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The Relationship between Loneliness and Depression in Children of Divorce

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ABSTRACT

Objective: The present study aims to investigate the relationship between loneliness and depression in children of divorce. In methodological terms, the study is conducted in the form of a cross-sectional, descriptive and analytical research project. The statistical population of the study includes all the children of divorce living in Kermanshah province, Iran, in 2014. Convenient sampling procedures were conducted for the selection of the sample population. The statistical sample of this study consists of 100 children of divorce living in Kermanshah province. For data collection, we used the Beck Depression Inventory and the UCLA Loneliness Scale. Data were analyzed using statistical methods and by recourse to such indices as frequency, mean value, standard deviation and the Pearson product-moment correlation coefficient. The results of the study suggest that there is no significant relationship between age and depression. Similarly, there is no significant relationship between age and loneliness is associated with increased rates of depression in children of divorce.

KEYWORDS: depression, loneliness, children of divorce.

1. INTRODUCTION

Depression is a relatively common disease among different human populations. Although the development of human life and man's ability to make more use of natural resources through industries have provided more comfort for the modern society compared with the conditions of older communities, due to the complexity of human relationships and industrial developments, mental disorders such as depression have become more prevalent in this century such that they are one of the main issues of the postmodern era [1]. One of the likely psychological mechanisms that affect depression is the experience of feeling lonely. Experimental results have shown that adolescents experience loneliness more than adults do [2]. Depression is a common disorder among adolescents and young people which can interfere with social skills and personality development. In other words, depression is a mood disorder which causes varying degrees of sadness and, simultaneously with mood alteration, is associated with changes in the behavior, perceptions, attitudes, and physiological performance of the afflicted person. Mental health professionals believe that depression expands rapidly when changes occur in the social conditions and values of an individual. There appears to be no relationship between depression, social class, level of education, race, income, and marital status. The risk of major depressive disorder in community samples varies from 10 to 25 percent in women and from 5 to 12 percent in men [3]. Loneliness is a common thing: all individuals experience loneliness in the course of their lives regardless of gender, age, ability, race, religion, and socio-economic status. This feeling may occur at different occasions including the loss of an intimate relationship, entering college, traveling to a strange country, and entering a new school or workplace. It does not necessitate physical isolation: A taciturn person may live in a remote location and feel really well [4]. Loneliness is a complex psychological construct that has been a matter of discussion since the early philosophers. In ancient times, loneliness was considered in a positive sense and meant the voluntarily withdrawal of an individual from involvement in daily life to achieve higher objectives (such as meditation, prayer and relationship with God). In contrast, modern psychological discourse considers loneliness as a condition in which the patient experiences a lack of sympathy or relationship with others. This can include cases such as feeling low, lack or loss of companionship, unpleasant and negative aspects of a lost relationship, and loss of quality in relationships with others [5]. Gutman considers loneliness as equal to social isolation. Peplau and Perlman define loneliness in terms of the difference or gap between the desired level and the actual level of social relations with regard to qualitative and quantitative dimensions. They argue that loneliness is the gap between the aspirations of the individual (what he/she wants) and his/her achievements (what is gained) in intimate interpersonal relationships. With a wider gap, the sense of loneliness increases. However, Wase (1973)

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distinguishes between loneliness caused by social isolation and loneliness caused by emotional isolation. Emotional loneliness is marked by lack of emotional attachment to one or more persons whereas social isolation is characterized by lack of involvement in social relationships and networks. Several factors contribute to the development of depression and loneliness, one of them being parental divorce. The family is the smallest, perhaps even the most important, social institution which is constitutive of future generations and communities and is the medium of culture between the past, the present and the future. Presence of the parents in the family provides an environment full of affection for children. If the family environment is characterized by mutual understanding and cooperation - where relations are built not on an arbitrary or unconditional basis but on freedom, logic, rationality and mutual respect - it can play an important role in the mental and behavioral health of adolescents. However, there is an inimical force against this tender and embracing environment – that is, divorce [6]. One of the most important issues currently faced by modern societies is the increasing divorce rate. If we begin to count the reasons for divorce, we get an endless list since almost any form of dispute or conflict in the modern society can also lead to divorce [7]. Divorce is one of the most important issues in human life which can endanger not only the mental balance of the parents but also that of the children, relatives, and friends as well. Although parental divorce does not always lead to emotional and behavioral problems in children, its negative consequences for children are certainly more than its positive aspects [8]. Children of divorce often feel guilty and are trapped in the false belief that *they* were the cause of divorce or that they could have been better children and prevented it from happening by intervention. In addition to considering themselves as the cause of divorce, they find themselves the only reason for their parents to continue. One of the most common consequences of parental divorce or separation for children is the feeling that they are lonely and different from other children [9]. The purpose of this study is to assess loneliness and depression in order to find the answer to this question: What is the extent of loneliness and depression in children of divorce?

