

PECULIARITIES OF DEPRESSIVE STATES OF SENIOR STUDENTS WITH DIFFERENT PERCEPTIONS OF PARENTAL EDUCATION STYLE

ОСОБЛИВОСТІ ДЕПРЕСИВНИХ СТАНІВ СТАРШОКЛАСНИКІВ З РІЗНИМИ УЯВЛЕННЯМИ ПРО СТИЛЬ БАТЬКІВСЬКОГО ВИХОВАННЯ

This article reviews the research on psychological features of depressive states in high school students with different ideas about parenting styles. Depression is one of the most common mental disorders in the modern world. According to the World Health Organization (WHO), more than 300 million people are depressed each year. More than 8% of adolescents are diagnosed with clinical depression, while depressive manifestations and episodes occur even more often. As a person in adolescence, scientists characterize a high school student by severe interpersonal problems and a more unstable course of depression than an adult personality. We can observe symptoms of depressive states in high school students in the emotional, intellectual, purposeful, and motivational spheres of character, which objectively manifest in changes in their behavior. Parenting style is the basis for the development of communication between family members. Today there are four main styles of education: authoritarian, authoritative, liberal, and indifferent styles. Adult survey data are the base for many scholars when assessing parenting style. However, parents and children often have other ideas about parenting styles. These differences can cause conflicts, misunderstandings, and subsequent depression in adolescents. To analyze the depression of high school students, it is appropriate to consider their idea of parenting style. We explored the expression of depression in high school students by the Beck Depression Questionnaire (scale for assessing depressive states) and the method of differential diagnosis of depression by self-esteem (depression scale V. Zung, adapted by T.N. Balashova). The article determines high school students' perceptions about the style of parenting by the questionnaire "Behavior of parents and attitudes of adolescents to them" E. Shafer (AAP – Adolescents about parents) modified by Z. Mateychik and P. Rzhichan. To form a complete picture of the analysis of depressed states of high school students we also used a method that helps to visually assess the subjective well-being of respondents (method for determining the level of life satisfaction E. Diner) and a method to identify and determine deep psychological personality traits TIPI (TIPI-UKR) by S. Gosling, P. Renfrew and W. Swann (adaptation by M. Klimanskaya, I. Galetskaya).

Key words: depression, depressive states, parenting style, depressive states in high school students.

В даній статті здійснено огляд досліджень психологічних особливостей депресивних станів у старшокласників з різним уявленням

про стиль батьківського виховання. Депресія є одним з найбільш поширених психічних розладів у сучасному світі. За даними Всесвітньої організації охорони здоров'я (ВООЗ) в депресивних станах перебувають щороку понад 300 млн. людей. Більш ніж 8% підлітків на сьогодні діагностуються з клінічною депресією, в той час як депресивні прояви та епізоди виникають ще частіше. Старшокласникові, як особі в підлітковому віці, характерні серйозні міжособистісні проблеми та більш нестійке протікання депресії, ніж дорослій сформованій особистості. Симптоми депресивних станів у старшокласників спостерігаються у емоційній, інтелектуальній, вольовій та мотиваційній сферах особистості, що об'єктивно проявляється у зміні їх поведінки. Стиль батьківського виховання виступає підвалиною розвитку комунікації між членами сім'ї. На сьогодні виділяють 4 основні стилі виховання: авторитарний, авторитетний, ліберальний та індіферентний стилі. Багато науковців при оцінці стилю виховання керуються даними опитувань дорослих. Проте нерідко батьки та діти мають різне уявлення про стиль виховання в сім'ї. Дані розбіжності можуть слугувати причинами конфліктів, непорозумінь, а в подальшому появи депресивних станів у підлітків. Для аналізу депресивності власне старшокласників доречним є брати до уваги саме їхнє уявлення про стиль батьківського виховання. Вираження депресивності старшокласників нами визначалась за опитувальником депресії А. Бека (шкала для оцінки депресивних станів) та методикою диференційної діагностики депресії за самооцінкою (шкала депресії В. Зунга, адаптована Т.Н. Балашовою). Уявлення старшокласників про стиль батьківського виховання визначалися за опитувальником «Поведінка батьків і ставлення підлітків до них» Е. Шафєр (ГОР – Подростки о родителях) за модифікацією З. Матейчик і П. Ржичан. Для формування повної картини аналізу депресивних станів старшокласників також було використано методику, що сприяють наглядній оцінці суб'єктивного благополуччя опитуваних (методику на визначення рівня задоволеності життям Е. Дінєра) та методику, що дозволяє виявити та детермінувати глибинні психологічні риси особистості (П'ятифакторний опитувальник особистості TIPI (TIPI-UKR) за С. Гослінгом, П. Рєнфру і В. Свонном (адаптація М. Кліманська, І. Галецька).

