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DEPRESSIVE SYMPTOMATOLOGY AND PERSONAL GROWTH INITIATIVE: COMPARATIVE STUDY BETWEEN PORTUGUESE AND SPANISH STUDENTS

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The transition from school to university constitutes, for most young people, the obtainment of independence, however it can also be seen as a critical phase of adaptation to new demands imposed by the university environment. Thus, adjustment to university experience constitutes a time period that is conducive both to negative events and harmful consequences on students' mental health, as well as to positive events and opportunities for growth and development of skills that are transversal to all of the life cycle. The sample is composed of 485 participants, about half of which are portuguese students, from the University of Beira Interior (50.5%) and 49.5% are spanish students, from the University of Salamanca. The sample has 71.5% female participants and 28.5% male participants, adding that most participants are 18 and 19 years old. The scales used were Center for Epidemiologic Studies Depression Scale (CES-D) and Personal Growth Initiative Scale (PGIS-II), along with a socio-demographic questionnaire.

There are no statistically significant differences between nationalities concerning depressive symptoms and personal growth initiative. Age has an isolated effect on depressive symptoms. Age and gender present interaction effects on both variables. A negative correlation between depressive symptoms and personal growth initiative was found.

Keywords: *depressive symptoms, personal growth initiative, university students.*

SIMPTOMATOLOGIA DEPRESIVĂ ȘI INIȚIATIVA DE CREȘTERE PERSONALĂ: STUDIU COMPARATIV ÎNTRE STUDENȚII PORTUGHEZI ȘI SPANIOLI

Trecerea de la școală la universitate constituie, pentru majoritatea tinerilor, obținerea independenței, totuși poate fi văzută și ca o fază critică de adaptare la noile cerințe impuse de mediul universitar. Astfel, adaptarea la experiența universitară constituie o perioadă de timp propice atât evenimentelor negative și consecințelor dăunătoare asupra sănătății mintale a studenților, cât și evenimentelor pozitive și oportunităților de creștere și dezvoltare a competențelor transversale întregului ciclu de viață. Eșantionul este compus din 485 de participanți, dintre care aproximativ jumătate sunt studenți portughezi, de la Universitatea din Beira Interior (50,5%) și 49,5% sunt studenți spanioli, de la Universitatea din Salamanca. Eșantionul are 71,5% femei și 28,5% bărbați, adăugând că majoritatea participanților au 18 și 19 ani. Scalele utilizate au fost Scala de depresie a Centrului pentru Studii Epidemiologice (CES-D) și Scala de inițiativă de creștere personală (PGIS-II), împreună cu un chestionar socio-demografic.

Nu există diferențe semnificative statistic între naționalități în ceea ce privește simptomele depresive și inițiativa de creștere personală. Vârsta are un efect izolat asupra simptomelor depresive. Vârsta și sexul prezintă efecte de interacțiune asupra ambelor variabile. S-a găsit o corelație negativă între simptomele depresive și inițiativa de creștere personală.

***Cuvinte-cheie**: simptome depresive, inițiativă de creștere personală, studenți.*

Introduction

The transition from school to university constitutes, for most young people, the achievement of their independence, however it can also be viewed as a critical phase of adaptation to a new environment and new demands [1]. Effectively, upon entering university, the student's mental health condition may suffer changes, because academic demands, difficulties in the learning development, and obtainment of abilities constitute occurrences of success or failure. These demands can intensify already existing mental health problems or increase the possibility of them occurring [2]. Several studies on depression in students have identified numerous associated factors such as gender, namely being a woman [3-5], age [4], namely being older, low socioeconomic status, higher literary qualifications [4, 5], and low or scarce social support [6, 7].

The presence of depressive symptoms can have cognitive, social and emotional effects on the student's life [8]. University students with depressive symptoms exhibit a greater deficit of social skills, extended to all social interactions and regardless of requiring more or less assertiveness [2]. In addition to a lack of energy, depressive symptoms also lead to a lack of motivation, resulting in less involvement in academic activities [9].

