Evaluation and Comparison of Identity Style Scales and Mental Health in Indian and Iranian Adolescents Females

Hakimeh Aghaei 1, Waheeda Khan 2

1 Department of Education Sciences, Payam Noor Shahr Rey University, Shahr Rey, Iran
2 Professor, faculty of Social Science, Jamia Millia Islamia university, Delhi, India

ABSTRACT

Identity formation is observation of assessments and purposes of similar matters along with teenagers and includes main effect in making decisions, choosing values, stability and responsibility in life scales and keeping the internal stability as well. Identity constantly includes attributes such as normative data. Mental health and identity style based on Berzonsky and person always tries to find his personality. Available scheme is a survey on identity observation and its attributes in Iranian and Indian teenager girls that this order has comparatively accomplished. A used tool had been Berzonsky’s identity questioner and has been applied by using variance analysis and T test in comparison with effective significance and insignificance parameters toward people’s identity.

The purpose would be obtaining different identity scales such as informational, normative, dispersion scales and Indian and Iranian female adolescents physical, mental, social and behavioral problems be perused and be resulted.

KEYWORDS: Identity style, effective significance, mental health

INTRODUCTION

Identity has two important features: continuity and contrast. Continuity means that people can count on you to be the same person tomorrow as you are today. Obviously, people change in various ways, but many important aspects of social identity remain relatively stable, such as a gender surname (though some woman elect to change this when they marry), language, ethnicity, and socioeconomic status. Other aspect of identity can change, but do so gradually, lending some sense of continuity, e.g. education and material status. Other aspects of identity refer to behavior patterns that are public, such being an athlete, a delinquent, or a party animal, which also contribute to a sense of continuity (Baumeister & Muraven 1996).

The model is based on the constructive assumption that people actively play a role in constructing both who they think they are and the reality within which they live. Berzonsky (1993) noted to understand experiences, people from personal constructs that govern selection, organization, and understanding of environmental stimuli. Facts are not inherently meaningful; they are always interpreted within a system of constructs. Personal interpretations of events, not events-in-themselves constitute a person’s reality. This does not imply that people can arbitrarily make up any identity that strikes their fancy. The model is grounded in a critical version of constructivism that assumes the existence of an empirical reality separate from the people who live and interact within it. Reality however, cannot be directly perceived or understood. A person’s cognitive structures influence what information is attended to encoded, and interpreted. External reality, however, constrains the viability or effectiveness of the constructs or theories that are generated: self and reality are co-constructed (Berzonsky 1993).

The issue of adolescent mental health can be seen from many overlapping angels. For the promotion of their positive mental health, it is, therefore, necessary to understand and empirically evaluate their ideation, ideals, value system and the significant person ideologies and social institute affecting them or appealing to them. The mental health of children foreshadows the mental health of future generation of adults. Child and adolescent mental health services are a small part of the responsibilities of health and local authorities but the implication of poor attention to children’s and young people’s mental health are not only their and their families continual suffering, but also a continuing spiral of child abuse, juvenile crime, family breakdown and adult mental illness, aloof of which can lead to more child and adolescent mental health problem. The theme for mental health week for the year 2003 was “Emotional and behavioral problems of children and adolescents”. 37% of the population in India in is under the age of 18 years (WHO 2001).

Main body

A person may display either relative weakness or relative strength in terms of both exploration and commitments. When assigned categories, four possible permutations result: identity diffusion, identity foreclosure,
identity moratorium, and identity achievement. Diffusion is when a person lacks both exploration in life and interest in committing even to those unclosing roles that he or she occupies. Foreclosure is when a person has not chosen extensively in the past, but seems willing to commit to some relevant values, goals, or roles in the future. Moratorium is when a person displays a kind of flightiness, ready to make choices but unable to commit to them. Finally, achievement is when a person makes identity choices and commits to them (Cote and Levin, 2002).

Social-cognitive model of identity is conceptualized as a self-theory, a conceptual structure composed of self-representational and self-regulatory constructs. It is postulated that individuals have different identity processing styles and function as different types of self-theorists: information–oriented problem solvers and decision markers, normative types who conform to the prescriptions of significant others, and diffuse-avoidant theorists who procrastinate and attempt to avoid dealing with identity-relevant conflicts. The role that personal epistemic assumptions play in self-theorizing and the possibility that epistemic assumptions contribute to individual differences in identity style are considered.

Over the past four decades most identity research has been conducted within the identity status model developed by Marcia (1988). Although Marcia defined identity in terms of the processes of self exploration and commitment, most research has focused on the statuses as personality types or differential outcomes.

