

Correlates Among Self-concept, Anxiety, Depression, Anger, and Disruptive Behavior in Vulnerable Middle School Youth

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Faculty Disclosure

Faculty Name:Jacqueline Hoying, PhD, RN,
NEA –BCConflicts of Interest:NoneEmployer:The Ohio State UniversitySponsorship:Sigma Theta Tau Epsilon
Chapter



Goals and Objectives

- Session Goal:
 - Discuss the correlations of the variables in two vulnerable middle school age populations
- Session Objectives:
 - Discuss relationships among study variables including self-concept, anxiety, depression, anger, and disruptive behavior between Urban and Appalachian middle school youth

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Discuss implications for clinical and future research

Middle schools from two vulnerable environments







Vulnerable Adolescents Viewed Differently



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Two sub-cultures with different stressors

URBAN

RURAL APPALACHIA

- Increased exposure to violence
- Neighborhood chaos
- Urban school districts

- Rural residence
- Unique culture
 environment



Similarities in Adverse Health Outcomes: Overweight/Obesity and Mental Health

 Mytog

 Mytog

 Occurrence is higher in minority youth from lower socioeconomic
 status families



Overweight/Obesity in Adolescents



- Childhood obesity is associated with a 70% increased prevalence of adult obesity
- 61% increased risk factors for coronary artery disease
- 26% increased risk of having two or more risk factors and premature death
- U.S. overall rate 34.2%
- African American youth 39.5%
- Appalachian youth 38%



Mental Health Concerns in Adolescents



 Significant association exists between adolescent obesity and depression

Mental Health Disorders

- U.S. overall rate 17%
- Low-income youth 21%
- 1 in 4 adolescents experience mental health issue



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Adaptive vs Maladaptive Coping

Understanding the differences and similarities in the baseline variables can assist in guiding interventions

Anxiety Depression Self-concept Anger Disruptive behavior



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Anxiety in Adolescents



- Youth with anxiety and depression symptoms experience impairment in academic, social, family, and personal health accompanied by increased risk for adult anxiety and depressive disorders, and substance abuse issues
- Anxiety disorders are the most common mental health disorder
- Adolescents worry about social competence, health issues, and school performance



Depression in Adolescents



- Suicide remains the third leading cause of death among 12- to 17-year-olds
- Suicide rates for African American youth (5-11 yrs.) are significantly higher (and have increased for the first time) compared to a decrease in Caucasian peers

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Self-Concept in Adolescents



Developmentally,
 adolescents' become
 increasingly self-conscious
 and have heightened
 awareness of how they
 are perceived by others

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- An indispensable element of mental health is the positive regard one has for self
- Self-esteem is an individual's collection of thoughts and feelings about their own worth and importance

Anger in Adolescents



- Although anger is a common and natural emotion, or internal event, problems associated with the inappropriate expression of anger remain among the most serious concerns of parents, educators, and the mental health community
- Anger, frustration, and violence in minority adolescents (particularly males) is often mistaken for behavior problems and depression



Disruptive Behavior in Adolescents



- Disruptive Behavior defined broadly as noncompliance, aggression, disruptive classroom behavior, or delinquent behavior as the primary disorder
 - Anger/disruptive behavior in combination with school experiences of overt or covert discrimination and prejudice, may increase depressive symptomatology among minority students increasing mental vulnerability, academic performance issues, and/or high-risk behaviors

Methods

- A descriptive correlation design was used for this study
- Students from two middle schools in the Midwest were recruited to participate



Baseline Characteristics

	URBAN	APPALACHIAN
Age	11.54 (.62)	13.6 (.56)
Gender		
Male	11 (36%)	14 (48%)
Female	20 (65%)	15 (52%)
Ethnicity		
African American	18 (58%)	0
Hispanic	9 (29%)	0
Caucasian	4 (13%)	29 (100%)
Public Assistance		
Yes	15 (75%)	14 (48%)
No	5 (25%)	15 (52%)
I don't know	11	
Weight		
Healthy Weight	27 (87%)	15 (52%)
Overweight	3 (10%)	5 (17%)
Obese	1 (3%)	9 (31%)

Appalachian Baseline Correlations

	Anxiety	Depression	Self-concept	Anger	Disruptive Behavior
Anxiety	1	.566**	164	.549**	.704**
Depression	.566**	1	666**	.903**	.272**
Self-concept	164	666**	1	644**	.013
Anger	.549**	.903**	664**	1	.228**
Disruptive Behavior	.704**	.272**	.013	.228**	1

****** Correlation is significant at the 0.01 level



Urban Baseline Correlations

	Anxiety	Depression	Self-concept	Anger	Disruptive Behavior
Anxiety	1	674**	485**	.681**	.346**
Depression	.674**	1	775**	.761**	.598**
Self-concept	485**	775**	1	713**	644**
Anger	.681**	.761**	713**	1	.811**
Disruptive Behavior	.346**	.598**	644**	.811**	1

** Correlation is significant at the 0.01 level



Results

- Correlations were examined at baseline among the study variables for each set of participants
- Negative and significant correlations (p=.01) existed between the participants' self-concept and depression and self-concept and anger. As the students' selfconcept decreased, their depressive symptoms and anger increased for both groups
- Additionally, self-concept and anxiety, and selfconcept and disruptive behavior were negatively correlated with the urban population. As their selfconcept decreased their anxiety and disruptive behavior increased

Results

- Additionally, positive and significant correlations (p=.01) existed between depression and anxiety, depression and anger, and depression and disruptive behavior. This suggested that as the students' depressive symptoms increased so did the students' anxiety, anger, and disruptive behavior
- Furthermore, positive and significant correlations existed between anxiety and anger, and anxiety and disruptive behavior. As the students' anxiety increased so did their anger and disruptive behavior



Results

- Finally, positive and significant correlations (p=.01) existed between anger and disruptive behavior. Suggesting that as the students' anger increased so too did their disruptive behavior
- These positive and significant correlations were found in the urban and rural student groups for the same variables



Conclusions

- The middle school years are often stressful for students, specifically for youth who are from underserved areas and subject to health disparities
- Understanding similarities in baseline correlations among students who are similar can guide behavior interventions to improve healthy lifestyle choices and healthy lifestyle behaviors in middle schoolers



Conclusions

 Of particular significance is understanding the importance of the findings surrounding self-concept and realizing that positive selfconcept can serve as a protective factor to support positive behavioral outcomes when guiding behavior interventions (i.e. cognitive behavioral skills building)



Future Implications

- Important to this particular age group are depression and anxiety screening, along with reducing current obesity trends
- This study underlines the similarities in vulnerable youth populations which appear dissimilar and supports the promising potential to improve mental health outcomes (e.g., anxiety, depression, and suicidal ideation), improved self-concept and decreased maladaptive coping for anger and disruptive behavior through behavior interventions for youth in real-world school settings

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