

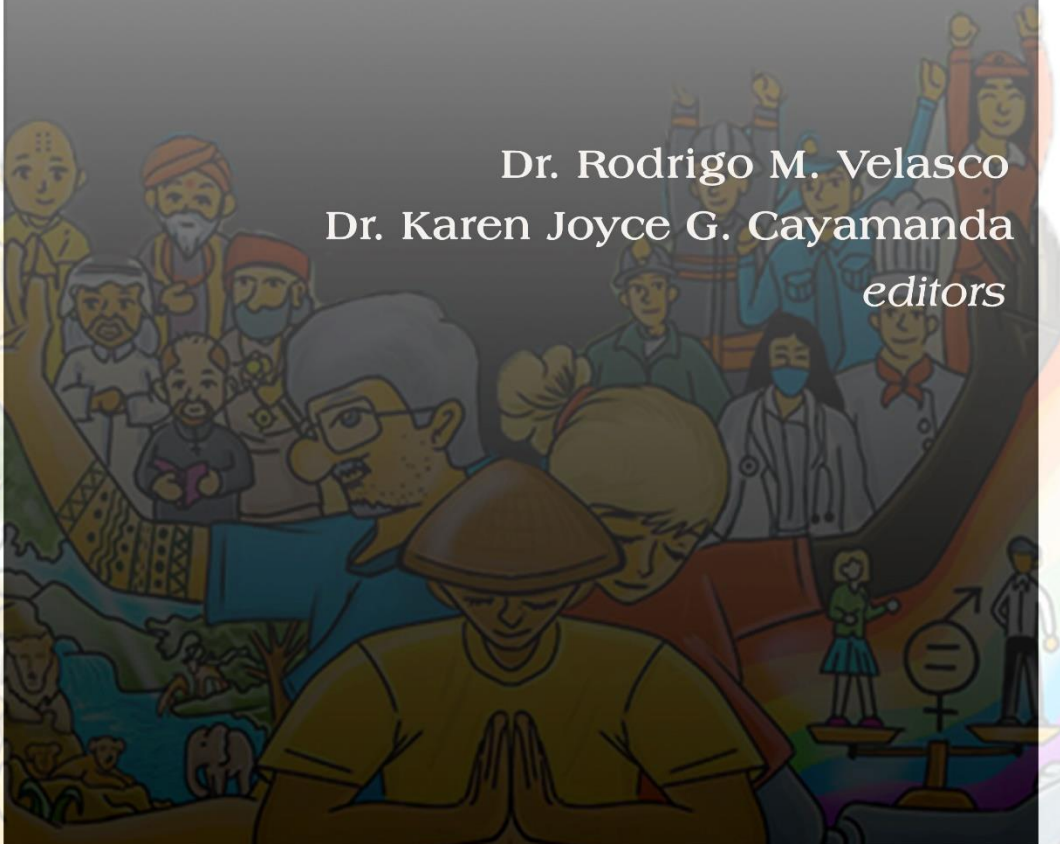
The WORLD

in Different PERSPECTIVES: Rebuilding Lessons after a Crisis

Dr. Rodrigo M. Velasco

Dr. Karen Joyce G. Cayamanda

editors



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ISBN - 978-621-96514-0-0

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Published by:

Institute of Industry and Academic Research Incorporated



South Spring Village, Bukal Sur

Candelaria, Quezon, Philippines

Postal Code 4323

Contact Numbers: (042) 785-0694 • (+63) 916 387 3537

Visit the website <https://iiari.org>

Cover design by Dino V. Torres

Preface

The world is in chaos. The emergence of COVID-19 pandemic created the havoc that all parts of the globe had to deal with. In addition, there are still other personal and social crises that everyone endures.

Rebuilding Lessons after a Crisis attempts to present the whys, whats and hows of humanity's risk perception across the world as we embark on this challenging journey and help define the most appropriate and most effective risk-related behaviors for survival.

The current pandemic has brought about the abrupt shift in all sectors of the society in different parts of the world. It has resulted to immediate adjustments and development of coping mechanisms to transcend beyond the challenges of this pandemic. Like any other crisis, the current situation taught us to reflect and manage its overwhelming effects.