Social-Cognitive Process Model of Identity focuses on characteristics of individual with different identity status. The social cognitive process model highlights the role that social-cognitive strategies and processes play as individuals engage in or manage to avoid the processes of constructing and revising a sense of identity. According to this view identity is conceptualized as structure as well as process. Identity as a cognitive structure serves as a personal frame of reference for interpreting experience and self-relevant information and answering questions about the meaning, significance, and purpose of life. As a process, identity directs and governs the resources adolescents use to cope and adapt in everyday life (Berzonsky 1990). When adaptive efforts fall short, negative feedback may create a need to revise or modify aspects of the identity structure. Accordingly, identity development is considered to involve an ongoing dialectical interchange between assimilative processes governed by the identity structure and accommodative processes directed by the social and physical context within adolescents live and develop. The model also postulates differences in how adolescents deal with or manage to avoid the tasks of maintaining and revising their sense of identity (Berzonsky 1993). They rely on different social–cognitive processing orientations, or identity styles (Berzonsky 1990). These processing style reflect strategic differences in how individuals make decisions, deal with personal problems, and govern and regulate their lives.

Mental, social and behavioral health problems may interact to intensify each other’s effects on behavior and well-being. Substance abuse, violence and abuses of women and children on the one hand, and health problems such as heart disease, depression and anxiety on the other, are more prevalent and more difficult to cope with in conditions of high unemployment, low income, limited education, stressful work conditions, gender discrimination, unhealthy lifestyle and human rights violations. Mental health for each person is affected by individual factors and experiences, social interaction, societal structures and resources and cultural values. It is influenced by experiences in everyday life, in families and schools, on streets and at work (Lahtinen, Riikonen & Lahtinen 1997).

The mental health of each person in turn affects life in each of these domains and hence the health of a community or population. Some of the newest research across the disciplines of genetics, neuroscience, the social sciences and mental health involves elaborations of ideas about the impact societies have on human life over and above the sum of the impact of the individual members of the society.

In particular, Berzonsky (2002) identified three identity-processing orientations that are defined by exploration and commitment: diffuse-avoidant, normative, and information. Individuals with a diffuse-avoidant orientation possess low levels of self-exploration and commitment; when faced with challenging situations, these individuals are reluctant to confront personal problems and often procrastinate making decisions. Adolescents who have a normative orientation possess high levels of commitment and low levels of self-exploration; those with this orientation tend to be closed-minded and focus primarily on the standards and expectations of significant others. Finally, individuals with an information orientation possess a high level of self-exploration and either high or low levels of commitment; these adolescents are introspective and actively seek out, process, and utilize self-relevant information.

The need for paying attention to self-respect and people’s identity styles felt as a related factor, this research would take a step towards growing self-respect while identifying the importance of identity styles. The research reviewed suggests that adolescents may be differentiated in terms of their identity processing style. As such, we believe that adolescents’ varying degrees of self-identity development have implications for the differences in adolescents’ psychological health. At any age, a person’s identity serves as an information-processing filter those structures the activation of identity-relevant information. The concepts and information relevant to the self also have an instrumental influence on decisions to pursue particular goals. While all individuals have some sense of identity, individuals vary in the degree to which they possess a stable sense of self.
Secker (1998) remarks that self-contained or possessive individualism explains the view that other persons do not participate in the making of the subjectivity of a person but exist merely as a part of one’s context and have instrumental value like any other object. Thus the contextualized perspective construes self with a more permeable boundary and one that is socially constituted. Here, the self is conceived as dialogical and enacted in the social space. The individual is seen as critically related and connected to others. Self does not merely have a social origin and is not only socially embedded, but its nature is primarily relational (Gergen, 1994).

While the studies on self and identity invoke group or larger socio-historical milieu as contexts, traditional research concerns of social psychology invoke the concepts of self and identity as crucial texts of organizing their engagement with group and group life. Since research from disparate cultures offer divergent perspectives on self, attending to them can help not only understand those cultures but also encourage looking for other options. It is a serious question because in many of the applied areas like clinical counseling, community, health and the like, understanding of self and identity issues is a prerequisite.

