CHAPTER IV

METHODOLOGY
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4.1. Title of the Research Problem:
A Study on Self concept, Anxiety, Depression, Anger and Suicidal Ideation Among Unemployed Youth of Kolkata City.

4.2. Objectives:
The proposed research as entitled, aims to probe in enquiry areas to verify the following objectives:-

1) To find out whether the presence of unemployment can affect the self concept of the youths.

2) To find out whether unemployment is really responsible for anxiety, anger, depression and suicidal ideation in youths.

3) To find out whether unemployment affect male and female equally or not.

4) To find out whether employment can really prevent suicidal ideation and depression, boost self concept by lowering anxiety and anger.

4.3. Design: The study has two phases. Phase 1: Assessment Phase, and 2: Intervention (Counselling).
Phase 1: In the present study attempt has been made to compare the unemployed youth and employed youth with respect to the variables State Anxiety, Trait Anxiety, Depression, Self Concept, Suicidal Ideation, State Anger and Trait Anger. This was the first phase of the study.

Phase 2: In the second phase a selected group of unemployed youth (both male and female) was subjected to counselling for alleviating their distress.

4.4. Variable of the Study:

a) Dependent Variables:

1) State Anxiety
2) Trait Anxiety
3) Depression
4) Self-Concept
5) Suicidal Ideation
6) State Anger
7) Trait Anger

b) Independent Variables:

1) Two youth groups (Male and Female)
2) Employment Status (Employed youths versus Unemployed youth)

C) Control Variables:

1) Age: 22-27 years
2) Education: Graduate (B.A. B.Sc and B.com.)
3) Marital Status: Unmarried
4) Socio-economic Status: Lower Middle group
5) Religion: Hindu  
6) Language Spoken: Bengali  
7) Location: North, Central and South Kolkata.

4.4.1 Description of the Dependent variables

Variables selected for the study were as follows:

Self Concept:

Allport (1961) has described self concept as ‘something’ which we are immediately aware of. We think of it as the warm, central private region of our life. As such it plays a crucial part in our consciousness in an organism. Thus it is some kind of core in our being. According to Hurlock (1974) the concept of self has three major components: The perceptual, the conceptual and the attitudinal. The components of self concept include physical, psychological and social attributes, which can be influenced by the individual attitudes, habits, beliefs and ideas. The ‘perceptual’ component is similar to physical self-concept which includes the image of one’s appearance, attractiveness and sex-appropriateness of body and the importance of different parts of body. The ‘conceptual’ component is similar to ‘psychological self-concept’ which relates to the origin of the individual, his abilities and disabilities, his social adjustment and traits of personality. The ‘attitudinal’ component refers to attitudes of a person about his present status and future prospects, his feelings about his worthiness, his attitudes of self-esteem, pride and shame. It includes his beliefs, conviction and values also.

Anxiety:

Anxiety is a psychological and physiological state characterized by somatic, emotional, cognitive, and behavioral components. The root meaning of the word anxiety is 'to vex or trouble'; in either the absence or presence of psychological stress, anxiety can create feelings of fear, worry, uneasiness and dread. Anxiety is considered to be a normal reaction to a stressor. It may help a person to deal
with a difficult situation by prompting one to cope with it. When anxiety becomes excessive, it may fall under the classification of an anxiety disorder. The intensity and reasoning behind anxiety determines whether it is considered a normal or abnormal reaction.

Freud defined anxiety as ‘something felt or an unpleasant affect of state or condition.’ Lewis defined anxiety as ‘an emotional state with the subjectively experienced quality of fears or closely related emotion.’

Physical effects of anxiety may include heart palpitations, muscle weakness and tension, fatigue, nausea, chest pain, shortness of breath, stomach aches, or headaches. The body prepares to deal with a threat: blood pressure and heart rate are increased, sweating is increased, blood flow to the major muscle groups is increased, and immune and digestive system functions are inhibited (the fight or flight response). External signs of anxiety may include pale skin, sweating, trembling, and pupillary dilation. Someone who has anxiety might also experience it as a sense of dread or panic. Although panic attacks are not experienced by every person who has anxiety, they are a common symptom. Panic attacks usually come without warning, and although the fear is generally irrational, the perception of danger is very real. A person experiencing a panic attack will often feel as if he or she is about to die or pass out.