2. METHODS AND PROCEDURES

2.1 Methodology

This study, with its aim to investigate the relationship between depression and loneliness in children of divorce, is carried out in the form of a correlational research project.

2.2 Statistical and Sample Population

2-2-1- Statistical population:

The statistical population of this study includes all the children of divorce living in Kermanshah province, Iran, in 2014.

2-2-2- Sample and sampling procedures

Considering the extensive nature of our statistical population, convenience sampling procedures were implemented to select 100 children of divorce living in Kermanshah province. The study features a 95% confidence interval.

2.3 Data Collection Instruments

For data collection, we used the 21-item Beck Depression Inventory and the20-item UCLA Loneliness Scale developed by Russell et al.

2-3-1- The Beck Depression Inventory

The Beck Depression Inventory (BDI) is one of the most efficient tests and questionnaires developed for reflecting depressive moods. This questionnaire contains 21 items that measure physical, cognitive and behavioral symptoms of depression. Each item includes 4 options and is rated on a scale from 0 to 3 that determine the degree of depression from mild to severe. The maximum score for this test is 63, and the minimum is zero. The 21 items of the Beck Depression Inventory cover sadness, pessimism, and sense of failure, dissatisfaction, guilt, and expectation of punishment, self-dislike, self-accusations, suicidal ideas, crying, irritability, social withdrawal, indecisiveness, body image change, work retardation, insomnia, fatigability, anorexia, weight loss, somatic preoccupation and loss of libido (Ashtiani and Dastani, 2010).

Instrument Reliability and Validity:

The results of the meta-analysis conducted on the Beck Depression Inventory (BDI) suggest that it features an internal consistency of between 0.73 and 0.93. Depending on the implementation interval and the type of population, test-retest reliability coefficients range from 0.48 to 0.86 (Beck et al., 1988; quoted in Grath Marnott, 2003). However, the weekly implementation of this inventory for a period of 7 weeks on students has shown a 40 percent reduction in the scores. These findings suggest that some cases of reduction in the scores of patients after intervention may to some extent (approximately 10% of the variance) be natural and spontaneous and not the effect of the intervention. A study by Vahhabzadeh (1973) in Iran in order to investigate the diagnostic value of

BDI in distinguishing depressed patients and healthy individuals showed that the questionnaire has a valid diagnostic value and can distinguish depressed patients and healthy individuals. The questionnaire also has the power to distinguish between different types of diseases. Several studies have indicated that BDI can distinguish between healthy individuals and those with mental illnesses, between Major Depressive Disorder and irritability, and between Generalized Anxiety Disorder and Major Depressive Disorder (Beck, 1967; Steer et al., 1968; Beck, Steer, Brown, Eidelson and Riskind, 1987; Steer, Riskind and Brown, 1986). Psychometric studies conducted on the second edition of BDI indicate that it is characterized by an adequate reliability and validity and is a good substitute for the first edition. Beck, Steer, and Brown (2000) reported an internal consistency of between 0.73 and 0.92 with an average of 0.86 and a Cronbach's alpha coefficient of 0.81 in the case of both experimental and control groups for BDI. Also, Dobson and Mohammadkhani (2007) reported a Oronbach's alpha coefficient of 0.92 in the case of outpatients and 0.93 in the case of students. They also reported a one-week-interval test-retest reliability of 0.93 for BDI. In addition, Gharaiebi conducted a study on 125 students studying at Tehran University and Allameh Tabatabai University in order to analyze the validity and reliability of 0.73 (2003).