Ключові слова: депресія, депресивні стани, стиль батьківського виховання, депресивні стани у старшокласників.

UDC 159.9

DOI <https://doi.org/10.32843/2663-5208.2022.39.22>

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Formulation of the problem. Today, depression is one of the most common mental disorders globally, affecting more than 300 million people each year, according to the World Health Organization (WHO). In society and

many families, various attitudes and values are encouraged and cultivated, which later become the property of individual consciousness, and negative experiences can cause an individual's psychological predisposition to different

depressive and anxious states, negative emotions, and other emotional disorders [20].

From early childhood, the circumstances that occur with the human personality affect personality development, while adverse events can cause deformations in its structure. Socio-economic situation of child development, family atmosphere, parenting style, features of relationships with parents, teachers, their level of psychological and professional education, increasing school requirements, as well as requirements for admission to higher education, other individual personality characteristics may determine the appearance of emotional disorders in high school students, including depressive states. Specialists in psychology Belous R.M. states that "more than 5% of adolescents are prone to depression and depression." In addition, among the social factors of depression, N. Runner focuses on the relationship between parents and adolescents, which, according to the scientist, has a direct impact on the occurrence of depressive states in high school students. An essential factor, in this case, is the teenager's idea of the style of parenting in his family, which often differs from the views of his parents. These differences in perceptions are often the cause of conflicts that lead to the direct emergence of depressive states in high school students. It gives impetus and indicates the relevance of a detailed study of the problem of depressive states of high school students with different ideas about the style of parenting [4].

Analysis of recent research and publications. Scientists of different schools and directions studied the problem at the fundamental-theoretical and applied levels (G. Eisenk [17], A. Beck [2], V. Zung [18], K. Izard [18], S.L. Kravchuk [12], A. Lowen [14], Z. Freud [4], Y. Hanin [19] and others). The work of a number of foreign and domestic scientists is devoted to the development of the practical side of depression in high school students: N.I. Runner [3], R.M. Belous [4], S.M. Dmitrieva [7], D. Zubtsov [8], A.A. Kirpichenko [9], A.E. Lichko [13], S.D. Maksymenko [15] and others.

Formulating the goals of the article. The study aims to establish the features of the severity of depressive states of high school students with different ideas about the style of parenting.

The main material. At the present stage of the development of society, manifestations of depressive states are becoming more widespread among high school students. According to WHO statistics, scientists diagnose clinical depression in more than 8% of adolescents, while depressive manifestations and episodes occur more often [20].

Characteristic features for students who have depressive manifestations are low self-esteem, depression, loss of interest in previously enjoyable activities, embarrassment, poor school

performance, and problems with concentration and focus on something [7, p. 345–349]. Very often, depressive states and manifestations go unnoticed, and in the last, the teenager's environment (parents, teachers, classmates, friends) and even their carriers ignore them. It is better to keep in mind that neglecting these manifestations can often lead to various mental problems and disorders and suicidal thoughts and actions.

We can characterize a depressed state as a combination of feelings of depression, sadness, joy, despair, and general unhappiness [12].

A special relationship develops between a child and parents from an early age. The formation of many qualities and behaviors inherent in the child largely depends on the nature of communication in the family. Parents use their ways of influencing and teaching methods, and beliefs, to help the child develop into, in their opinion, a good and decent adult. The style of family upbringing reflects the combination of parents' expectations and their social demands with control sanctions, which create certain limits for the manifestations of children's whims. Problems and misunderstandings in the family, lack of parental support, limited autonomy and activity, excessive control, or lack of it are among the leading causes of adolescent depression. Having a clear understanding of the parenting style that prevails in the family can predict the development of depression. We should also not forget that the perception of the child according parenting style and the parents' one may differ, so scientists should consider this in the process of determining it.