Anxiety does not only consist of physical effects; there are many emotional ones as well. They include "feelings of apprehension or dread, trouble concentrating, feeling tense or jumpy, anticipating the worst, irritability, restlessness, watching (and waiting) for signs (and occurrences) of danger, and, feeling like your mind's gone blank" as well as "nightmares/bad dreams, obsessions about sensations, déjà vu, a trapped in your mind feeling, and feeling like everything is scary."

Behavior can be affected in the form of withdrawal from situations where unpleasant effects of anxiety have been experienced in the past. It can also be affected in ways which include changes in sleeping patterns, nail biting and increased motor tension, such as foot tapping.

Empirical evidence of different types of anxiety was derived from the factor analysis concepts, which were studied by Cattell and Schiren. These investigations identified two distinct anxiety factors State anxiety and Trait anxiety.
State Anxiety: Speilberger (1976) defined as reaction consisting of unpleasant consciously perceived feelings of tension and apprehension, with associated activation around of Autonomous Nervous System.

Trait anxiety: It refers to relatively stable individual differences in anxiety proneness i.e. to differentiate among people in disposition or tendency to perceive a wide range of situation as threatening and to respond to these situations with differential elevations in State Anxiety (Speilberger, 1976).

Depression:

Depression is a state of low mood and aversion to activity that can affect a person's thoughts, behavior, feelings and physical well-being. It may include feelings of sadness, anxiety, emptiness, hopelessness, worthlessness, guilt, irritability, or restlessness. Depression is an emotional state of despondency characterized by negative emotional attitudes, a change in the motivation sphere, cognitive impression and generally passive behavior. A person in a state of depression experiences painful emotions: deep sadness (melancholia), anxiety, despair. So, depression is the feelings of sadness, helplessness and hopelessness.

Depressed people may lose interest in activities that once were pleasurable, or suffer cognitive impairments (e.g., difficulty concentrating, remembering details, making decisions). They may contemplate or attempt suicide. Their weight may change dramatically. Insomnia, excessive sleeping, fatigue, loss of energy, aches, pains or digestive problems that are resistant to treatment may be present.
Anger:

Anger is an emotion related to one's psychological interpretation of having been offended, wronged or denied and a tendency to undo that by retaliation. Videbeck describes anger as a normal emotion that involves a strong uncomfortable and emotional response to a perceived provocation. R. Novaco recognized three modalities of anger: cognitive (appraisals), somatic-affective (tension and agitations) and behavioral (withdrawal and antagonism). DeFoore. W 2004 describes anger as a pressure cooker; we can only apply pressure against our anger for a certain amount of time until it explodes. Anger may have physical correlates such as increased heart rate, blood pressure, and levels of adrenaline and noradrenalin. Some view anger as part of the fight or flight brain response to the perceived threat of harm. Anger becomes the predominant feeling behaviorally, cognitively, and physiologically when a person makes the conscious choice to take action to immediately stop the threatening behavior of another outside force.

Modern psychologists view anger as a primary, natural, and mature emotion experienced by virtually all humans at times, and as something that has functional value for survival. Anger can mobilize psychological resources for corrective action. Uncontrolled anger can, however, negatively affect personal or social well-being. Modern psychologists, in contrast to the earlier writers, have also pointed out the possible harmful effects of suppression of anger. Displays of anger can be used as a manipulation strategy for social influence.

