

Peculiarities Of Adolescent Depression Before Passing The General State Exam*

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Abstract. *The problem of emotional distress of children and adolescents is one of the central problems that attracts the attention of parents, teachers and psychologists. A vivid manifestation of the emotional disadvantage of adolescents is a depressive state before passing the CSE and the USE. It is worth noting that depression in adolescents is not just a bad mood, but a serious emotional disorder that hinders its development, affects well-being and quality of life.*

Modern scientists, such as Gatsonis & Covacs (1989), Puig-Antich (1986),¹ D.N. Isaev (2000), in their studies of the depressed states state the facts that psychotic and endogenous forms of depression are more common for children than for adults. Brent (1993),² Robbins & Alessi (1985),³ have identified the links between depression and suicidal tendencies in adolescence.

In this paper, we consider the essence, causes and signs of depression in senior schoolchildren before passing the CSE.

Keywords: depression, depressive disorder, CSE, prevention, late adolescence.

Introduction

Despite a lot of research on the problem of depressive states of the individual, in modern science and practice the problem of adolescent depression remains topical and overarching, as the number of children with various personal abnormalities, such as autonomic disorders, poor academic performance, anxiety and fear, increases. These negative conditions often lead to additive behavior and, the most dangerous and irreversible, to the manifestation of suicidal behavior. According to G.Z. Batygina and N.M. Iovchuk (1998), A.A. Severnyi (1999),⁴ the prevalence of depression in children and adolescents over the past 10-20 years has increased significantly. Scientists, in particular A.B. Smulevich (2001),⁵ found that the incidence of depression in the general population is now approaching 3% in the general population, namely, the spot prevalence rates for severe depression are high enough (less than 1% for preschool children, 2-3% for school-age children and 3-8% for adolescents).

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¹ J. Puig-Antich, "Psychobiological markers: Effect of age and puberty," in M. Rutter, C. E Izard, P. B. Reads (eds.), *Depression in young people: Developmental and clinical perspectives*, New York, Guilford, 1986, p.341-381.

² D. A. Brent, "Depression and suicide in children and adolescents," in *Pediatrics1. Review*, XIV (1993), p. 380-388.

³ D. R. Robbins, N. E. Alessi, "Depressive symptoms and suicidal behavior in adolescents," in *American Journal of Psychiatry*, CVIII (1985), p. 588-592.

⁴ N. M. Iovchuk, A. A. Severnyi, "Depression in children and adolescents," in *Curative pedagogy and psychology (attachment to the journal "Defectology")*, II (1999), p. 24-52.

⁵ A. B. Smulevich, *Depression in general medicine: A guide for doctors*, Moscow, Medical News Agency, 2001, p. 256.

According to the WHO (World Health Organization), more than 350 million people of different age groups suffer from depression throughout the world.⁶ Depression is a serious health disorder that can lead to significant human suffering and his poor performance at work, at school and in the family (4). According to the official website of the Scientific Center for Mental Health, the prevalence rates of depression increase not only among middle-aged people, but also quite often occur in childhood and adolescence (Age features of the clinic and course of depression in children and adolescents // Scientific Center for Mental Health. Federal State Budget Scientific Institution. Official site. URL: <http://www.psychiatry.ru/lib/1/book/38/chapter/16> (accessed date: 8.09.2017).⁷

In connection with the urgency of the problem, we conducted a research to study peculiarities of the manifestation of depressive states in high-school students before passing the CSE.

Depression (from Latin, deprimō - to press, suppress) is an oppressed, depressed mental state, accompanied by a decrease in mood and loss of the ability to experience joy (anhedonia), impaired thinking (negative judgments, pessimistic view of what is happening), and inhibited motor activity (2).

Any depression consists of three components - mood disorder, autonomic disorders and fatigue:

1) the component of depression is related to mood changes - a sad depressed mood lasts more than two weeks;

2) the depression component includes vegetative disorders (manifestations of vegeto-vascular dystonia);

3) the depression component - asthenic, includes fatigue, sensitivity to weather changes, irritability.

But we are most interested in adolescent depression. Note that adolescent (separation) depression is a condition where we can observe a deterioration of well-being in three vectors:

1) *lowering of mood*, which is marked by depression, tearfulness, fatigue, sadness, melancholy,

2) *sleep disorders*,

3) appetite disorder that manifests itself through fasting or excessive overeating (Age features of the clinic and course of depression in children and adolescents // Scientific Center for Mental Health. Federal State Budget Scientific Institution. Official site. URL: <http://www.psychiatry.ru/lib/1/book/38/chapter/16> (accessed date: 8.09.2017).

It is known that adolescence is characterized by a vivid manifestation of emotions, demonstrative behavior, a sharp change of various states.

⁶ Depression. Fact Sheet No.369. October 2012. URL: <http://www.who.int/mediacentre/factsheets/fs369/ru/>, accessed 09. 09. 2017.