This book compiles articles that reflect the different perspectives in varied concerns such as health, economy, education, and social transformations. Its impact to the physical, emotional, psychological and financial conditions of humanity across the world are also presented.

Part I as the opening chapter attempts to describe the situation in terms of how a crisis has been evaluated in different lenses as to the risk perception and the risk related behaviors as to how various sectors have adapted to the situation.

Part II describes the varied effects of the pandemic and the adjustments and coping responses manifested by the different sectors.

Part III offers the strategic actions and coping mechanisms that can help recover and sustain ways of life in these challenging times.

About the editors

Dr. Rodrigo M. Velasco has a multi-cultural perspective of education and research having worked as a professor and administrator in the Philippines, CNMI, USA and Sultanate of Oman. His orientation on multiculturalism and diversity trained him to cope with different cultural and geographical settings. He is currently an assistant professor of business management and accounting at Gulf College, Sultanate of Oman. As an academician, he has professional qualifications such as Doctor of Business Administration, Diploma in Strategic Management and Leadership from School of Business London, and Certified Human Resource Professional and Certified Marketing Professional from Qualifi, United Kingdom. As a researcher, he is the founding president of the Institute of Industry and Academic Research Incorporated as a platform for open access publications.



Dr. Karen Joyce G. Cayamanda is an Associate Professor in Communication from the University of the Philippines Mindanao, with a 23-year teaching experience and a 16-year experience as University Registrar, Vice Chancellor for Academic Affairs and currently Vice Chancellor for Administration. She is a graduate of UPLB (BA Comm Arts, 1993; MA Comm Arts, 2000 and PhD Development Studies, 2019). She is a grantee of the PhD graduate studies scholarship under the Commission on Higher Education (CHED) and a PhD research scholarship recipient under the Southeast Asian Regional Center for Graduate Study and Research in Agriculture (SEARCA) and a PhD fellow of the Doctoral Studies Program of the University of the Philippines. She is the founding member of the Philippine Academic Society for Climate and Disaster Resilience (PASCARD), Board Member of the Philippine Association of Media Educators (PACE) for 2021-2022 and Local Fellow and Director for Conferences and Events of the Institute of Industry and Academic Research Incorporated (IIARI).



Featured authors:

Associate Professor Hiroko Kanoh

Hiroko Kanoh is an associate professor in the Institute of Arts and Sciences National University Corporation Yamagata University, Yamagata prefecture in Japan. She graduated Master's program at Tokyo Gakugei University and the doctorate program at Waseda University, Tokyo. Her areas of specialization are educational technology, cyber psychology and ICT education. She has more than 20 international and 100 national publications and 30 authored books. She was awarded the Culture, Sports, Science and Technology Minister's Commendation in the field of science and technology in 2010.

Surbhi Chandra

Surbhi Chandra is a psychologist and an author. She has numerous chapters published in national and international books. She has post graduate in Clinical Psychology and bachelor's in Clinical Psychology from Amity University, Gurgaon. Currently, she is preparing for her MPhil in Clinical Psychology. As an aspiring clinical psychologist, she is fascinated by abnormalities of human and animal behaviour. She is a co-founder of the organisation PsychProbe and works towards spreading mental health awareness and the importance of research in psychology. She also looks forward to starting an organization for animal welfare.

Vooturi Lasya

Vooturi Lasya is a psychologist and behaviour therapist in child development center, Hyderabad, India. She completed her master's in Counselling Psychology and bachelor's degree in Clinical Psychology from Amity University, Gurgaon. She is interested in working with children with disabilities as she believes that every child has potential and can overcome all the obstacles caused by the disability, if given the right and timely intervention.

Megha Garg

Megha Garg completed her master's in Clinical Psychology and bachelor's degree in Clinical Psychology from Amity University, Gurgaon. Her strong suit is developmental psychology with a special focus on parental acceptance, academic achievement and self-evaluation of the child.

Kavya Ahuja

Kavya Ahuja completed her master's in Clinical Psychology and bachelor's degree in Clinical Psychology from Amity University, Gurgaon. She is interested in exploring the research perspective in clinical psychology and studying individual differences. She believes that everyone should know themselves and their purpose. She gives equal priority to physical and mental health, and also tries to eradicate mental health taboo in India. She has national and international publications. She is a founder of Psychprobe which promotes the research work in the psychology field and works towards the awareness of mental health in young minds.

