

Study of Self Concept as Predictor of Anxiety among Adolescents

SEEMA RANI

Assistant Professor
Rufaida College of Nursing
Jamia Hamdard-110062

Abstract

Objectives: To find out the self concept & anxiety levels of adolescents and seek the relationship between anxiety & self concept levels.

Methodology: The study was conducted in Poonam Nagar, Mumbai in the year 2009. Subjects included 150 adolescents, both boys and girls in the age group of 13 -18 years selected by convenient sampling. Data collection instruments included Dr. N.K. Dutta Self Concept Scale and Sinha Anxiety Scale. Descriptive and inferential statistics were employed for analysis of data.

Results: Obtained self concept scores ranged from 215 - 379 with a mean score 287.60 and standards deviation 21.02. Anxiety scores ranged from 11-86 with a mean of 35.98 and standard deviation 18.38. Co-efficient of correlation (r) between self concept and anxiety score was .82. Mean anxiety score for high self concept adolescents was more than low self concept ones. t-value of 9.53 at 0.05 levels was found to be statistically significant.

Conclusions: There is need of saving the 22% of future citizens of Indians i.e. adolescents from undue stress and anxiety. Schools and hospitals should be adequately equipped with guidance and counseling.

Keywords: Anxiety; Self concept; Stress; Adolescent.

Introduction

Adolescence is one of life's fascinating and perhaps most complex stages, a time when young people take on new responsibilities and experiment with independence. They search for identity, learn to apply values acquired in early childhood and develop skills that will help them become caring and responsible adults.

Every adolescent has an opinion about his own self. This opinion of him regarding his own worth, as a person i.e. "who he is", may color much of his thinking and his personality. A confident and positive self concept may strengthen the ability of the individual to deal with the life problem in an effective and efficient way¹.

Self concept is defined in terms of self-as-object. It is an important aspect of personality and that individual differences along this dimension are as meaningful as difference in attitudes, motives and abilities.

In the development of self concept, children often build up two distinct concepts. First self concept comes from external experiences and contacts with others. The child has specific concepts relating to his body, his appearances and how he compares his abilities of different types with the children, with whom he

Corresponding author: Seema Rani, Assistant Professor, Rufaida College of Nursing, Jamia Hamdard-110062.

E-mail: Seema9rani@yahoo.co.in.

associates. This type of concept is formed first because the child's earlier experiences which are objective. It is known as objective concept. Another type of self is based on his own thoughts, feelings and emotional experience. It is known as subjective concept².

Anxiety is the physical state producing tension and arousal which accompanies more specific physical motive components. Anxiety is a consequence of conflict. Quite often anxiety reactions are displayed tendencies in pathological developmental trends within the personality of the individual which leads to misvaluation of environmental problems to severe conflicts and to inefficient personal and social adjustment.

Freud views anxiety as consciously felt unpleasant experience different from pain. So far as it has physiological concomitants and it discharges itself through definite pathways in a response to a situation of danger³.

The present articles will place emphasis upon studies investigated into the correlation between anxiety and self concept. The investigator found that not much of the work in the field has been done in India. But it has also been observed that some allied studies have already been undertaken in foreign countries during the last 25 or 30 years. In India the value and importance of self concept has not been disseminated to the professionals working in the field of health so far.

In the present study, the investigator has chosen adolescents in the age group of 13-18 years because this period of life is sensitive as it is brought with changes, difficulties and special problems. Hence this study was contemplated to assess the self concept as a predictor of anxiety among adolescents. Objectives of the study were to assess the self concept and anxiety levels of adolescents. Study aimed to seek the relationship between anxiety and self concept levels of adolescents. Study also found the difference in the anxiety level of adolescents belonging to low and high self concept level⁴.

