students were indicating whose family monthly income five thousand to ten thousand, another 37 students were identified their monthly family income ten thousand to fifteen thousand and only 22 students were identified whose family income more than fifteen thousand. Chi-square test of independence was computed for family income variable and found that regarding their level of depression was statistically not significant (P > 0.05).

Discussion and Conclusion:

The present study revealed that the rate of prevalence of depression among SC and ST students found to be 37.5% ranged from moderate to severe depression level. It indicated a great but not statistically significant impact of family structure on the depression level among the school going children, where nuclear family structure is causing more depression than the joint family structure. The adolescents studying at urban schools were suffering more from severe depression than that of rural schools and the difference was statistically significant. When we look at ST students, they showed more symptoms of moderate depression (44.1%) as compared to SC students (28.6%) but statistically found to be not significant.

In this study, it was found among overall students that, 7.7% suffering from severe level of depression, 29.8% have moderate level of depression and 34.5% have mild level of depression which was similar to the findings of Jha, et. al. (2017).

In the present study, urban areas students were suffering from higher level of depression than students from rural areas, and the difference was found to be statistically significant ($P < 0.05$).

In the study of Ramli, M. et. al (2008) the difference between levels of gender and family income was found to be statistically significant ($P < 0.01$) which the present study strongly contradicts.

As the SC and ST students belong to the marginalized section of the society, acquainted support for reducing depression or recover from it is lacking from family members or immediate society. Therefore, the primary duty for the teachers is to identify the particular students suffering from depression. Then, they should try to get to the root of the problem by being amicable to the students and understanding the real cause of their depressive behaviour. Based on the seriousness of the problem, the teachers should contact the parents of the student and discuss about the necessary measures in order to reduce the level of depression. If necessary, the teachers and parents should also consider consulting a psychiatrist (Sinha & Ghosal, 2015).

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