Pauline B. Malabanan

Pauline B. Malabanan is a graduate of BS Human Ecology major in Social Technology in the Department of Social Development Services – University of the Philippines – Los Banos. She has been practicing human resources since 2017 and is now currently connected in a non-government organization assisting persons with disabilities. She is also engaged in community work organizing person with psychosocial disabilities as she is diagnosed with one. She is an active speaker in mental awareness raising and mental health advocacy. Right now, she is applying in MS Social Work in University of the Philippines – Diliman to hone her skills in community work and organizing.

Dr. Emilia S. Visco

Dr. Emilia S. Visco is a Professor at the Department of Social Development Services (DSDS), College of Human Ecology (CHE), University of the Philippines. She was a former two-term Department Chair of DSDS, served as CHE Coordinator for Research and Extension, program and project leaders of several research projects. Dr. Visco has a BS degree in Development Communication, MS in Development Communication and a PhD in Extension Education. She has numerous peer-reviewed/Scopus indexed journal publications, international and national chapters in a book, manuals and other publications, editorial board member and article reviewers to national and internationally published and indexed journals.

Maj Marco R. Publico

Maj. Marco R. Publico is a member of the Corps of Professors, Armed Forces of the Philippines. He is currently assigned at the Philippine Military Academy where he teaches social science subjects. He graduated from the University of the Philippines Baguio where he took up Bachelor of Arts in Social Sciences, Majors in Psychology and Political Science. He took up Master of Science in Guidance and Counseling at Saint Louis University where he graduated Cum Laude. Currently, he is in the process of finishing his doctorate degree in Educational Management at the University of the Cordilleras. Being a Registered Guidance Counselor, he previously headed the PMA Cadet Welfare Office in providing guidance and counseling services to the cadets. Maj. Publico has written various articles and researches in the areas of Filipino Psychology, Social Psychology, Psychological Testing, Educational Psychology, and Educational Management.

Ged Xavier A. Fruto

Ged Xavier Fruto is a graduate of BA Communication Arts from the University of the Philippines Mindanao. Prior to finishing his studies, he worked in the business process outsourcing industry which honed his communication skills especially in haggling with clients and delivering a clear message to his team. As a member of a few philanthropic organizations, he has also been actively involved in community services such as donation drives, environmental campaigns, and educational programs. His background in communication has helped him serve his purpose in these organizations. Currently, he is a junior research assistant in UP Mindanao and hopes to continue and improve his skills in the research field before pursuing further studies.

Jherwin P. Hermosa

Jherwin P. Hermosa is a faculty member and ITSO Coordinator in the College of Arts and Sciences at the Laguna State Polytechnic University, San Pablo City Campus. He is teaching philosophy and social science subjects both in undergraduate and graduate programs. He is currently taking Doctorate Degree in Educational Management.

Md. Alamgir Hossain

Md. Alamgir Hossain is a lecturer at the Department of Computer Science and Engineering, Prime University, Dhaka 1216, Bangladesh. He completed his BSc in Computer Science & Engineering from Jashore University of Science & Technology. He is currently a Master of Science (MSc) student of Information and Communication Technology (ICT) at Bangladesh University of Engineering Technology (BUET). As a researcher and writer, he published papers and book chapters in different international publications. His research mainly focuses on cloud computing, cyber security, data security and cyber bullying among others.

Portia R. Marasigan, PhD

Portia R. Marasigan, Ph.D. is an Associate Professor 5 at the Laguna State Polytechnic University, San Pablo City campus, San Pablo City in the Philippines. She is a graduate of Doctor of Philosophy in Psychology. She authored several journal publications, presented papers in the international conferences and served as reviewers and editorial board in international journals.

Thessalonica M. Sinohin

Thessalonica M. Sinohin took Bachelor of Science in Industrial Technology major in Food Technology at Laguna State Polytechnic University San Pablo City Campus. She also finished Master of Science in Family Resource Management at University of the Philippines Los Baños last 2017. She taught high school Technology and Livelihood Education for 2 years and acted as a guidance counsellor at a private school. Currently, she is an instructor and Extension Unit Head at the College of Industrial Technology of Laguna State Polytechnic University San Pablo City Campus.

