

ORIGINAL ARTICLE

Assessment of psychosocial functioning using DASS among adults

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ABSTRACT:

Background: Depression and anxiety are recognized as common, serious disorders and debilitating mental health problems in the changing social context and are afflicting adolescents and student population to a large extent. The present study was conducted to assess psychosocial functioning using DASS among adults. **Materials & Methods:** 165 subjects of both genders were administered demographic questionnaire and psychometric scales such as DASS-21 and strengths and difficulties questionnaire. **Results:** Out of 165 subjects, males were 90 and females were 75. 34 had no depression, 60 had mild depression, 46 had moderate depression and 25 had severe depression. The difference was significant ($P < 0.05$). Common clinical features were sadness seen among 112, loss of pleasure in 68, self-dislike in 72, agitation in 56, crying in 42, anorexia in 126, irritability in 145 and fatigability in 65. The difference was significant ($P < 0.05$). **Conclusion:** Results of the study revealed that most of the adults had mild stress.

Key words: anxiety, depression, stress

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INTRODUCTION

Depression and anxiety are recognized as common, serious disorders and debilitating mental health problems in the changing social context and are afflicting adolescents and student population to a large extent.¹ Lifetime prevalence increases drastically from 1% of the population under age 12 years to 17–25% of the population by the end of adolescence, with an increase in cases in age-group of 15–18 years.²

The diagnostic and statistical manual of mental disorders, fifth edition has defined symptoms for depression; this includes depressed moods, psychomotor agitation or retardation, diminished interest or pleasure, insomnia, fatigue or loss of energy, diminished ability to concentrate, significant weight loss, feelings of worthlessness or excessive guilt, and recurrent thoughts of death.³ Individuals exhibiting five or more of those symptoms meet the criteria for major depressive disorders.⁴

Depression, Anxiety, and Stress Scale 21 has a stable and clear factor structure which is established by either analyzing items obtained from participants' ratings of DASS21 or examining factor structure

from direct ratings of DASS-21. One of the instruments employed widely to measure psychosocial functioning is Strengths and Difficulties Questionnaire (SDQ).⁵ The scale measures five distinct domains of psychosocial adjustment among adolescents namely: Hyperactivity/inattention, emotional symptoms, conduct problems, peer problems, and pro-social behavior. SDQ's subscales are found to be (a) conceptually meaningful, (b) consistent with current knowledge of comorbidity, and (c) indicative of distinct constructs.⁶ The present study was conducted to assess psychosocial functioning using DASS among adults.

MATERIALS & METHODS

The present study comprised of 165 subjects of both genders. The consent was obtained from all enrolled patients.

Data such as name, age, gender etc. was recorded. All were administered demographic questionnaire and psychometric scales such as DASS-21 and strengths and difficulties questionnaire. Data thus obtained were subjected to statistical analysis. P value < 0.05 was considered significant.

RESULTS

Table I Distribution of patients

Total- 165		
Gender	Males	Females
Number	90	75

Table I shows that out of 165 subjects, males were 90 and females were 75.

Table II Assessment of DASS among subjects

DASS	Percentage	P value
No depression	34	0.05
Mild depression	60	
Moderate depression	46	
Severe depression	25	

Table II, graph I shows that 34 had no depression, 60 had mild depression, 46 had moderate depression and 25 had severe depression. The difference was significant ($P < 0.05$).

Graph I Assessment of DASS among subjects

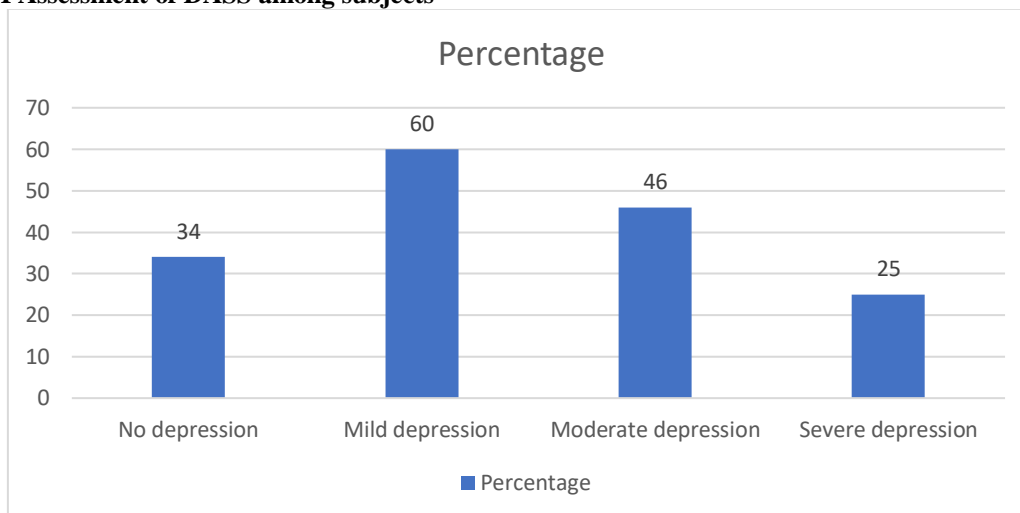
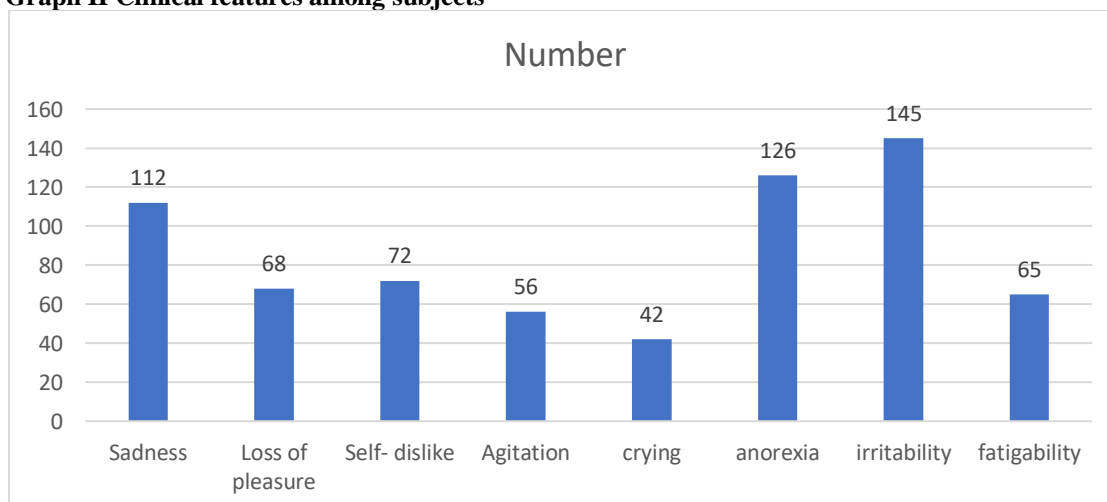