Andreeva T.V., in her work on family psychology, considers four main styles of parenting [1]:

- authoritative;
- authoritarian;
- liberal;
- indifferent.

Although many factors influence the lives of high school students, among which the parental style of upbringing is not the only important one, it is still one of the key ones. By choosing the most harmonious way of influencing and communicating with a teenager, parents will help him find the way and direction in life that will not depress, but rather encourage the child. Having a parent who is willing to listen and help, who enjoys smart authority and sound advice, a high school student will be able to prevent depression and other mental disorders and create an idea of the right way of family relationships for the future.

Taking into account the specifics of the research topic, as well as the age of the audience, there are five methods focused on studying the peculiarities of depressive states in high school students with different ideas about parenting styles, namely A. Beck's depression questionnaire (scale for assessing depressive states) [2]; methods of dif-

ferential diagnosis of depression by self-esteem (depression scale V. Zung, adapted by T.N. Balashova) [17]; questionnaire "Behavior of parents and the attitude of adolescents to them" E. Schafer (AAP – Adolescents about parents) Modification: Z. Mateychik and P. Rzhichan [5, 19]; five-factor personality questionnaire TIPI (TIPI-UKR) by S. Gosling, P. Renfrew and W. Swann (adaptation by M. Klimanska, I. Galetska), [10]; methods for determining the level of life satisfaction of E. Diner (a cognitive component of subjective well-being) [21].

Before the study, we put forward two hypotheses:

1) we assume that the most pronounced depressive states in high school students, according to whose ideas their parents are directive and hostile to them;

2) probably the least typical depressive states are high school students who have a vision that their parents show a positive interest in them.

The study involved 53 high school students, namely 10th-grade students (25 boys and 28 girls). The uniformity of the sample by age (all respondents were 16 years old) allowed us to focus on finding a connection between high school students' perceptions of their parenting style and the character-

istics of depressive states at this age, regardless of age differences.

According to the study, the average value of the degree of manifestation of depressive symptoms by BDI in our respondents is 10.60377, which corresponds to the level of moderate depression. According to the data, the average value is shifted to the minimum more than to the maximum, so people with mild and no symptoms of depression are more than those with severe. In fig. 1, it is possible to observe tendencies of depression on BDI in our subjects.

We can observe that among this sample of 66% of respondents have no depressive symptoms (up to 9 points), scientists found moderate depression in 15% of respondents (10–18 points), a critical level of depression in 15% of high school students (19–29 points), as well as 4% of respondents, show obvious depressive symptoms (fig. 2).

Analyzing the cognitive component of subjective well-being according to the method for determining the level of life satisfaction of E. Diner, we can see that the average of our sample is 22.88679, which according to the interpretation of the results, is a relatively high level of life satisfaction. 19% of people have partial dissatisfaction with life, and 11% have a reasonably

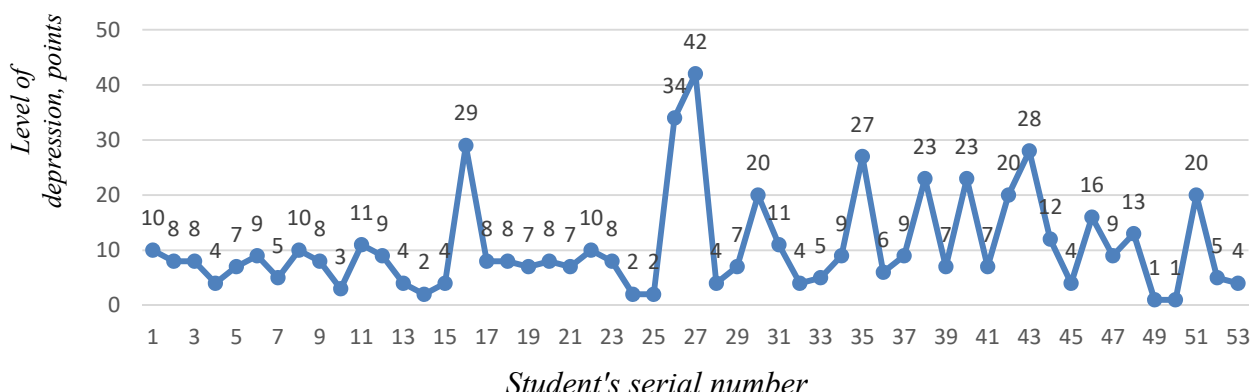


Fig. 1. The results of a survey of high school students about their depression according to the BDI method