Farhana Yasmin

Farhana Yasmin is a final year student at the Sociology department of Barishal University, Bangladesh. She is a writer, social worker and volunteer. As she is passionate about writing, several of her columns, features, opinions and letters were published in many national and international newspapers and magazines. She took advantage of the COVID-19 pandemic situation to keep her accustomed to writing and research.

Saifullahi Adam Bayero

Saifullahi Adam Bayero is currently serving as Trade, Development Operation and Compliance Coordinator at Combine Telecoms Solution Network Limited. He is an Ambassador of the World Literacy Foundation, Impact Youth Sustainability, Volunteer, Nigerian Youth SDG and served as a Graduate Assistant at Department of Business Administration, Federal University Gashu'a. He holds a Bachelor of Science in Business Administration from Bayero University, Kano. He is a member of the National Institute of Management Chartered, Associate Member, Chartered Institute of Human Resources Management and a Certified Human Resources Management Professional. As a promising researcher, Bayero has published several papers in international publications.

Dr. Adams Adeiza

Dr. Adams Adeiza is currently the director of Global Entrepreneurship Research and Innovation Center and a senior lecturer at University Malaysia Kelantan. He is an award winning academic and serial entrepreneur. His work as a leadership, entrepreneurship and innovation coach as well as mentor many young people and entrepreneurs has earned him many accolade. Adams is an SME Growth Expert, Business Development Specialist, Digital Transformation Strategist and Data Analyst, Leadership and Entrepreneurship Coach, Franchising and Franchise Operation Consultant, Competitive Strategist, and Creativity and Innovation Coach. He published several papers in a high impact journals indexed in Scopus and Web of Science.

Table of Contents

Part 1 – The Nature and Extent of Crisis

Classification of the Transition Patterns of the Number of COVID-19 Patients <i>Hiroko Kanoh</i>	2
Mental Health in Diverse Population <i>Surbhi Chandra, Vooturi Lasya, Megha Garg & Kavya Abuja</i>	17
Resilience in community urbanization <i>Pauline B. Malabanan & Emilia S. Visco, PhD</i>	30
Mental health and the teaching profession <i>Marco R. Publico</i>	40
The social amplification of risk, risk perception, and risk-related behavior <i>Ged Xavier A. Fruto</i>	53

Part 2 – The Varying Effects of Crisis

The Socialization and Self-acceptance of the Extrajudicial Killings' Left behind Families <i>Jhervin P. Hermosa</i>	85
Cyber Bullying Tendency among Young Generation <i>Md. Alamgir Hossain</i>	100
Cognitive Vulnerabilities and Depression of Children with Single Parents <i>Portia R. Marasigan, Ph.D.</i>	111
Elderly Parent Caring for an Adult with Down syndrome <i>Thessalonica M. Sinobin</i>	124

Part 3 – The Strategies to Overcome a Crisis

Theoretical Perspective on Covid-19 Related
Social Problems
Farhana Yasmin.....141

Personalities Characteristics and
Entrepreneurial Success
Saijfullahi Adam Bayero & Adams Adeiza.....156

Brief cognitive restructuring and cognitive
defusion techniques
Portia R. Marasigan, Ph.D......174

This is an original copy of the book chapter.

Cognitive Vulnerabilities and Depression of Children with Single Parents

Portia R. Marasigan, Ph.D.

Introduction

The family, which consists of parents and children, is very important for human life. Starting from loving and being loved by the child who comes from within a family in the world develops a healthy personality in accordance with the needs of his/her physical, mental and emotional needs and obtains the most comprehensive information about the society to live in. The child, who has completed the socialization and education process with the help and contributions of the parents, gains a successful social life. A child observes a family communication based on mutual love, respect, sharing and solidarity, has a better relationship with the people around him (Şentürk, 2012). Family is a great institution and parenting is its pillar. However, with time there have been huge observations that single parenting is mostly practiced and one individual parent is accountable of nurturing of children. Due to multiple reasons both spouses are unable to practice the same responsibilities together. It seems very strong but has ultimate consequences on children (Ali & Soomar, 2019).