Methods and Materials

The research approach to the study was quantitative survey. The study was conducted in the homes of adolescence living in Poonam Nagar, and urban colony in Mumbai during the period from July 25 to October 25, 2009. This locality houses largely local Marathi population and few migrant families who came to metropolitan city in search of job and finally settled over for more than 20 years. The population of the study comprised of adolescents while the sample consisted of 150 adolescents, both boys and girls, in the age group of 13 - 18 years, living in Poonam Nagar, Mumbai. To collect the data, convenient sampling technique was used.

Data collection instruments were

1. *Dr. N.K Dutta Self Concept Scale:* There are 104 items in the scale. The five point rating scale was used to assess the perceived self. Scoring scheme for the scale ranged from 'seldom' - (1), 'sometimes' (2), 'usually' - (3), 'almost always' - (4) and 'always' - (5).
2. *Sinha Anxiety Scale:* There are 100 items in the scale, which are descriptive statements of various situations. Against each statement, subjects were to write 'true' or 'false'. Score of the 'Anxiety Scale' was regarded as a good estimate of individuals' manifest anxiety. Each true was regarded as 1 and false as 0. Low score i.e. below 25th percentile was regarded as indicative of poor motivation, sluggishness and low anxiety level. Very high score i.e. above 75th percentile was considered as symptomatic of high state of anxiety. The middle range score were regarded as subjects with moderately good drive level to stimulate performance.

Both the scales included personal profile of adolescents such as name, age and sex, name of the school/college in which studying, family income, marital status, and family occupation.

After 1 week of administering Dr. N.K Dutta Self Concept Scale, Sinha Anxiety Scale was administered to all 150 subjects. Confidentiality of the information provided by the subjects was maintained.

Descriptive and inferential statistics were employed for statistical analysis. Mean, Standard deviation, Co-efficient correlation and t-value were calculated. A probability value of < 0.05 was considered statistically significant.

Results

The findings of the study have been given below:

Self Concept and anxiety scores indicate and a wide dispersion of self concept and anxiety among adolescents (table 1).

Table 1: Range, Mean and Standard Deviation of Self Concept and Anxiety Scores of Adolescents

n = 150

Variable	Possible Range of Scores	Obtained Range of Scores	Mean	Standard Deviation
Self Concept Score	104 - 520	215 - 379	287.60	21.02
Anxiety Score	0 - 100	11 - 86	35.98	18.38

Table 2: Co-efficient of Correlation (r) between Self Concept and Anxiety Scores of Adolescents

n = 150

Variable	Mean	S.D.	R
Self Concept Score	287.60	21.02	.82
Anxiety Score	35.98	18.38	

For d (f) 148 at .05 level

Table 3: Comparison of Anxiety between high & low self concept level adolescents

n = 150

Group	Mean Anxiety Score	S.D.	t - value
High Self Concept	52.44	9.08	9.53
Low Self Concept	15.28	6.56	

For d (f) 148 at .05 level

To determine the relationship between the self concept and anxiety scores, co-efficient of correlation was computed by 'Pearson Product Moment'. The same findings are presented in Table 2.

The computed 'r' value of .82 (table 2) indicates a highly positive significant correlation between self concept and anxiety of adolescents. The result is in accordance with hypothesis formulated for the present study i.e. there will be positive correlation between self concept and anxiety of adolescents.

In order to study and compare the level of anxiety between low self concept and high self concept level adolescents, mean, standard deviation & 't' value were computed. The results of the same are presented in table 3.

In high self concept category, there were 35 subjects i.e. those scoring 308.62 and above (Mean + 1S.D.). In low self concept category, there were twenty eight subjects, i.e. those scoring 266.62 and below (mean -1S.D.).

The above result shows that the mean anxiety score for high self concept adolescents is more than low self concept adolescents. The obtained difference was found to be statistically significant as evident from 't' value of 9.53 at .05 level. This is in accordance with the hypothesis no. 2 formulated for the present study i.e. there will be statistically significant differences in the anxiety level of adolescents belonging to the low and high self concept groups.

The results not only support the hypotheses formulated but are also in accordance with the various studies carried out in this field.