2-3-2- The UCLA Loneliness Scale

The UCLA Loneliness Scale is used for collecting data in relation to loneliness. This scale can determine the degree of loneliness perceived by an individual.

Instrument Reliability and Validity:

The reliability and validity of this questionnaire in Iran was assessed by Hojjat (1981). The results vielded a reliability of 0.781. The UCLA Loneliness Scale was developed in 1980 by Russell, Peplau and Cutrona at the University of California, Los Angeles. The initial version of the test which was developed in 1978 by Russell, Peplau and Ferguson covered 20 items selected from the 75-item questionnaire invented by Sisenwein (1964). The 20-item UCLA Loneliness Scale was developed on the basis of the theories of 20 psychologists in relation to loneliness which is proof of its content validity. The redundant nature of the 75-item scale, with its predisposition to bias and sample-sensitivity, led its developers to revise the scale. Further revisions were made based on the correlation of each item with the total test score which had to be higher than 0.40. 10 items are keyed positively and 10 are keyed negatively. The respondent answers this self-reported questionnaire by relating the items to his/her own perceptions and rating them on a 4-point Likert scale ranging from 1 to 4 (1= never, 4= very often). The original developers of the scale reported a Cronbach's alpha coefficient of 0.94 in two experiments on a student sample. They also reported a one-month-interval test-retest reliability of 0.73 for the UCLA Loneliness Scale. Although Russell and his colleagues believe that this scale takes loneliness as a one-dimensional phenomenon, the results of various analyses differ on this matter. Various studies report the presence of 1 to 5 factors in the UCLA Loneliness Scale. The UCLA Loneliness Scale has been used frequently in studies on various types of population and it has proven efficient in the measurement of loneliness in different cultures.

2.4 Implementation Procedures

The sample size of this study was calculated based on the nature of the project and in compliance with sample size adequacy (N) for correlational studies. Finally, for collecting the required data, we administered the questionnaires among the children of divorce who were willing to cooperate.

2.5 Data Analysis

To answer the study questions, the collected data were analyzed by the SPSS software product v20 in both descriptive and inferential terms. In terms of descriptive statistics, the indices include frequency, mean value and standard deviation – which are presented in tables and diagrams. In terms of inferential statistics, we deployed the Pearson product-moment correlation coefficient. Mean values and standard deviations of the variables are presented and discussed in the descriptive section and the results of the Pearson test are presented and analyzed for confirmation of significance in the inferential section.

3. RESULTS AND DISCUSSION

3.1 Tables

Table 1 shows the mean value and standard deviation of variables by sex. The Pearson product-moment correlation coefficient has been used to evaluate the research hypotheses. The results of analyses are summarized below. Table 4-1 presents the age parameters of the respondents.

Gender	Variable	Standard deviation	Mean	Minimum	Maximum
Female	Age	1.41	15.88	13	18
	Depression	11.62	27.36	9	53
	Loneliness	10.42	42.20	26	71
Male	Age	1.26	15.96	14	18
	Depression	13.47	23.68	3	45
	Loneliness	9.18	44.24	26	60
Total	Age	1.33	15.92	13	18
	Depression	12.65	25.52	3	53
	Loneliness	9.78	44.72	26	71

As shown in Table 1, the mean age for girls participating in this study is equal to 15.88 with a standard deviation of 1.41. The mean age for boys is equal to 15.96 with a standard deviation of 1.26. Also the total mean age of the participants is equal to 15.92 with a standard deviation equal to 1.33. The mean depression score for girls participating in this study is equal to 27.33 with a standard deviation of 11.62, and 23.68 for boys with a standard deviation of 13.47. The mean value and standard deviation of depressed patients are 25.52 and 12.65, respectively. Finally, the mean loneliness score for girls participating in this study is equal to 42.20 with a standard deviation of 9.78. We deployed the Pearson product-moment correlation coefficient to evaluate the research hypotheses and determine whether the results are significant. The results are presented below.