⁷ Age features of the clinic and course of depression in children and adolescents //2017. Scientific Center for Mental Health. Federal State Budget Scientific Institution. Official site. URL: <http://www.psychiatry.ru/lib/1/book/38/chapter/16>, accessed 08. 09. 2017.

Scientists, such as N.M. Iovchuk and A.A. Severnyi (1999),⁸ D. I. Isaev (2000),⁹ A. Kempinskii (2017),¹⁰ and others, note that it is quite difficult to recognize adolescent depression, but adults need to pay attention to the following symptoms, such as a groundlessly depressed mood, anhedonia - loss of interest or pleasure from previously pleasant activities, expressed fatigue, pessimism, feeling of guilt, uselessness, fear, low self-esteem, inability to concentrate and make decisions, thoughts of suicide, sleep and appetite disturbances.

Among the behavioral manifestations of adolescent depressive disorders can be passivity, the difficulty of involving in a purposeful activity, avoiding contacts. In the intellectual and the volitional sphere, there are difficulties in decision-making, slowness of thinking. One of the most common symptoms of depression is a violated regulation of self-esteem.

The causes of depressive disorders can be both physiological and psychological: traumatic, *stressful situations due to overload*. We shall consider the last reason in more detail.

The CSE is a compulsory state examination, which a 9th-grade student must pass in Russia, according to FGOST. We (the authors of the paper) believe that the majority of students, teachers and parents experience psychological discomfort, resulting in the formation of persistent fears, anxious states of the adolescent's personality before the future, which can further lead to depression and entail disadaptation of the individual in society. It is impossible not to agree with the opinion by Iu.F. Andropov (2000), who argues that depression in adolescents imposes a strong imprint on all sides of the personality, leads to loneliness and alienation. If not preventing depression (in particular, before the CSE), this can lead in the future to various forms of deviant behavior.

Materials and methods

Our research was conducted on the basis of a comprehensive school in Kazan. The experiment involved the 9th-grade students. For the diagnosis, we conducted a questionnaire survey "Soon CSE" among the students and used the technique of differential diagnosis – *Zung Self-Rating Depression Scale* (T.I. Balashova's version), which was developed at the University of Duke by a psychiatrist doctor William Zung. The test allows assessing the level of personality depression and determine the degree of depressive disorder.

Before the beginning of the survey, the subjects receive special forms, where they must make certain notes, as they are read. The corresponding instruction, containing information about what the subjects should do, is preliminary provided. The test contains 20 questions. Full testing with processing takes 20-30 minutes. The level of depression is calculated by the formula: $LD = \Sigma dir. + \Sigma rev.$, where $\Sigma dir.$ is the sum of the crossed-out figures to the "direct"

⁸ N. M. Iovchuk, G. Z. Batygina, "Prevalence and clinical manifestations of depressions in the school-aged adolescent population," in *Journal of Neurology and Psychiatry*, IX (1998), p. 33-37.

⁹ D. N. Isaev, *Psychosomatic disorders in children: a guide for doctors*, St. Petersburg, Piter, 2000, p. 512.

¹⁰ A. Kempinskii, *Melancholy. Adolescent depression*, Sankt Petersburg, Nauka, 2002; <http://www.s-anxiety.ru/library/km/kempinsky-melanholiya105.html>, accessed. 08. 09. 2017.

statements No. 1, 3, 4, 7, 8, 9, 10, 13, 15, and 19; Σ_{rev} is the sum of the figures "reverse" to the crossed-out statements No. 2, 5, 6, 11, 12, 14, 16, 17, 18, and 20. As a result, we get LD , which ranges from 20 to 80 points.

If LD is less than 50 points, then a normal state is diagnosed. If LD is more than 50 points and less than 59 points, it means slight situational or neurotic depression. LD equal to 60-69 points means a subdepressive state or masked depression. A true depressive state is diagnosed when LD exceeds 70 points.

Results And Discussion

At the ascertaining stage, the initial values of the studied traits in senior schoolchildren were evaluated according to the above described methods. Based on the results of the questionnaire, we found out the reasons that are especially worrisome for the 9th-grade graduates. Let us list them: doubts about the strength and richness of knowledge, doubts about one's own abilities (ability to analyze the material and concentrate attention). Also, high school students noted rapid fatigue, anxiety, lack of self-confidence, stressful and unfamiliar situation, fear of responsibility to parents and teachers. More than 90% of the interviewed students answered that they are most worried about the forecasts of teachers, parents and negative information in the media. Analysis of these reasons allowed us to identify a group of difficulties of the CSE. We will present them in Table 1.

Table 1. The group of the CSE-related difficulties

Cognitive	Difficulties associated with the specifics of the systematization of knowledge and information processing during the CSE. Difficulties related to the specifics of working with test tasks, insufficient knowledge, inability to flexibly and clearly operate with the system of learning concepts and definitions of the subject to be passed.
Personal	Difficulties due to the peculiarities of the psycho-emotional background of the adolescent's personality and the state, the lack of the opportunity to get adult support
procedural	associated with the procedure of the CSE itself (total control, video surveillance) and the absence of a clear strategy of activities

Here we present the results of Zung Scale test in Fig. 1.