Over the years, there has been a general consensus that single-parent families are at a greater disadvantage compared to more traditional homes. The factors associated with worse outcome in single-parent families maybe more complicated than first evident. Single-parent families are also suggested to have less resilience when confronting stress. Single parenthood raises further economic challenges compounding the level of stress, possibly causing more difficulties in parent-child relationships. The prevalence of poverty in single-parent family has been estimated to be as high as 50% compared to around 5% in two-parent intact families (Avison, 2002). Children who grow up in fragmented or single-parent families fail to fulfill their socialization tasks (Uluğtekin, 1991; Adegboyega, 2019). The violent conflict created by the incompetence in the family causes

the divorce by weakening the relationship between the parents, and as a result of these divorces, a number of anti-social behaviors such as high anxiety, aggressiveness and shyness are observed in children (Ulug and Candan, 2008).

A child belonging to a broken family has constant internal conflict. At the end of these conflicts, they accused the family of children and showed an attitude towards them (Wolf, 1998). Without the ability to solve the problem, the child will face deeper problems in the future because he cannot solve his anti-social behavior (Morganett, 2005). Research revealed that divorce has negative consequences on children such as depression, stress, loneliness, irritability, and lack of attention (Herwig, Wirtz, and Bengel 2004; Jackson, 2000; Sergi, et al., 2013; Daryanani, et al., 2016).

It is well-established that many psychosocial factors more broadly predictive of depression - including life stress, cognitive vulnerabilities, and interpersonal conflicts - are more likely to be encountered by adolescents than children (Hankin, 2006; Sergi, et al., 2013), and thus, may help explain the sharp increase in depressive rates. Moreover, although cognitive vulnerabilities such as rumination and negative inferential styles are present during childhood, they often consolidate during adolescence and develop into more robust, stable predictors of depression (Hankin, 2008a; Sergi, et al., 2013).

According to APA dictionary of psychology, cognitive vulnerability is a set of beliefs or attitudes thought to make a person vulnerable to emotional disorders such as depression and anxiety. This term focuses upon a sense of dissonance, meaning discord or conflict, within a person's mental processes while learning new information but more directly this term focuses upon the learner's efforts towards using information in new and different ways of understanding.

Maladaptive cognitive styles, including dysfunctional attitudes about our self-worth, the tendency to make negative inferences about the causes and consequences of negative events, and the tendency to ruminate about our sad mood, have been hypothesized to provide vulnerability to depression when

individuals experience stressful life events (Alloy, Abramson, Stange & Salk, 2016).

According to Riskind and Black (2005), cognitive vulnerabilities are faulty beliefs, cognitive biases, or structures that are hypothesized to set the stage for later psychological problems when they arise. They are in place long before the earliest signs or symptoms of disorder first appear. These vulnerabilities are typically purported to create specific liabilities to particular psychological disorder after individuals encounter stressful events, and to maintain the problems after their onset. Only by addressing these vulnerabilities can long-term therapeutic improvements be maintained, and the risk of recurrences or relapse be reduced.

Riskind and Alloy (2006) states cognitive vulnerability models offer popular ways of understanding the origins and causal factors that contribute to psychological problems. Cognitive vulnerabilities are typically purported to create liabilities to psychological disorders after individuals encounter stressful events, in a vulnerability-stress interaction, and to maintain the problems after their onset.

The principle also applies to both “normal” and “abnormal” responses of individuals. That is, such models are also based upon the precept of a continuity of normal and abnormal cognitive processes. As Beck (1991) stated: “The [cognitive] model of psychopathology proposes that the excessive dysfunctional behavior and distressing emotions or inappropriate affect found in various psychiatric disorders are exaggerations of normal adaptive processes” (p. 370). At the same time, people can exhibit relatively habitual or stable patterns in the ways in which they appraise emotion-provoking stimuli (Abramson, Seligman, & Teasdale, 1978; Riskind et al., 2000; Weiner, 1985; Hong & Cheung, 2014). For example, some individuals habitually attribute failures to personal defects. As a result of these differences, people can differ in their future risk for developing particular kinds of emotional disorders or psychological problems.