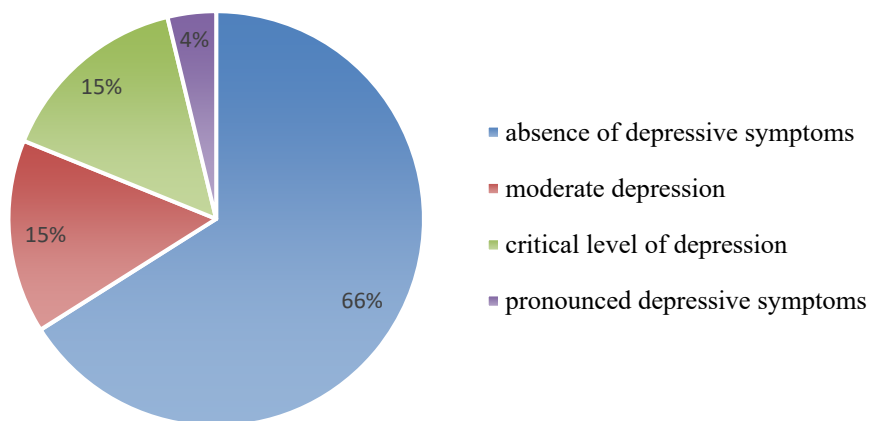


Fig. 2. The level of depression of the respondents according to the BDI method

high level of dissatisfaction. It is worth noting that 11% of respondents with dissatisfaction with life are also people with depressive symptoms (fig. 3).

We will also consider more detailed scales and results of the AAP methodology – parents' behavior and adolescents' attitude to them. None of the respondents set the maximum value for the scale of father autonomy is immediately apparent. The maximum value obtained during the study was 4 out of 5 possible. On the other scale, the values reached a maximum. This indicates that the parents of most respondents show sufficient attention and care for their child, not leaving him in a permanent autonomous mode and not shying away from problems. The average level of parental autonomy of the subjects (2.7547) is equal to the average value of the scale. It indicates a balance of parental care and attention to the child's life, giving him the freedom he needs. In the rankings on the idea of parenting style, all the indicators obtained reached an average level, which indicates a competent attitude of the father to the adolescent. There is no excessive directiveness or inconsistency, and there is also a medium level of positive interest.

As for the scales for assessing the mother's upbringing style, the indicators are less average; there is an above-average level of inconsistency, which indicates a trend of abrupt change in parenting styles, outlining the transition from too strict to liberal and then from paying close attention to complete emotional rejection. Above average, there are also indicators of the level of hostility, which represents a negative attitude towards the child, the lack of sufficient love and respect for her.

Such are the high school students' perceptions of their parents' attitudes toward them. We can see that students more often perceive the mother's personality as hostile. Still, it can also be that the more significant presence of the mother in the life of the child and the presence of more frequent contact between them, the interest of mothers in adolescent life caused it.

The results of correlation analysis showed that:

1. BDI depression correlates with such scales of Schafer's AAP method:
 - scale of directiveness of the father (direct correlation $r = 0,343, p < 0,05$);
 - maternal hostility scale (direct correlation $r = 0.462, p < 0.05$);
 - maternal autonomy scale (inverse correlation $r = -0.297, p < 0.05$).
2. Zunge's level of depression correlates with such scales of Schafer's AAP method:
 - parental hostility scale (direct correlation $r = 0.474, p < 0.05$);
 - parental inconsistency scale (direct correlation $r = 0.277, p < 0.05$);
 - scale of positive interest of the mother (inverse correlation $r = -0.334, p < 0.05$).
3. There is undoubtedly a direct correlation between BDI and Zung's depression ($r = 0,387, p < 0,05$).
4. BDI depression rate correlates with TIPI-UKR:
 - conscientiousness (inverse correlation $r = -0.409, p < 0.05$);
 - emotional stability (inverse correlation $r = -0.333, p < 0.05$).
5. Zung's depression rate correlates with TIPI-UKR:
 - emotional stability (inverse correlation $r = -0.323, p < 0.05$).
6. BDI depression index and Zung depressive index correlate with the cognitive component of Diner's well-being (inverse correlation $r = -0.474, p < 0.05$ and $r = -0.289, p < 0.05$, respectively).
- 7) correlations of life satisfaction (cognitive component of Diner's subjective well-being) with:
 - indicators of the TIPI-UKR methodology:
 - A) conscientiousness (direct correlation 0.528295);
 - B) emotional stability (direct correlation $r = 0,394, p < 0,05$);
 - scales of the Schafer's AAP methodology:
 - A) parental hostility scale (inverse correlation $r = -0.435, p < 0.05$);
 - B) parental inconsistency scale (inverse correlation $-r = 0.277, p < 0.05$);