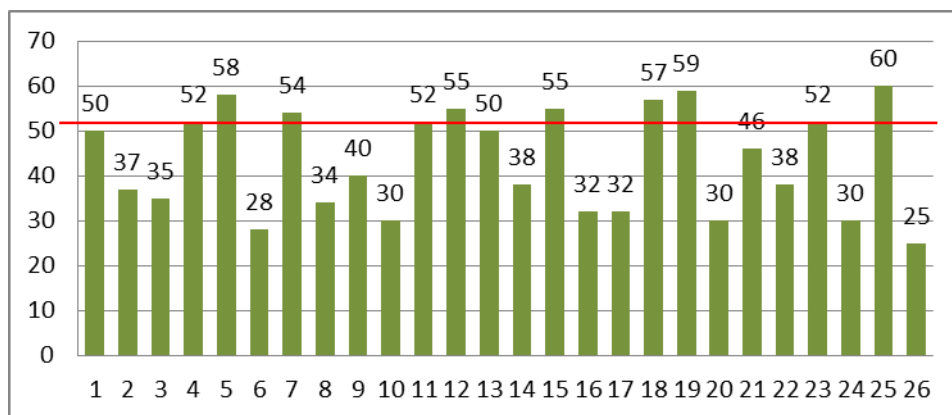


Fig. 1. Indicators of the level of depression according to Zung Self-Rating Depression Scale

Having analyzed the data obtained, we see that 42.3% of respondents have LD of more than 50 points, which indicates a slight situational or neurotic depression. This category of adolescents experiences irrational, indefinable and uncontrolled, clearly manifested mood swings, as well as the predominance of a state of depression, a feeling of oppressive anguish. Neurotic depression sometimes expresses excessive self-criticism, low self-esteem and self-incrimination are sometimes observed; in adolescents sometimes there is a loss of interest in events, in particular, in studies, in communicating with peers; however, working capacity often remains the same. As this manifestation aggravates, mood changes can become more pronounced, but emotional negative feelings do not take the form of a persistent, constant, intense depressed state. Students who have been diagnosed with mild depression are more likely to show signs of anger and aggression in the classroom. If we consider that they have a lower mood than they should, then the reactions to what is happening are much brighter. In this state there is a moderately manifested anhedonia and a lack of satisfaction.

Subdepressive state or masked depression (indicators of LD from 60 to 69 points) is common for 3.8%. This type of depressive state can manifest itself differently. It can be completely invisible to others. This group of respondents often complains about physical ailments and distinct pains in various parts of their body. The sub-depressive state or masked depression in addition to the physical level can manifest itself at the level of mental disorders in form of panic attacks, obsessions, various phobias and antisocial behavior.

Summary

Thus, 46.1% of pupils susceptible to depressive states were detected during the ascertaining experiment, which indicates the need for preventive work with high-school students. We developed guidelines for teachers and parents on the organization of psychological support and prevention of depression before passing the state Final Examinations.

Psychological support is a process where an adult (teacher, parent) focuses on the positive aspects and advantages of a high-school student in order to strengthen

his/her self-esteem; helps him/her to believe in him-/herself, in his/her abilities; supports him/her in case of failure.

Methodological recommendations on psychological and pedagogical support and psychological support to students can be the following:

For parents. Timely education and organization of classes for parents: "Assistance in preparation for exams", "How to cope with anxiety", which discuss various issues, namely: the individual daily routine, the features of memorization, using relaxation and activation techniques, techniques for reducing exam anxiety. Classes can be conducted in the form of dialogues, lectures, workshops. Familiarization of parents with the ways of proper communication with a teenager, providing him/her with psychological support, creating a favorable psychological climate in the family.

Subject teachers throughout the entire school period must adequately assess knowledge, skills and abilities of their students in accordance with their individual characteristics and capabilities. They should organize a systematic activity for the preparation for the CSE during all years of study of the subject. It is advisable to regularly analyze own difficulties when performing test tasks and identify ways to eliminate them.

Homeroom teacher should try creating an emotional background for the development of the pupil in the conditions of the classroom, namely: exclude negative attitudes in relation to the CSE, conduct joint parent meetings with students, provide psychological and pedagogical assistance during the examinations, conduct individual work with students and close cooperation with subject teachers.

Conclusion

Based on the results of our small study, we can state that high-school students, on the eve of the final state examination, are subject to mild depression. The causes of depression are both physiological and psychological: traumatic, *stressful situations associated with overloads*. Before the CSE, adolescents may experience the following changes: sudden mood swings, sleep and appetite disorder. In this regard, all general education institutions in Russia should provide psychological and pedagogical support to schoolchildren and parents in minimizing stressful situations and serious complications that can lead to disadaptation of the individual.