Most theorists adopt a vulnerability–stress paradigm in which it is recognized that psychological disorders are caused by a combination of predisposing (constitutional or learned) and precipitating (environmental) factors. That is, precipitating events (e.g., stressful life events, early childhood traumas, a marital disagreement) can trigger the development of psychological problems or emotional disorders for certain individuals (Alloy, Abramson, Raniere, & Dyller, 1999; Hong & Cheung, 2014; Daryanani, et al., 2016), but the degree and even direction of response can differ enormously from one person to another. Thus, precipitating environmental events are particularly likely to produce psychological problems among individuals who have a preexisting cognitive vulnerability to the disorders. Indeed, most individuals who are exposed to precipitating stressful events do not develop disorders. And, when disorders or problems emerge, their specific nature differs for different individuals and is not determined just by the precipitating stress alone. For example, stressful events are elevated in depression (Brown & Harris, 1978; Paykel, 1982), bipolar disorder and mania (Johnson & Roberts, 1995), anxiety disorders (Last, Barlow, & O’Brien, 1984; Roy–Byrne, Geraci, & Uhde, 1986), and even schizophrenia (Zuckerman, 1999). Thus, cognitive vulnerability–stress models are offered to help account for not only *who* is vulnerable to developing emotional disorder (e.g., individuals with a particular cognitive style), and *when* (e.g., after a stress), but to *which* disorders (e.g., depression, eating disorder, etc.) they are vulnerable (Riskind & Alloy, 2006).

The study aims to determine the cognitive vulnerabilities and depression of the children with single parents and to relate them. Specifically, it sought to answer the following questions:

- (1) what are the levels of cognitive vulnerabilities of the respondents in terms of attitudes toward self, life orientation and hopelessness?
- (2) what are the levels of depression of the respondents as measured by the Beck Depression Inventory?

(3) is there a significant relationship between the profile of the respondents and their levels of depression?

(4) is there a significant relationship between the levels of depression of the respondents and cognitive vulnerabilities in terms of attitudes toward self-life orientation and hopelessness?

Theoretical Framework

The study was anchored from **Aaron Beck's Cognitive Theory of Depression**. According to Dr. Aaron Beck, negative thoughts, generated by dysfunctional beliefs are typically the primary cause of depressive symptoms. A direct relationship occurs between the amount and severity of someone's negative thoughts and the severity of their depressive symptoms. In other words, the more negative thoughts you experience, the more depressed you will become.

Beck also asserts that there are three main dysfunctional belief themes (or "schemas") that dominate depressed people's thinking: 1) I am defective or inadequate, 2) All of my experiences result in defeats or failures, and 3) The future is hopeless. Together, these three themes are described as the Negative Cognitive Triad. When these beliefs are present in someone's cognition, depression is very likely to occur (if it has not already occurred).

An example of the negative cognitive triad themes will help illustrate how the process of becoming depressed works. Imagine that a person has just been laid off from his/her work. If he/she is not in the grip of the negative cognitive triad, he/she might think that this event, while unfortunate, has more to do with the economic position of his/her employer than his/her own work performance. It might not occur to him/her at all to doubt himself/herself, or to think that this event means that he/she is washed up and might as well throw himself/herself down a well. If his/her thinking process was dominated by the negative cognitive triad, however, he/she would very likely conclude that his/her layoff was due to a personal failure; that he/she will always lose any job he/she might manage to get; and that his/her situation is hopeless. On the basis of these judgments, he/she will

begin to feel depressed. In contrast, if he/she was not influenced by negative triad beliefs, he/she would not question his/her self-worth too much, and might respond to the lay off by dusting off his/her resume and initiating a job search.

Beyond the negative content of dysfunctional thoughts, these beliefs can also warp and shape what someone pays attention to. Beck asserted that depressed people pay selective attention to aspects of their environments that confirm what they already know and do so even when evidence to the contrary is right in front of their noses. This failure to pay attention properly is known as faulty information processing.

