



Original

Scholar and Clinical Maladjustment and Personal Adjustment in 12–18 Year-old Adolescents^{☆, ☆☆}



Elena Bernaras^{*}, Joana Jaureguizar, Marian Soroa, and Marta Sarasa

Universidad del País Vasco-Euskal Herriko Unibertsitatea, Donostia-San Sebastián, Spain

ARTICLE INFO

Article history:

Received 19 May 2016

Accepted 24 November 2016

Available online 7 June 2017

Keywords:

Adolescence
Maladjustment
Adaptation
BASC
Basque

ABSTRACT

Adolescence usually involves a higher risk of personal maladjustment that can be related to clinical symptomatology and scholar maladjustment. This study includes an analysis of the prevalence of clinical and school-maladjustment and personal adjustment in secondary school adolescent from the Basque Country. The study adapts and validates the S3 self-report version of the *Behaviour Assessment System for Children and Adolescents* (BASC). The sample consisted of 1827 adolescents aged between 12 and 18 years. Although some differences in the adjustment levels for males and female were found, the associated effect sizes are small. In addition, the Basque-language version of the BASC-S3 has psychometric properties similar to those of the Spanish and original versions of the measurement tool, thus it can be of great use in the Basque-speaking adolescent population.

© 2017 Universidad de País Vasco. Published by Elsevier España, S.L.U. All rights reserved.

Desajustes escolar, clínico y ajuste personal de adolescentes de 12 a 18 años

RESUMEN

La adolescencia se caracteriza por un mayor riesgo de desajuste personal, que puede ir unido a sintomatología clínica y desajuste escolar. En este estudio se analiza la prevalencia de los desajustes clínico y escolar y del ajuste personal en estudiantes del País Vasco. Se adapta y valida al euskara el *Sistema de Evaluación de la Conducta de Niños y Adolescentes* (*Behaviour Assessment System for Children and Adolescents* [BASC]) en su versión de autoinforme S3. La muestra está compuesta por 1.827 adolescentes de 12 a 18 años. Aunque se han hallado algunas diferencias en los niveles de desajuste entre hombres y mujeres, los tamaños del efecto asociados son pequeños. Se ha puesto de manifiesto que la versión vasca del BASC-S3 presenta propiedades psicométricas similares a las de la versión española y la versión original de la prueba, por lo que puede ser un instrumento de gran interés para utilizar en población adolescente vasco parlante.

© 2017 Universidad de País Vasco. Publicado por Elsevier España, S.L.U. Todos los derechos reservados.

Palabras clave:

Adolescencia
Desajuste
Adaptación
BASC
Euskara

Introduction

Adolescence is one of the most difficult and critical stages of human development, due to the important physical, social and psychological changes that take place in this period. The transition

from childhood to adulthood is characterised by an increased risk of emotional imbalance (Vink, Derks, Hoogendam, Hillegers, & Kahn, 2014) and of psychological disorder (Merikangas et al., 2010). The commonest types of maladjustment at this age are depression and anxiety (Donaldson, Gordon, Melvin, Barton, & Fitzgerald, 2014; Merikangas et al., 2010). In many cases, too, adolescents have low self-esteem and are more vulnerable to the stress associated with social relationships (Frost & McKelvie, 2004; Moksnes, Moljord, Espnes, & Byrne, 2010). All of these variables are related to two dimensions identified by Reynolds and Kamphaus (1992): *clinical maladjustment*, (including variables such as anxiety, atypicality, locus of control and somatisation) and *personal adjustment* (including variables such as interpersonal

[☆] Please cite this article as: Bernaras E, Jaureguizar J, Soroa M, Sarasa M. Desajustes escolar, clínico y ajuste personal de adolescentes de 12 a 18 años. Rev Psicodidact. 2017;22:118–127. <http://dx.doi.org/10.1016/j.psicod.2017.05.003>

^{☆☆} This study was funded by Universidad del País Vasco/Euskal Herriko Unibertsitatea (UPV/EHU) (EHU 11/16).

^{*} Corresponding author.

E-mail address: elena.bernaras@ehu.eus (E. Bernaras).

relationships, self-esteem, relationships with parents and self-reliance). Reynolds and Kamphaus (1992) also refer to another important dimension in the lives of adolescents: *school maladjustment* (viewed as negative attitudes to school and teachers, and sensation seeking). This study analyses the prevalence of these dimensions among adolescents and the differences in this respect by sex and age, areas in which, to date, very little research has been conducted.

Various studies have sought to analyse the prevalence of emotional disorders related to *clinical maladjustment* in adolescence. Thus, Polanczyk, Salum, Sugaya, Caye, and Rohde (2015) conducted a meta-analysis to estimate the prevalence of mental disorders in children and adolescents in 27 countries, and reported a prevalence of 6.5% for anxiety and 2.6% for depression. However, other studies have recorded higher rates of depression, up to 17.9% (Essau, Conrardt, & Petermann, 2000) and even 26% (Lazaratou, Dikeos, Anagnostopoulos, & Soldatos, 2010). Comparable studies in Spain have estimated a prevalence ranging from 2.3% (Jaureguizar, Bernaras, Soroa, Sarasa, & Garaigordobil, 2015) to 19.5% (Aláez, Martínez-Arias, & Rodríguez-Sutil, 2000) for depression and even higher values (26%) for anxiety (Orgilés, Méndez, Espada, Carballo, & Piqueras, 2012).