Conclusion

The present study has revealed that anxiety and self concept levels are wide ranged among adolescents in Poonam Nagar, Bombay. Obtained anxiety score range is 11-86 and self concept score range is 215-379. This may be attributed to adolescents' transition from childhood to adulthood. They grow physically, sexually and cognitively as well. They create

their concepts of themselves, form and protect their self esteem and identity. High levels of stress and anxiety are related to their self concepts⁵.

Kureshi, Afzal Husain (1979) administered a self concept Q-Sort Task and Taylor Manifest Anxiety Scale to 100 under-graduate students. They found 0.84 correlation coefficient between self concept and anxiety. Results confirmed the hypothesis that self concept and anxiety are highly interrelated⁶.

In the present study it is found that correlation between self concept and anxiety is .82 which means that self concept and anxiety are highly positively correlated to each other. Thus the result of this study is in accordance with the results of the other studies done in the area.

The present study also aimed at finding the difference in anxiety level of adolescents categorized into high self concept and low self concept groups. Findings revealed that anxiety is significantly high among the adolescents belonging to the high self concept as compared to the low self concept group (t - value being 9.53).

Today's world is the world of stress and anxiety. With the increase in specialization and competition in the modern era, the phenomena of anxiety caused by day to day problems have crept into the life of every human being including those of adolescents. Social threats, high expectations of parents and teachers, fear of being left out of the group, increased awareness, exposure to mass - media, stress of changes going on within their own bodies, abstract thinking capacity makes the adolescents worst hit. According to Perkins, 2001, there are four basic abstract questions that adolescents begin to ask themselves. They are

- Who am I? (Pertaining to his/her sexuality and social roles)
- Am I normal? (Do I fit with a certain crowd?)
- Am I competent? (Am I good at something that is valued by peers and parents?)

- Am I lovable & loving? (Can someone besides my parents love me?)

Adolescents start answering to these questions to themselves i.e. forming self concept and in this process anxiety creeps into them. They face demands and expectations, as well as risks and temptations, that appear to be more numerous and complex than those adolescents faced only a generation ago (Feldman & Elliot, 1990; Hamburg, 1993). They do not remain unaffected by constant tension and worry about future, career and trying to keep up to the expectations of the family.

The above discussion shows that the results obtained in the present study are in accordance with the hypotheses formulated and are also supported by research work carried out in this field. Adolescents forming about 22% of entire population of India and future citizens of nation should be saved from undue stress & anxiety⁷. Their problem and environment stressors should be reduced to minimum. With parents and teachers, it becomes an utmost duty of health care personnel & administrators to address to their issues and help inculcate in them the healthful coping strategies to face the reality of life. This will directly reduce the physical, mental and psychosomatic illnesses including suicide rate among adolescents. Health care administrators must ensure adequately equipped guidance and counseling centers in schools & hospitals. Also they should conduct frequent sessions for counseling the parents.

References

1. Hurlock EE. Child development Mc Grow Hill Book Company Inc., (1956) P.366-403.
2. McDonald. Investigation into self concept. June (1954).
3. Freud S. The problem of anxiety. New York: Psychoanalytic quarterly press & Norton; 1936.
4. Meithnger H. Hypothesis about the origins of anxiety. *Comprehensive psychiatry*. 1979; 32(4): 60-64.

5. Bond A., Lader M. Self concepts in anxiety states. *British Journal of Medical Psychology*. 1976; 49 (3): 275-279.
 6. Kureshi A, Husain A. Anxiety and self concept, A study of interrelationship. *India Journal of clinical psychology*. 1979; 6(2): 199-200.
 7. Kishore J. National Health Program of India, National Policies and Legislations Related to Health. New Delhi: Century Publication; 2009, 176-178.
-

Red Flower Publication Pvt. Ltd,

CAPTURE YOUR MARKET

For advertising in this journal

Please contact:

International print and online display advertising sales

E-mail: redflowerppl@vsnl.net / tel: +91 11 22754205

Recruitment and Classified Advertising

E-mail: redflowerppl@vsnl.net / tel: +91 11 22754205