Suicidal Ideation:

According to Beck (1977) ‘Suicidal ideation is the compulsory characteristics among the depressive patients.’ According to David Lester (Cambridge Handbook of Psychology, Health and Medicine) ‘Suicide’ refers to a range of self-disruptive behavior ranging from non lethal acts, which have been called suicidal gesture, attempted suicide on more recently self injury in which the person dies.
4.5. Tools Used:

i) General information schedule.

ii) Self-Concept scale developed by Dr. Mukta Rani Rostagi, University of Lucknow,( Adapted Bengali version by Sengupta.S and Nath D.C. (2005), Department of Applied Psychology, Calcutta University).

iii) Beck Depression Inventory( Adapted Bengali version by Basu (1999), Department of Psychology, Calcutta University).

iv) State- Trait Anxiety Inventory developed by Speilberger, Gorsuch and Lushane (1970) [Adapted bengali version by Bhattacharyya, N.K. and Datta, A.(1997), Department of Applied Psychology, University of Calcutta].


4.5.1. Description of the Tools Used:

i) General Information Schedule:

It was prepared by the researcher including the following information –

1) Name of the Subject
2) Sex of the Subject
3) Age of the Subject
4) Residential Address of the Subject
5) Qualification of the Subject
6) Year of pass out
7) Duration of searching for job
8) Marital Status
9) Family Income
10) Religion
11) Language Spoken

1) Self Concept Inventory: Adapted Bengali version of self Concept inventory scale (By Sengupta, S. and Nath, D.C. (2005) developed by Dr. Mukta Rani Rastogi, University of Lucknow was used in the present study. It consists of 51 statement and for each statement 5 responses are given. The range of the total score is 51-255. The higher score indicates higher level of self concept.

2) State- Trait Anxiety Inventory: Adapted Bengali version of State-Trait Anxiety Inventory by Bhattacharyya, N.K. and Datta, A. (1997) originally developed by Spielberger, Gorsuch and Lushane was used in present study. This inventory consists of 40 items of which 20 items are meant for measuring State Anxiety and the rest 20 for measuring Trait Anxiety. It consists of 20 item self report assessment device which includes separate measures of state and trait anxiety. The first subscale measures state anxiety, the second measures trait anxiety. Several items on the STAI were reversed coded (Items 1, 2, 5, 8, 11, 15, 16, 19, 20). The range of scores is 20-80, the higher score indicating greater anxiety.
3) **Beck Depression Inventory**: Adapted Bengali version of Beck Depression Inventory by Basu (1999), Department of Psychology, Calcutta University was used with present study. It contains 21 questions. The highest score for each of the twenty-one questions is three, the highest possible total for the whole test would be sixty-three if the person marked number 3 on all the questions. The lowest score for each question is zero, so the lowest possible score for the test would be zero if the patient marked zero on each question. The higher the score the higher is the level of depression.

4) **State-Trait Anger Expression inventory**: This scale was developed by Speilberger (1988) and adapted in Bengali by Nath, D.C., Department of Applied Psychology, Calcutta University in 1998. Speilberger STAXI (State-Trait Anger Expression Inventory) provides concise measure of the experience and expression of anger. STAXI consists of 44 items that form 6 scales and 2 subscales. State Anger (S-Ang) is a 10- item scale that measures intensity of anger. Trait Anger (T-Ang) is a 10- item scale that measures individual differences in disposition to experience anger has two subscales-Angry Temperament (T-Ang/T) and Angry Reaction (T-Ang/R). Anger- in (AX/In) is an 8- item scale that measures the frequency with which angry feelings are suppressed. Anger-out (AX/OUT) is an 8- item scale that measures how often anger is expressed towards other individuals or objects. Anger control (AX/CON) scale consists of 8- items and measure the frequency with which an individual attempts to control expression of anger. Anger expression (AX/EX) scale based on 24- items of AX/IN; AX/OUT; and AX/CON provide a general index of the frequency with which anger is expressed.

In the present study, the two scales, State Anger and Trait Anger have only been utilized. Each of these two scales consists of 10 items and each item has four alternative answers scored as 1, 2, 3 and 4 respectively depending on the mode of answer given. Total score for each scale is determined by adding all the numbers (answers) for each scale.
5) **Suicidal ideation questionnaire:** Adapted Bengali version of Suicidal ideation questionnaire (Sengupta, S and Nath, D.C. (2005) by William Reholds was used at present study. The SIQ was designed to provide a valid and reliable estimation of the individual's current level of suicidal ideation. Bengali Version of the scale was used in the study. It consists of 37 items. The range of total score is 1-222. The higher score indicates higher level of ideation.