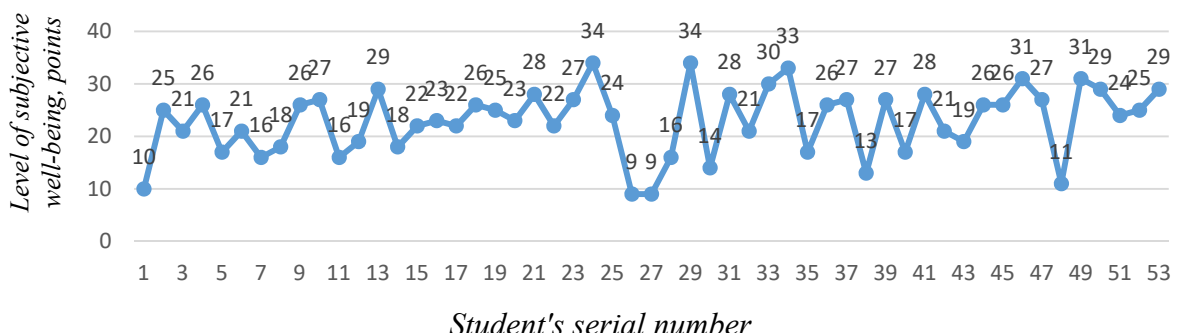


Fig. 3. The results of a survey of high school students on the level of their subjective well-being (the cognitive component) according to the Diner method

C) scale of positive interest of the mother (direct correlation $r = 0.481, p < 0.05$).

D) maternal hostility scale (inverse correlation $-r = 0.499, p < 0.05$).

The next step was cluster analysis. By selecting 4 clusters between them, statistically, we found significant differences on all scales. This indicates that the division into 4 clusters is the most optimal (fig. 4). The first cluster included 6 people, the second had 20 people, the third had 12 people, and the fourth cluster included 15 people. The clusters are uneven and contain less than 25 people each, so we have to use non-parametric statistics [16].

We should note that cluster 1, which contains only 6 people, differs significantly from the other clusters. Parent scale scores in this cluster are lower than in others. This is since this cluster includes four high school students who, for some reason, did not have a father. Their group also included two people with similar results, which indicates that the father's role in these two families is relatively passive, and the child does not feel father's presence in the process of upbringing or has problems with the assessment of the father. As this cluster includes orphans and children who have issues assessing the father's role in education, i.e., completely different from the available set of individual situations, we will further analyze this cluster separately and not compare it with the other 3 clusters.

Next, we compare these clusters with each other on other indicators. To do this, we use the Kruskal-Wallis method, a nonparametric method for comparing three or more groups with each other.

Cluster 2. Authoritative style of parenting with positive parental interest (20 people)

1. The dominating indicators of the scales are the father's positive interest and the mother's positive interest.

2. Indicators of the scales of directiveness and hostility in both fathers and mothers indicate a low level.

3. Depression rates (BDI and Zunge methods) in the 2nd cluster are the lowest, and life satisfaction rates (Diner and Bradburn methods) are the highest.

4. From this, we can assume that high school students' perception of parenting style in this cluster is the most favorable.

Cluster 3. Authoritarian style with inconsistent behavior in parenting (12 people)

1. In terms of depression (BDI and Zunge methods), the 3rd cluster has the highest rates of depression symptoms in high school students.

