SUMMARY

Depression is obviously a cover term for several different kinds of things. It is also the most widespread psychological disorder. It is the common cold of mental illness and is on the rise throughout the world. Depression is that feeling state which seems to be found in almost all societies. People born after 1960 are 10 times more prone to become depressed than their grandparents. There are two kinds of depressive disorders as (I) Unipolar depression - manifests when the patient suffers from depression symptoms without ever experiencing mania. (II) Bipolar depression - when both depressive and manic symptoms occur. The Diagnostic Statistical Manual (DSM) lists depression in three major diagnostic categories as (I) Major affective disorders - Under this category manic depressive illness and involutional melancholia are listed. (II) Neurotic versus Psychotic depression - Psychotic depressive have more severe symptoms than the Neurotic depressive. (III) Endogenous versus Exogenous depression - Extreme unhappiness may be regarded as either endogenous, that is internally caused or exogenous, that is externally caused. According to DSM III- depression is classified as Episodic and chronic depression. Episodic depression is much more common, is of less than two years duration. Chronic depression - individual has been depressed for at least two solid years without having had a remission to
normality of at least two months in duration. There are mainly four sets of symptoms in Unipolar depression (a) Mood and Emotional symptoms - sad, blue, miserable, helpless, hopeless, lonely, unhappy etc. (b) Thought or cognitive symptoms - A depressed person has a very poor self image and think of himself in a very negative light and have more negative beliefs about themselves. The depressed person produces "Cognitive/thought distortions " which starts negatively affecting the serotonin/ norepinephrine neurotransmitters in the brain (C) Motivational symptoms -depressed individual have great difficulty in getting started. Difficulty in making decisions also seems to be a common symptom of depression.(d) Physical Symptoms -as depression worriness, every biological and psychological joy that make life worth living is eroded, loss of appetite, weight loss and sleep disturbance also occurs.

There are main four models of depression which explain depression differently. I. Biological Model - According to biological model, depression is a disorder of the body or could be caused by a problem in any bodily organ - the liver, the blood, the stomach- specially had centered almost entirely on the brain. II The Psycho-dynamic model - it has stressed three causes of depression as -anger turned against the self, excessive dependence on others for self esteem and helplessness at achieving ones goals. III cognitive models -
First Cognitive model was developed by Beck (1974) and it views depression as caused by negative thoughts about the self, about ongoing experience and about the future. The second cognitive model was developed by Seligman (1976) and it views depression as caused by the expectation of future helplessness. IV The Behavioural models of Depression — all behavioural models of depression concentrate on the most obvious behavioural symptoms of depression; the reduction in active behaviour, which we called the motivational deficit. These models explain the reduction in active responding as a deficiency in general depression. Factors leading to depression may be divided into those that predispose to depression over a long period and those that are immediate precipitants. It is very difficult to list all those possible factors and their influences in a single investigation. Sociological factors which attract the investigators are as — sex, social class, parental loss, socio-economic status and environmental factors. It seems that a supportive environment protects against a wide variety of stressors. There are many variables which affect general depression, but sex variable influence depression level of subjects in a distinctive manner. A number of research studies pertaining sex differences in depression indicate that women seem to be rather more vulnerable to depression than men. But there is no strong or consistent differences in the incidence of
depression according to race or social class. The present study also aim to study the level of general depression among college students. The problem of the study was stated as "Study of general depression among college students in relation to their sex, caste and socio-economic status". It was hypothesised that:

1. Female subjects would show high general depression than male subjects.

2. Low caste subjects would show high general depression than high caste subjects.

3. Subjects with low socio-economic status would show high general depression than the subjects with high socio-economic status.

4. There would be a significant interactive effect of sex, caste and socio-economic status on general depression.

In order to test the above hypotheses, the present study was conducted into two phases. The investigator in the first phase administered socio-economic status scale (Kulshrestha 1964), to the students of B.A.II and B.A.III classes of various colleges of Rohtak city. The students were divided into small batches of 20 to 25 students and each batch was handled separately. Socio-economic status score of these
students was worked out and they were divided into different categories according to the instructions given in norms table. Students with high and low SES were selected for 2nd phase data collection. The final selection of the subjects was done on the basis of their sex, caste and socio-economic status. The investigator adopted 2x2x2 factorial design and classified the students in the following eight groups -

G-I (M + HC + HSES)  
G-II (F + HC + HSES)  
G-III (M + HC + LSES)  
G-IV (F + HC + LSES)  
G-V (M + LC + HSES)  
G-VI (F + LC + HSES)  
G-VII (M + LC + LSES)  
G-VIII (F + LC + LSES).

Each group consisted of 15 subjects. These 120 subjects were administered depression scale of Karim and Tiwari (1986). During testing period (either SES scale or depression scale) the investigator was quite vigilant and attentive so that the respondents can fill up the scale with honesty. Subjects depression score were calculated and these were put for statistical analysis. In order to check the mean differences statistically, three way analysis of variance was used. From the results indicated that different groups are showing different depression levels. Females are showing significantly greater depression in comparison to their male counter parts. Subjects belonging to low caste are expressing more general depression than the high caste subjects. Similarly, subjects with low socio-economic status are experiencing significantly more general depression in comparison to the subjects with high socio-economic status.
Therefore, first three hypotheses of the study are verified but the last hypothesis which predicted about the significant interaction of sex, caste, and SES variables is approved partially. As only interaction which has come significant is sex x SES. However, the mean general depression score of Group VIII (Female + Low caste + Low socio-economic status) is highest and of Group-I (Male + High caste + High socio-economic status) is lowest.