4.6. **Major Research Assumptions (Hypotheses)**

1. Employed youths and unemployed youths will differ with respect to a) state anxiety, b) trait anxiety, c) depression d) self concept, e) suicidal ideation, f) state anger and g) trait anger.

2. Employed male youths and unemployed male youths will differ with respect to a) state anxiety, b) trait anxiety, c) depression d) self concept, e) suicidal ideation, f) state anger and g) trait anger.

3. Employed female youths and unemployed female youths will differ with respect to a) state anxiety, b) trait anxiety, c) depression d) self concept, e) suicidal ideation, f) state anger and g) trait anger.

4. Employed male youths and unemployed female youths will differ with respect to a) state anxiety, b) trait anxiety, c) depression d) self concept, e) suicidal ideation, f) state anger and g) trait anger.

5. Employed female youths and unemployed male youths will differ with respect to a) state anxiety, b) trait anxiety, c) depression d) self concept, e) suicidal ideation, f) state anger and g) trait anger.
6. Unemployed male youths and unemployed female youths will differ with respect to a) state anxiety, b) trait anxiety, c) depression d) self concept, e) suicidal ideation, f) state anger and g) trait anger.

4.7 Selection of the Sample:

**Experimental Group:**

Having information from the Employment Exchange, 540 unemployed youth in total were selected from the three zones of Kolkata (North, Central and South) by purposive sampling technique. From each zone 180 youths were selected of which 90 were male and 90 female.

While selecting individual the following criteria of the individuals were taken into consideration:

a) Age: Between 22-27 years

b) Educational Qualification: Having Bachelor’s degree in any discipline of general stream (i.e. B.A., B.sc, B.com.,)

c) Period of Unemployment: At least 5 years from the date of publication of results.

d) Residence: All residents of Kolkata City (North, Central and South Zones of Kolkata City).
e) Religion: Hindu.

f) Marital-Status: Unmarried.

g) Socio-economic Status: Lower-Middle Class

h) Language Spoken: Bengali

Control Group:

180 employed youths (90 Male and 90 Female) having 5 years' continuous service matched with the experimental group in age, sex, academic qualification, marital status, religion, language spoken and socio-economic status were selected from each zone of Kolkata city. Thus from three zones 540 employed youths were selected.

Sampling Technique: Selection of unemployed youths and employed youths were made through purposive sampling technique.

All unemployed youths were selected from different zones of Kolkata City (North, Central and South) who had been unemployed for at least 5 years from publication of their results and actively seeking for paying jobs. But those unemployed youths who were not actively searching for paying jobs for less than 5 years or who were self-employed were not included in the sample for study.

Sample Size: 540 (Unemployed Youths) + 540 (Employed Youths) = 1080.
4.8. Collection of Data, Scoring and Analysis: For phase I data were collected from the subjects through individual administration of the tools at their convenient time and place, scoring being done according to scoring keys of the respective tools. Data were analyzed through appropriate statistical calculations [Descriptive Statistics (Mean & SD) and Inferential Statistics (F-test, t-test, & Correlation (Product moment Coefficient of Correlation)].

4.9. Interventions through Counselling: For Phase II the following procedure was adopted: 10 unemployed male youths and 10 unemployed female youths were selected randomly from the groups under study and they were subjected to counselling.

10 unemployed male youths were divided into two groups, each consisting of 5 male unemployed youths. Each of these two groups was subjected to counselling for 10 consecutive counselling sessions. (Each session of 1 hour duration).

The same treatment was done for the female unemployed youths also.

Efficacy of counselling if any was determined through suitable statistical analysis (Sign Test) of pre-counselling and post counselling (State Anxiety, Depression, State Anger and Suicidal Ideation) scores of the youths.