2. Also, the rate of emotional stability (TIRI method) is relatively low.

3. According to the Diner scale, representatives of the 3rd cluster showed low upper and lower limits of life satisfaction.

4. There are peaks on the scales of directiveness, hostility, and inconsistency of the father and directiveness, hostility, and inconsistency of the mother.

5. There is a statistically significant difference in the level of depression and the level of life satisfaction between clusters 3 and 2.

Cluster 4. Indifferent style of parenting (15 people)

1. The dominant indicators are indicators of the level of hostility and autonomy of the father and the mother's autonomy.

2. The teenager's perception of the so-called autonomy of parents is in the signs:

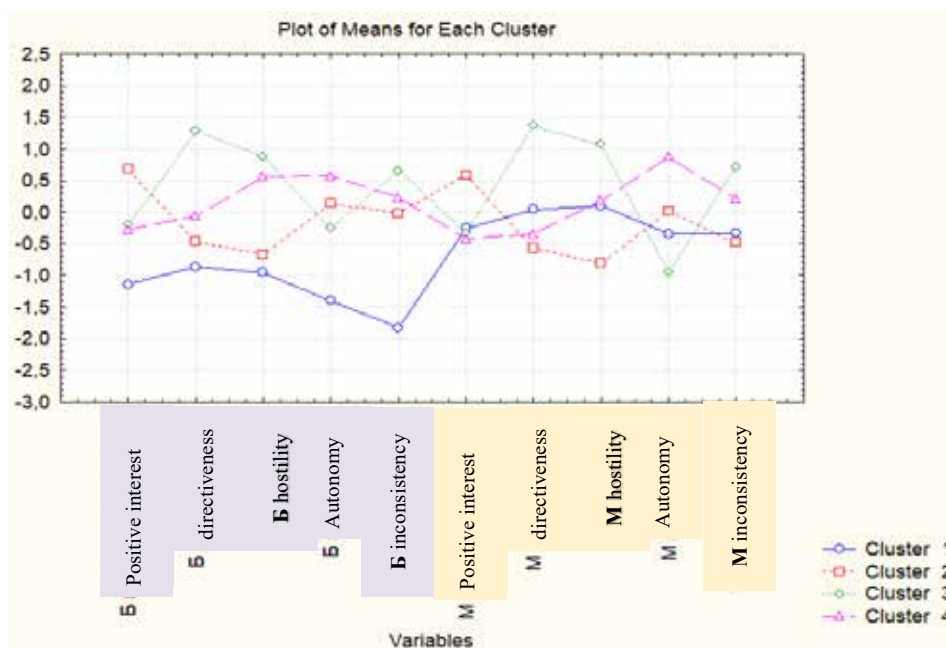


Fig. 4. The obtained profiles when dividing the general group of subjects into four clusters

– alienation of parents;
 – partial non-involvement in the process of upbringing or communication between an adult and a child.

Therefore, according to cluster analysis (Kruskal-Wallis test), we can note that cluster 3 is the most problematic. It shows pronounced dissatisfaction with life, the lowest emotional stability, and the dominance of negative feelings and emotions over positive ones. In terms of ideas about parenting style, this cluster presents a sense of high directiveness, hostility, and inconsistency of parents.

Conclusions. After the study, we can draw several conclusions:

1. The research confirmed the hypothesis that the most pronounced depressive states in high school students, according to their parents' views, are directive and hostile to them.

2. The least typical depressive states are high school students who have a vision that their parents show a positive interest in them, which confirms the second hypothesis.

3. Excessive autonomy (detachment) and parents' inconsistency in the process of education also contribute to the emergence of depressive states in high school students.

4. In addition to ideas about parenting style, the depression of high school students is influenced by several other factors. In particular, we can assume that with increasing integrity and emotional stability in high school students, their depression decreases, and depressive states decrease.

Among the main recommendations are:

1. In counseling and psycho-corrective work with high school students, it is essential to diagnose the idea of parental upbringing in case of depressive symptoms.

2. The study considers that the best style is an authoritative style of parenting with positive interest, and it recommends promoting it by psychologists in educational work with parents in schools.

3. Instead, parents should avoid the use of authoritarian and different styles, which include high levels of hostility (authoritarian and indifferent) and directiveness (authoritarian), and inconsistency (indifferent), which in turn contribute to depression in high school.

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