Most psychological disorders cause emotional, cognitive or social harm, and adolescents presenting such conditions are at greater risk of having a negative school experience, which can lead to early school leaving (Esch et al., 2014). Rodríguez-Fernández, Droguet, and Revuelta (2012) reported that *school adjustment* is related, among other areas, to academic self-concept and adequate family support.

With respect to differences in adjustment/maladjustment by gender, studies have shown that adolescent boys have less tolerance to stress, but higher self-esteem than girls. On the other hand, girls present higher levels of anxiety and depression (Jaureguizar et al., 2015; Waite & Creswell, 2014). This greater prevalence of anxiety and depressive symptoms in females has been observed in many studies (Orgilés et al., 2012; Sanchís & Simón, 2012; Thapar, Collishaw, Pine, & Thapar, 2012). As regards *school maladjustment*, some studies have observed a higher level of maladjustment among boys (Johnson, Crosnoe, & Thaden, 2006; Wang, Chen, Sorrentino, & Szeto, 2008), although others recorded no significant differences by gender (e.g., Oramah, 2014). Other studies have argued that such differences between boys and girls are minimal, and that their similarities are of more importance. For example, Álvarez (2015) analysed the results of students of different ages who completed the Behaviour Assessment System for Children (BASC) questionnaire (Reynolds & Kamphaus, 1992) and noted that in the majority of scales examined, there were no significant differences by sex, or if there were, the effect sizes were low. The scales where this study did find differences according to sex were those of *self-esteem* (greater in boys, with a difference that was significant but not substantial), *anxiety* (greater in girls) and *sensation seeking* (greater in boys). Álvarez (2015) held that these results supported the hypothesis of similarity between the sexes, in accordance with Hyde (2005), according to whom men and women are similar in most, but not all, psychological variables. Thus, Hyde (2005) reviewed 46 meta-analyses of psychological differences by sex, and found that 78% of the effect sizes in the reported differences were very small or close to zero.

Studies of personal adjustment, at different ages, also provide conflicting data. While some authors find that as age increases, so does the incidence of depression (Compas, Connor-Smith, & Jaser, 2004), others show that this increase is unremarkable (Moksnes et al., 2010) or that there are no age-related differences (Jaureguizar et al., 2015). However, Orgilés et al. (2012) indicated that generalised anxiety among adolescents also increases with age.

In view of the importance of adequately assessing the presence of disorders among children and adolescents, one approach that is coming into increasing use is that of the dimensional psychometric model, in which quantitative procedures are used to analyse the components of different syndromes. One such instrument is BASC (Reynolds & Kamphaus, 1992), which evaluates both positive (adaptive scales) and negative (clinical scales) dimensions of the behaviour and personality of children or adolescents. Merrell (2009) described BASC as one of the best scales available for behavioural assessment, with an important empirical basis and very few drawbacks (one such, however, being the length of the questionnaire).

In comparison with BASC, other multidimensional questionnaires address fewer dimensions (see the Spanish-language adaptation of BASC by González, Fernández, Pérez, and Santamaría (2004)). Thus, while the BAS-3 *Socialisation Tests* (Silva & Martorell, 1987) measure the subjects' behaviour, BASC also evaluates their emotions, perception and cognition. A similar contrast can be observed with the *Youth Self Report* (Achenbach, 1985). Another strength of BASC is that it assesses both adaptive and maladaptive aspects of adolescent behaviour, unlike other tests, which focus exclusively on clinical aspects (see, for example, the *Multi-factor Self-Assessment Test of Infant Adaptation* [TAMAI] proposed by Hernández, 2002).

There are several versions of the BASC self-report of personality, according to the age of the subjects: S-2 is intended for boys and girls aged 8–11 years, while S-3 is designed for adolescents aged 12–18 years. S-2 has been adapted and validated for a Basque-speaking population aged 8–11 years (Jaureguizar, Bernaras, Ibabe, & Sarasa, 2012), but to date no such adaptation has been made of S-3. The justification for validating this type of instrument for Basque speakers is that the use of Basque in education has increased considerably in recent years. Thus, according to data from the Basque Institute of Statistics (EUSTAT, 2015–16), 88% of students in compulsory secondary education (ESO) follow a bilingual or totally Basque model, and this percentage remains high in pre-university education (66%). These very high rates of Basque speakers highlight the need to provide students with assessment instruments in their mother tongue.

Taking into account the above considerations, this study has two main objectives: (1) to adapt the self-reporting S-3 BASC into the Basque language and to validate it for use by Basque-speaking students aged 12–18 years (S3); (2) to quantify the incidence of school maladjustment, clinical maladjustment and problems of personal adjustment in a sample of adolescents drawn from the Basque Autonomous Community, and to determine whether there are any differences in this respect according to sex and age.

Method

Participants

The study sample was composed of 1827 Basque-speaking students from nine schools in the provinces of Álava, Vizcaya and Guipúzcoa, of whom 869 were boys and 956 were girls, aged 12 to 18 years ($M_b = 14.43$; $SD_b = 1.69$; $M_g = 14.60$; $SD_g = 1.61$). To facilitate interpretation of the results, taking into account the developmental nature of the variables analysed, the participants were grouped into four categories by age, using the same categorisation as in the original version of the test and its later adaptations: 11–12 years (263 students), 13–14 years (615 students), 15–16 years (703 students) and 17–18 years (243 students). Of these students, 453 were in the first year of E.S.O., 474 in the second year, 303 in the third and 383 in the fourth, while 185 were in the first year of pre-university education and 29 in the second.

Download English Version:

<https://daneshyari.com/en/article/8929224>

Download Persian Version:

<https://daneshyari.com/article/8929224>

[Daneshyari.com](https://daneshyari.com)