In view of the challenges that university poses to students, this phase can be defined as a time that is conducive both to negative events and harmful consequences on students' mental health, as well as to positive events and opportunities for growth and development of skills that are transversal to all of the life cycle (i.e., soft skills).

Thus, when faced with significant decision-making during this phase of life, regarding their professional future, current friendships, affective relationships, religious participation, connection to the family and health choices, students are faced with several possibilities for personal growth [10]. Personal growth is one of the dimensions of psychological well-being, being accompanied by other dimensions such as self-acceptance, the meaning of life, autonomy, positive relationships, and environmental mastery. Thus, personal growth initiative is related to the subject's involvement in his own process of self-improvement, in an active and intentional way [11].

The promotion of PGI can constitute a parsimonious intervention that aims at a multidimensional emphasis on the mental health of university students. These types of interventions aimed at prevention can play a protective role against the onset of mental disorders, as well as increase the quality of life of individuals who already experience them by improving their mental health [12]. Thus, with regard to depression, facing adverse situations as opportunities for personal growth contradicts the dysfunctional cognitions typical of this clinical condition. For this reason, it is expected that, through the cognitive process in question, PGI will inhibit the development of depression and other psychological difficulties [13].

The main goals that are intended be achieved in this research are to compare depressive symptoms levels and personal growth initiative levels between portuguese and spanish university students and to verify a correlation between depressive symptoms and personal growth initiative.

Method

Participants

The sample is composed of 485 participants, of which 138 (28.5%) are male students and 347 (71.5%) are female students. Concerning the participants' ages, 53.8% are 18 years old, 25.2% are 19, 10.1% are 20, 6% are 21, 2.3% are 22, 0.8% are 23, 1.6% are 24 and, finally, 0.2% are 25 years old. Additionally, the mean age in this sample is 18.88, with a standard deviation of 1.30. About 50.5% (N = 245) of the participants are Portuguese and 49.5% (N = 240) are Spanish. With regards to the academic year, 455 (93.8%) are in their first year of college, 27 (5.6%) are in the second year and 2 (0.4%) are in the third year, with one participant (0.2%) who didn't respond.

Measures

Center for Epidemiologic Studies Depression Scale (CES-D)

The purpose of this scale is to evaluate the occurrence of depressive symptoms in the general population. The scale is composed of four factors: depressive affect, positive affect, somatic and retarded activity, and interpersonal [14]. We calculated the internal consistency using Cronbach's alpha, with a value of .763 for the global scale, which reflects good internal consistency.

Personal Growth Initiative Scale-II (PGIS-II)

The PGIS-II was developed following its original and first version with the purpose of being a multidimensional scale, involving cognitive and behavioral components. The PGIS-II comprises four dimensions: Intentional Behavior, Using Resources, Planfulness, and Readiness for Change [16]. We used Cronbach's alpha to calculate the internal consistency, with a value of .917 for the global scale, .826 for Intentional Behavior, .871 for Planfulness, .803 for

Readiness for Change, and .741 for Using Resources.

Sociodemographic Questionnaire

This questionnaire includes aspects such as age, gender, nationality, university course, year of university, place of residence, parents' educational level and professions, and, finally, if they have any type of psychological and/or psychiatric support.

Results

The obtained results show that there are no statistically significant differences between the portuguese participants and the spanish participants when accounting for depressive symptomatology, t(471) = 1.448, p > .05 and personal growth initiative, t(477) = 1.952, p > .05. Regarding the interaction effects between both variables (i.e., age and nationality), considered altogether, we can conclude that there are no statistically significant differences on the effect of age for both portuguese and spanish students in respect to depressive symptoms, $F(3, 1) = .473$, $p = .492$. However, age affects the levels of depressive symptoms when thought of as an isolated variable, F(3, 1) = 6.542, p = .011. By analyzing the mean values between the groups, we can infer that portuguese students who are 18 years old are the participants who present a higher level of depressive symptoms ($M = 21.78$, $SD = 8.14$), followed by 18-year-old spanish students ($M = 19.98$, $SD = 7.04$). Closely behind are the portuguese students who are 19 or older ($M = 19.56$, $SD = 7.37$), and lastly the spanish students who are 19 or older are the ones with the lowest mean levels of depressive symptoms ($M = 18.70$, $SD = 6.25$).