**METHODOLOGY**

A total sample of 240 adolescents, 120 each from India and Iran, with equal number of boys and girls (i.e. 60 in each group) were randomly selected from the school of Delhi and Iran in the age range of 14-17 years. The detail distribution of the sample is given in Table 1

<table>
<thead>
<tr>
<th>Country Gender</th>
<th>India</th>
<th>Iran</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>60</td>
<td>60</td>
<td>120</td>
</tr>
<tr>
<td>Female</td>
<td>60</td>
<td>60</td>
<td>120</td>
</tr>
<tr>
<td>Total</td>
<td>120</td>
<td>120</td>
<td>240</td>
</tr>
</tbody>
</table>

Data has been obtained by Identity Style Inventory (ISI3) questionnaire. In this research

**Identity Style Inventory:**

Forty-item Identity Style Inventory (ISI3) developed by Berzonsky (1997) was employed to assess three identity-processing styles. Respondents completed items on a Likert scale (1 = strongly disagree; 5 = strongly agree). To create a categorical measure of identity processing style, scores on the three styles were standardized and the style that received the highest score defined an adolescents’ identity processing style. The details of item No and alpha coefficients (test-retest) for four dimensions are given below:

<table>
<thead>
<tr>
<th>S. No</th>
<th>Dimensions</th>
<th>Item Number</th>
<th>Alpha Coefficients (N=94)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Informational-</td>
<td>2, 5, 6, 16, 18, 25, 26, 30, 33, 35, 37</td>
<td>0.87</td>
</tr>
<tr>
<td>2.</td>
<td>Normative-</td>
<td>4, 10, 19, 21, 23, 28, 32, 34, 40</td>
<td>0.87</td>
</tr>
<tr>
<td>3.</td>
<td>Diffuse/avoidant</td>
<td>3, 8, 13, 17, 27, 29, 31, 36, 38</td>
<td>0.83</td>
</tr>
<tr>
<td>4.</td>
<td>Commitment</td>
<td>1, 7, 9*, 11*, 12, 14*, 15, 20*, 22, 39</td>
<td>0.89</td>
</tr>
</tbody>
</table>

*For scoring purpose these items are reversed

**Informational:** It is typical of adolescents who engage in process of exploration by seeking out and evaluating information that is relevant for their identity before making committed decisions. Adolescents are critical toward their self-concepts, open to new information, and willing to revise aspects of their identity when faced with discrepant information about themselves. This should result in well-differentiated and integrated sense of personal identity. In sum, this identity style is characterized both by (a) high levels of self-reflection and active information-processing and (b) by openness towards new information.

**Normative:** It is related with who rely on the norms and expectations held by significant others (such as parents and authority figures) when confronted with identity-relevant information or problems. These individuals are closed to information that threatens their hard-core values and beliefs and they attach a lot of importance to preserving their rigidly organized and committed identity. In sum, they are hypothesized to have inflexible belief and value systems and to conform to traditional and conservative opinion.

**Diffuse/Avoidant:** It is typical of adolescents who avoid personal issues and procrastinate decisions until situational demands dictate their behavior. These individuals would accommodate their identity in function of the changing social demands, without arriving at a well-established identity. This identity style results in a fragmented
and loosely integrated identity structure. Most characteristic of the diffuse/avoidant identity style is a low level of active information processing and problem-solving.

**Commitment**: It is refers to personality’s responsibility, constancy of its decisions, optimism, increased self esteem, sense for duty, personal adaptability, goals and values.

### 3. Youth Self Report:

Youth Self Report (YSR) is derived from child behavior check list known as CBCL and is designed for use with adolescents between the ages of 12 and 18, the adolescent himself/herself fills out the form. YSR contains two sub-areas: (a) 20 competence items that measure the child’s participation in hobbies, games, sports, jobs, chores, friendship, and activities and (b) 112 items that measure eight sub-scale symptoms: withdrawn, somatic complaints, anxiety and depression, social problems, thought problems, attention problems, aggressive behavior and delinquent behavior (Achenbach 1991).

The first three subscales are referred to as internalizing, whereas the next two are referred as an externalizing. The remaining three scales are categorized as neither internalizing nor externalizing. Overall behavioral and emotional functioning are measured by the total problem scale. An adolescent selects his or her response from 0 (not true) to 2 (Very true or often true). A single new, easy-to-use Manual tells you about all three forms, their competence, adaptive, and problem scales, their DSM-oriented scales, their profiles, and how to use them. The details of no. of items for each dimension are given below.