Particular failures of information processing are very characteristic of the depressed mind. For example, depressed people will tend to demonstrate selective attention to information, which matches their negative expectations, and selective inattention to information that contradicts those expectations. Faced with a mostly positive performance review, depressed people will manage to find and focus in on the one negative comment that keeps the review from being perfect. They tend to magnify the importance and meaning placed on negative events, and minimize the importance and meaning of positive events. All of these maneuvers, which happen quite unconsciously, function to help maintain a depressed person's core negative schemas in the face of contradictory evidence, and allow them to remain feeling hopeless about the future even when the evidence suggests that things will get better (*Retrieved from <https://www.mentalhelp.net/depression/cognitive-theories/>*).

Methodology

The study used descriptive correlational design. It is descriptive since it described the behavior of the respondents. It is correlational since the study determined the relationship between the independent variable and dependent variable.

The respondents of the study are 150 children with single parents living in San Pablo City, Laguna in the Philippines. It used the purposive sampling technique. The criteria set in choosing the samples are: (1) the respondents must belonged to a family with

single parent; (2) aged between 15-30 years old; and (3) should have a score of above 30 in the Psychological distress test. Majority of the respondents are young adults (54%), female (70.67%), unemployed (67.34%) and raised by a single mother (66.67%).

The study used the five tests namely Kessler Psychological Distress Scale, Tet on Attitudes toward self, Life orientation test, Beck Hopelessness Scale and Beck Depression Inventory. The respondents answered the Kessler Psychological Distress Scale first. The children with single parents who have scored 30 and above in the test were oriented and requested to become study participants. Upon the given consent, participants were given the other four (4) tests for them to answer and were retrieved afterwards.

The study made used of the following statistical tools: frequency and percentage, mean and standard deviation and multiple regression.

Findings and Discussion

Figure 1

Level of Attitude towards Self

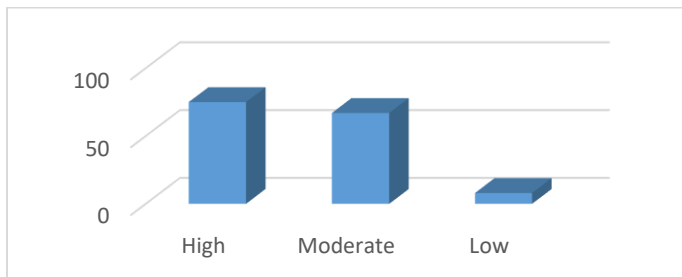


Figure 1 shows that 50% of the respondents have high level attitude towards self while only 5.33% have low level. This means that many of them are holding overly high standards, the tendency to be self-critical at any failure to perform well, and the tendency to generalize from a single failure to the broader sense of self-worth.

Figure 2

Level of Life Orientation

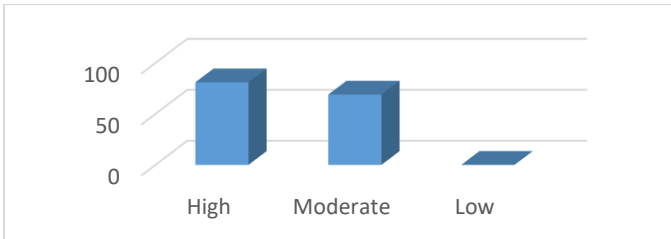


Figure 2 presents the respondents' high level of life orientation corresponding to the majority (54%) of the respondents. Interestingly, no respondents has low level of life orientation. This implies that majority of them expect more good things to happen to them than bad. These type of people show positive outlook in life.

Figure 3

Level of Hopelessness

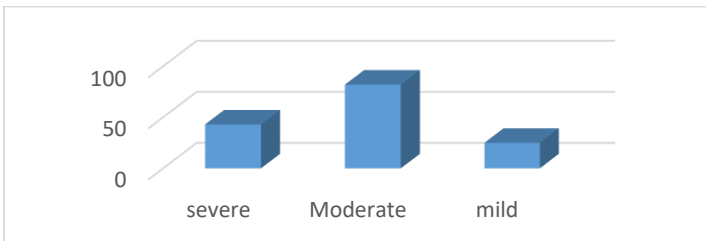


Figure 3 presents the level of hopelessness of the respondents. It shows that majority of them have moderate level of hopelessness with 54.67%, some have severe level with 28.67% and few have low level with 16.66% only. This implies that most of the respondents are sometimes pessimistic and are hopeless of the future.