In regard to the interaction effects between both variables (i.e., nationality and gender), we can verify that such effects are statistically significant, $F(3, 1) = 5.871$, $p = .016$. Concerning the mean values of all the groups, we determine that the portuguese female students show higher levels of depressive symptoms ($M = 20.65$, $SD = 7.67$), followed by the portuguese male students ($M = 20.31$, $SD = 7.95$). Thirdly, we have spanish female students ($M = 20.20$, $SD = 6.91$), and lastly spanish male students with the lowest levels of depressive symptoms ($M = 15.97$, $SD = 4.83$).

Interaction effects of both variables (i.e., nationality and gender) on personal growth initiative levels show statistical significance, $F(3, 1) = 4.538$, $p = .034$. we conclude that spanish male students present the highest levels ($M = 55.72$, $SD = 9.70$), closely followed by portuguese female students ($M = 55.02$, $SD = 12.13$) and portuguese male students ($M = 53.44$, $SD = 13.34$). Lastly, spanish female students present lowest levels ($M = 51.51$, $SD = 12.25$).

According to Pearson's correlation coefficient, we can verify that there is a negative association between depressive symptoms and personal growth initiative. Furthermore, this association is statistically significant, as shown by

$r(473) = -.140$, $p = .002$.

Discussion

Through the analysis of the differences between portuguese and spanish students concerning depressive symptoms levels and personal growth initiative, we verify that there are no differences between both nationalities. It is important to note that, although this sample is comprised of students from two different countries, these universities have very close proximity to each other geographically speaking.

By analyzing the differences in depressive symptoms according to age and nationality, we determine that these variables do not interact with depressive symptom levels. However, age has an isolated effect on the levels of depressive symptoms. Moreover, the mean values show that portuguese students 18 years old are the group with the highest levels of depressive symptoms, with a result slightly higher than the cut-off point. Several studies are according to those who found that young students beginning the course present more indicators of depression [15, 5].

The results allow concluding that nationality and gender interact with each other, having an effect on depressive symptoms levels. Specifically, by analyzing the mean values, it is possible to verify that portuguese female students are the group with the highest levels of depressive symptoms. This result is derived from the cultural differences between countries given that, Spanish people are generally described as warmer and friendlier people who like to entertain [16] and Portuguese are described as tenacious and pragmatic people, characterized by their adaptability. The differences concerning gender could be explained by considering multiple psychosocial factors and how they interact with the psychobiological structure, resulting in a higher vulnerability from the female gender towards depression, such as the endocrine structure [17], premenstrual syndrome, stress, thyroid conditions, hormonal changes, among others [18]. In addition, it can also be considered that men present a greater tendency to hide the symptoms and not seek help [19].

The results allow concluding that nationality and gender interact with each other, having an effect on personal growth initiative levels. According to the mean values, spanish male students are the ones with the highest levels, which would confirm our hypothesis that male spanish students present higher levels of a personal growth initiative. However, this group has a lower N compared to the other three, so these results should be considered with caution. Concerning gender, there are no studies corroborating our findings. Specifically, some studies found higher values of PGI in females compared to males [20]. On the other hand, some studies found no significant differences between genders [21, 22].

With respect to the association between depressive symptoms and personal growth initiative, there is a negative correlation that is statistically significant between both variables. This means that the higher the levels of depressive symptoms, the lower the levels of a personal growth initiative, which would make sense if we consider that PGI is thought of as a protective factor against depression [23]. These results were expected, given that the intentionality that is behind PGI as a construct does not typically correspond to common depressive symptoms, such as lack of motivation, low energy, low self-esteem, and hopelessness, among others.

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