1. **Anxious Depressed**: (Item No.14,29,30,31,32,33,35,45,50,52,71,91,112)
2. **Withdrawn depressed**: (Item No.5,42,65,69,75,102,103,111)
3. **Somatic Complains**: (Item No.47,51,54,56a,56b,56c,56d,56e,56f,56g)
4. **Social Problem**: (Item No.11,12,25,27,34,36,38,48,62,64,79)
5. **Thought Problem**: (Item No.9,18,40,46,58,66,70,76,83,84,85,100)
6. **Attention Problem**: (Item No.1,4,8,10,13,17,41,61,78)
7. **Rule Breaking Behavior**: (Item No.2,26,28,39,43,63,67,72,81,82,90,96,99,101,105)
8. **Aggressive Behavior**: (Item No.3,16,19,20,21,22,23,37,57,68,86,87,89,94,95,97,104)

**Internalizing**: (includes anxious depressed, withdrawn depressed and somatic complaints)

**Externalizing**: (includes Rule-Breaking Behavior and Aggressive Behavior)

Reliability: Achenbach (1991) reported the mean 7 day test-retest reliability for the problem scales was 0.65 for 11 to 14 year old adolescents and 0.83 for 15 to 18 year old adolescents. Internal consistencies for symptom scales ranged from alpha 0.68 for social problems to alpha 0.89 for externalizing problems and alpha 0.91 for internalizing problems. This study yielded a reliability alpha at 0.86 for YSR when the scores of eight symptoms were used for reliability test.

<table>
<thead>
<tr>
<th>Measures</th>
<th>Identity</th>
<th>Indian Adolescents</th>
<th>Iranian Adolescent</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>mean</td>
<td>sd</td>
<td>mean</td>
</tr>
<tr>
<td>Informational</td>
<td></td>
<td>44.20</td>
<td>12.22</td>
<td>47.33</td>
</tr>
<tr>
<td>Normative</td>
<td></td>
<td>50.05</td>
<td>9.97</td>
<td>47.95</td>
</tr>
<tr>
<td>Diffuse</td>
<td></td>
<td>47.03</td>
<td>10.50</td>
<td>43.52</td>
</tr>
<tr>
<td>Commitment</td>
<td></td>
<td>51.83</td>
<td>9.45</td>
<td>44.07</td>
</tr>
<tr>
<td>Identity</td>
<td></td>
<td>49.83</td>
<td>10.00</td>
<td>51.03</td>
</tr>
</tbody>
</table>

**Table 2**: Mean SD and T values on the measures of identity style for Indian and Iranian female adolescents

Regarding table 2 in relation with Informational attribute of identity is specified that Indian female have lower mean level than Iranian female but about other identity attributes could say that Indian female have higher mean level than Iranian female.
Table 3-inter-correlation coefficients among the various dimensions of, identity style and mental health of female adolescents (N=120)

According to table 4, it could be announced that interdependence coefficients is observed among 120 people between dimension and different attributes of identity Style.

DISCUSSION

Berzonsky (2002) by designing a research along this research concluded that significant attributes of people who have anxious identity would have low process of data and solving matters that is approximately is along this scheme’s result. WATERMAN (2006) stated that unlike positive acceptance of people toward identity structure, it could be announced that identity structure is a descriptive and global quality and its descriptive power has already be ignored. Hopkins, Reicher (2005) stated that culture and identity both need effort along with accordance. therefore, it is essential to present thorough image of identity at different cultural, time and social periods. Baumeister (1987) considered specified form of socialism and mentality and announced that human’s progress is fundamentally along with identity formation and its significance with culture and different formations of personal progress would occur via cultural and historical incidents. also, same opinion of this scheme was in a way that different forms of socialisms made mentality advancement and definitely improves mentality.

Conclusion

Result show that negative interdependence between identity’s attributes and mentality’s problems exist, means that female adolescents involved of low mentality problems such as mentality annihilation, unhealthy thoughts, abnormal beliefs, etc and their identity is a coherent identity. it is specified during this scheme that Iranian teenagers prefer to be alone. Teenagers mostly try to make decisions and put their identity along with society’s alterations and demands. In these cases, they can think truly so their identity would become unstable. Therefore, the essential point is that girl teenagers have healthy identity and generally could think comfortably and they could be recalled responsible people because they search for their identity evolution and this is more obvious among Indian adolescences.

Limitations and suggestions
1-This research focused on students of BAMIA’s school in India and NOOR, HESABI, HAZRAAT ZAHRA schools in Iran
2-This research’s discoveries couldn’t be generalized to other schools because this research just belongs to one Indian school and three Iranian schools.
3-Other factors of related population hasn’t been involved in this research.
4-long duration study from adult students of Rou School and of high school up to higher levels could give more information about their identity and mental safe situation.
5-Needing to attention and concentration on positive mental safe of students and adult student of Rou School is obvious.
6-Identity style has been studied at extensive level but it seems that more research is necessary about gender, age and culture among adult
7-It’s necessary to organize workshops for developing mental health and self imagination of adults.
REFERENCES