Figure 4

Level of Depression

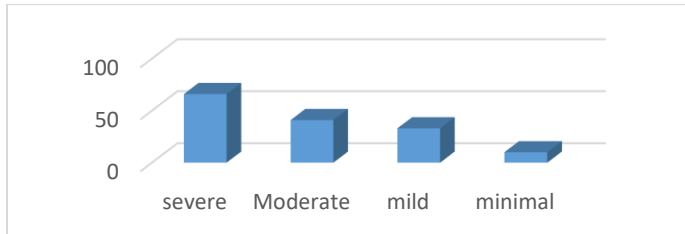


Figure 4 illustrates the level of depression of the respondents. It shows that many of them have severe level with 44% and few have mild and minimal level with 22% and 6.67%, respectively. It can be implied that respondents are often sad, have guilty feelings, thinks they are worthless and their past failure, have self-dislike, have suicidal thoughts and loss of interest.

Table 1

Correlation between Respondents' Profile and Depression

Profile	r- value	Interpretation
Age	0.142	Significant
Sex of respondents	0.0372	Not Significant
Occupation	0.170	Significant
Sex of parent	0.112	Not Significant
Family monthly income	-0.099	Not Significant

Legend: Critical value = 0.140268

Table 1 presents the correlation between the profile of the respondents and their depressive behavior. It shows that sex of respondents, sex of parents and family monthly income have no relations to the depressive behavior of the respondents. Meanwhile, age and occupation have significant relations with the depressive attitude of the respondents.

As to age, since $r=0.141516$ is greater than $CV=0.140268$, thus H_0 is rejected hence there is a significant relationship between age of the respondents and their depressive behavior. Since the correlation is positive, as the age of the respondents increases the level of their depression increases. In this study, the young adults who have single parents are more likely to be more depressed than the adolescents. Similar to the study of Twenge as cited by Boyle (2019), reported symptoms consistent with major depression increased by 52% among the teens and 63% among the young adults. Similarly, Becker (2020) found out that young adults ages 19 to 29 sometimes develop depression due to major life transitions, lack of support in new environments, lack of coping skills, relationship issues, poverty, trauma and work issues.

As to occupation, since $r=0.16969107$ is greater than $CV=0.140268$, the H_0 is rejected hence there is a significant relationship between the occupation of the respondents and their depressive behavior. This implies that the non-employed respondents are more likely to be more depressed than the employed respondents. People lose faith in themselves and become pessimistic the longer they are out of a job. According to Park, et al. (2016), the employed group showed lower late-life depressive symptom prevalence than the non-employed group among older Korean men. In addition, some second skill level occupations (clerks, plant and machine operators) were significantly associated with a lower risk of depressive symptoms after adjusting for general factors in older Korean men.

Table 2 presents the test of correlation between cognitive vulnerabilities and depression of the respondents. Among the factors which includes attitude toward self with p-value of 0.127, life orientation with p-value of 0.359, hopelessness with a p-value of 0.000, only hopelessness has a significant relationship with depression. This means that the depressive behavior of the respondents may be influenced by their hopelessness.

Table 2*Correlation between Cognitive vulnerabilities and Depression*

Factor		t-Stat	p-value	Interpretation
Attitude toward self	toward	-1.536	0.127	Not significant
Life orientation		0.920	0.359	Not significant
Hopelessness		5.693	0.000	Significant

Legend: $p < 0.05$, significant; $p > 0.05$, not significant

The hopelessness theory (Abramson et al., 1989) explains that expectation for highly desired outcomes will not occur or that highly aversive outcomes will occur and that there is nothing one can do to change this situation is a proximal sufficient cause of the symptoms of depression specifically hopelessness depression.

Conclusion

The study shows that children of single parents have high level of attitude toward self, high level of life orientation and moderate level of hopelessness. However, many of them have severe level of depression. It was further disclosed that age and occupation are significantly related to depression while hopelessness is significantly related to depression. The results proved that children of single parents suffer from emotional trauma due to the conditions. Thus, strong support system is necessary for them to adjust emotionally.

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