Table III Clinical features among subjects

Clinical features	Number	P value
Sadness	112	0.04
Loss of pleasure	68	
Self- dislike	72	
Agitation	56	
crying	42	
anorexia	126	
irritability	145	
fatigability	65	

Table III, graph II shows that common clinical features were sadness seen among 112, loss of pleasure in 68, self- dislike in 72, agitation in 56, crying in 42, anorexia in 126, irritability in 145 and fatigability in 65. The difference was significant ($P < 0.05$).

Graph II Clinical features among subjects



DISCUSSION

Strengths and Difficulties Questionnaire (SDQ) measures five distinct domains of psychosocial adjustment among adolescents namely:⁷ Hyperactivity/inattention, emotional symptoms, conduct problems, peer problems, and pro-social behavior. SDQ's subscales are found to be (a) conceptually meaningful, (b) consistent with current knowledge of comorbidity, and (c) indicative of distinct constructs.⁸ However, low consistency coefficients have been observed for the self-report format especially for conduct problems and peer problems sub-scale.^{9,10} The low internal consistency values may be due to (i) less items in each SDQ subscale, (ii) possibility that these subscales measure heterogeneous content than intended and (iii) due to several positively worded reverse-scored items in the conduct problems and peer problems subscales. However, the exploratory factor analysis (EFA) and CFA are established in different languages.^{11,12} The present study was conducted to assess psychosocial functioning using DASS among adults.

We found that out of 165 subjects, males were 90 and females were 75. Singh et al¹³ examined the psychometric properties of the DASS and SDQ on Indian adolescents, explored the role of socio-demographic variables and examined if there was any difference between school going and school dropouts. Data from 1812 students, aged 12-19 years was collected with mean age = 15.67 years. The participants were administered a booklet containing demographic questionnaire and psychometric scales such as DASS-21 and strengths and difficulties questionnaire. The results of validation indicated that English and Hindi version of 3 factor model of DASS and 2 factor model of SDQ was an acceptable model fit. It was noted that early adolescents were high on prosocial behaviour whereas late adolescents were high on difficulties score. Females were higher than males on prosocial behaviour. Adolescents residing in rural areas differed from their urban counterparts on prosocial behaviour and anxiety. Government school going adolescents differed from private school going adolescents on prosocial behaviour, stress and anxiety. Negative perception of relationship with family affected adolescents difficulties score, depression and stress. Similarly, negative perception of self-concept leads to higher difficulties score and lower prosocial behaviour score. The school going adolescents differed from non-school going adolescents on stress, depression and anxiety.

We found that 34 had no depression, 60 had mild depression, 46 had moderate depression and 25 had severe depression. The common clinical features were sadness seen among 112, loss of pleasure in 68, self-dislike in 72, agitation in 56, crying in 42, anorexia in 126, irritability in 145 and fatigability in 65. Silverstein et al¹⁴ tested the hypothesis that female subjects may exhibit a higher prevalence than male subjects of depression associated with somatic

symptoms but not a higher prevalence of depression not associated with these other symptoms. The author re-analyzed research interview data on major depression from the National Comorbidity Survey, dividing respondents into those who met overall criteria for major depression and exhibited fatigue and appetite and sleep disturbance ("somatic depression") and those who met overall criteria but did not exhibit these somatic criteria ("pure depression"). Female subjects exhibited a higher prevalence than male subjects of somatic depression but not a higher prevalence of pure depression. Somatic depression was associated with a high prevalence of anxiety disorder and, among female subjects, with body aches and onset of depression during early adolescence. Bhasin et al¹⁵ reported a higher prevalence of depression in 10th and 12th division students due to the pressure of academic performance in the board examinations.

CONCLUSION

Authors found that results of the study revealed that most of the adults had mild stress.

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