Table 2 - Pearson correlation test between loneliness and depression in patients

Number	Significance	Correlation Coefficient	Variable
100	0.000	0.482	Loneliness*Depression

The results show that there is a positive relationship between loneliness and depression (p<001). According to the results, we can conclude that an increased sense of loneliness is associated with increased rates of depression in patients. Therefore, we can confirm the main hypothesis of this study indicating a significant relationship between loneliness and depression.

Table 3 - Pearson correlation test between loneliness and age in patients				
Number	Significance	Correlation Coefficient	Variable	
100	0.622	-0.050	Loneliness*Age	

The results show that there is no significant relationship between loneliness and age (p<0.622). Therefore, we can reject the second hypothesis of this study.

Table 4 - Pearson correlation test between depression and age in patients					
Number	Significance	Correlation Coefficient	Variable		
100	0.130	0.152	Depression*Age		

The results presented in table 4 show that there is no significant relationship between depression and age (p<130). Therefore, we can reject the third hypothesis of this study.

3.2 DISCUSSION AND INTERPRETATION

The purpose of this study is to examine the variables of loneliness and depression in children of divorce. For this purpose, we chose and studied a total of 100 children of divorce. The findings of this study showed that there is a significant positive relationship between loneliness and depression in children of divorce at the 95% confidence interval with a correlation coefficient of 0.482 and a significance level of 0.000. The results of the present study are consistent with the findings of studies by Mohammadian et al. (2007); Najafi et al. (2007), Namdar et al. (2007); Ghayoorfard (2007); and Fathi. Mohammadian et al. (2007) showed in their study that there is a significant relationship between depression and divorce among children of divorce. Najafi et al. (2007), Namdar et al. (2007) and Fathi showed in their studies that the rate of depression in children of divorce is higher than the average rate of depression in the normal population. In addition, the results of this study are consistent with the findings of studies by Sa'adat (2000), Kuroshnia and Latifian (2005), and Sharifi (2007). Sa'adat (2000) showed in his study that the rate of aggression and delinquency in male children of divorce is higher compared with male peers and that the rate of aggression and delinquency in male children of divorce is higher compared with female peers. These results indicate that divorce is stressful, especially for children and adolescents. Kuroshnia and Latifian (2005) showed in their study that family connection is a significant predictor of depression, stress

and anxiety in children of divorce. In another study entitled "comparison of the mental health status of children of divorce separated from the mother and normal children between 15 and 18 years of age", Sharifi (2007) showed that there were differences in the categories of depression, anxiety, somatization, sensitivity in mutual relations, and phobic and paranoid thoughts between the two groups. Furthermore, the results of this study are consistent with the findings of studies by Kate and Dobson (2007), Friedman, Mills and Peters (2007), Johnson and Hall (2007), and Douglas, Hans and Kevin (2008). These studies showed that the rate of depression was higher in children of divorce compared with normal children. The results of this study are also consistent with the findings of studies by Myrna M. and Seaman (2003), Jamon (1984) and Paul and Bruce (1991). In a study titled "depression and anxiety in children of divorce in the United States", Myrna M and Seaman showed that there is a relationship between parental divorce and child depression and anxiety and that divorce leads to extremely high levels of depression and anxiety in children. In a study titled "depression and anxiety in children of divorced parents in Britain", Jamon (1984) showed that children of divorce show high levels of anxiety and depression caused by the divorce of the parents. In another study titled "children and divorce in the US", Paul and Bruce (1991) showed that children of divorce exhibit high levels of stress. They also suggested that girls tend to show higher levels of stress than boys and higher levels of depression than normal girls. Finally, they concluded that parental divorce is associated with numerous psychological problems for children.

3.3 CONCLUSION

According to the obtained results, it can be concluded that numerous factors can lead to the development of depression and loneliness, one of them being parental divorce. One of the likely psychological mechanisms that affect depression is the experience of feeling lonely. Experimental results have shown that adolescents experience loneliness more than adults do. An increased sense of loneliness is associated with increased rates of depression. High levels of parental inclination for separation predispose children to psychological and emotional illnesses such as depression and loneliness.

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