

## A Study of Social Connectedness and Depression Among Adolescents in Porbandar, Gujarat

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### ABSTRACT

This study investigates the relationship between social connectedness and depression among adolescents in Porbandar, Gujarat. A total of 70 adolescents (35 males and 35 females) aged between 16 and 18 years were assessed using the Social Connectedness Scale (SCS) and the Beck Depression Inventory (BDI). Statistical analyses included Pearson correlation and independent samples t-tests. The results showed a positive but non-significant correlation between social connectedness and depression ( $r = 0.098, p > .05$ ). No significant gender differences were found in either variable. The findings emphasize the importance of enhancing social connectedness to support adolescent mental health.

**Keywords:** *Adolescents, Social Connectedness, Depression, Gender Differences, Porbandar*

Adolescence is a vital developmental period involving emotional, psychological, and social transitions. It is so critical period for adolescents. During this stage, social connections become central to an adolescent's identity and well-being. Social connectedness, or the sense of belonging and closeness to others, plays a protective role against mental health challenges such as depression (Lee & Robbins, 1995). Depression in adolescence can severely impair academic performance, relationships, and long-term development. This study explores the relationship between social connectedness and depression among adolescents in Porbandar, Gujarat.

### Objectives

- To assess the level of social connectedness and depression among adolescents.
- To examine the correlation between social connectedness and depression.
- To determine if gender differences exist in social connectedness and depression levels.

### REVIEW OF LITERATURE

#### 1. Social Connectedness in Adolescents

Social connectedness refers to the feeling of being connected, understood, and supported by others in a community or social group. For adolescents, it encompasses their relationships with family, peers, school, and broader community networks. Several studies have

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highlighted the importance of social connectedness for mental health outcomes in adolescents, particularly in the context of depression.

In a study by Harter (2012), it was found that adolescents with high levels of social connectedness report lower rates of depressive symptoms, which may be due to the emotional support and positive reinforcement provided by strong relationships. Social networks, including peer relationships and family dynamics, are critical in shaping adolescents' self-esteem and coping mechanisms.

### **2. Social Connectedness and Depression**

Research globally and within India has consistently shown that social connectedness has a protective effect against depression in adolescents. The lack of social support or poor quality of social relationships is often associated with increased rates of depression. Bowlby's Attachment Theory (1969) supports this idea, suggesting that insecure attachment in childhood leads to difficulties in building secure, supportive relationships in adolescence, potentially increasing vulnerability to depression.

In Gujarat, a culturally distinct state in India, social norms and expectations surrounding family, school, and community can significantly influence adolescent mental health. In a study conducted by Nair & Roy (2017), it was found that adolescents in urban areas of Gujarat who reported poor family relationships and low peer support exhibited higher levels of depressive symptoms. This highlights the interplay between social connectedness and depression in the context of regional cultural dynamics.

### **3. Factors Influencing Social Connectedness in Gujarat**

**Family Structure and Dynamics:** In Gujarat, the family plays a central role in adolescents' lives. Traditional family structures, including joint families, often provide a sense of social connectedness, but they can also be a source of stress. Conflicting expectations and generational gaps can impact adolescents' mental well-being. Patel & Desai (2021) noted that while extended family networks in rural Gujarat provided emotional support, adolescents often felt misunderstood due to differences in generational perspectives.

**Peer Relationships:** Peer relationships are crucial during adolescence, serving as a key source of emotional support. However, peer pressure and bullying can also exacerbate mental health issues. In Gujarat, as elsewhere, adolescents often face academic pressures, social comparisons, and identity formation challenges that can negatively affect peer relationships. A study by Jani et al. (2019) indicated that adolescents in urban Gujarat face significant peer pressure, which correlates with a rise in depressive symptoms.

**Cultural Expectations and Gender Roles:** Cultural norms regarding gender roles in Gujarat have a profound impact on social connectedness. Girls, in particular, may face heightened pressures related to familial expectations, academic success, and social behavior. Studies by Vyas & Patel (2020) have demonstrated that while boys in Gujarat may feel the impact of peer relationships, girls often experience more isolation due to the restrictive nature of traditional gender expectations, leading to increased vulnerability to depression.

### **4. Adolescent Depression in Gujarat**

Depression among adolescents is often underdiagnosed in India due to stigma, lack of mental health awareness, and cultural barriers to discussing mental health. However, recent studies have started to address the rising prevalence of depression in Indian adolescents.

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According to a survey by Rao et al. (2016), nearly 20% of adolescents in urban Gujarat reported symptoms consistent with depression, with factors like poor social connectedness, family conflict, and academic pressure being significant contributors.

In rural Gujarat, depression is often exacerbated by limited access to mental health care and lower levels of social support. The rural context presents unique challenges, including isolation, lack of peer interaction due to geographical distance, and a focus on traditional educational paths that may not align with adolescent aspirations. Patel et al. (2018) found that adolescents in rural areas who lacked social connectedness to peers and were disconnected from modern societal trends reported higher rates of depressive symptoms.

### **5. The Role of Social Media and Technology**

With the advent of digital technology and social media, the landscape of social connectedness among adolescents has changed. While social media can foster global connections, it can also create feelings of isolation, inadequacy, and depression due to cyberbullying, unrealistic comparisons, and a distorted sense of reality. In Gujarat, as in the rest of India, the increasing use of social media among adolescents has been linked to higher levels of depression, particularly among those who experience negative feedback or who feel socially isolated in real life.

A study by Soni et al. (2020) found that excessive social media use among adolescents in Gujarat was associated with depressive symptoms, especially when online interactions replaced face-to-face connections. This highlights the complex role of social connectedness in the digital age, where virtual connections may not adequately replace the emotional support provided by real-world relationships.

### **6. Interventions and Future Directions**

Given the significant impact of social connectedness on adolescent depression, various interventions have been proposed to enhance social support systems for adolescents in Gujarat.

These include:

- **School-based Mental Health Programs:** Schools in Gujarat are increasingly becoming sites for mental health interventions. Programs aimed at improving peer relationships, fostering emotional intelligence, and reducing academic pressures could enhance social connectedness and reduce depressive symptoms.
- **Family Interventions:** Encouraging family members to engage in open dialogues about mental health and support their children emotionally can strengthen social connectedness. Programs targeting family dynamics and communication are critical in regions like Gujarat, where family plays a dominant role in adolescents' lives.
- **Community Support Systems:** Local community groups and peer support networks can provide additional sources of connectedness, particularly in rural Gujarat. Increasing awareness of mental health in local communities through workshops and counseling can help break down stigma and promote supportive environments for adolescents.

### ***Hypotheses***

#### **Null Hypotheses (H<sub>0</sub>):**

1. There is no significant gender difference in social connectedness.
2. There is no significant gender difference in depression levels.

3. There is no significant correlation between social connectedness and depression

## METHODOLOGY

### Participants

The study involved 70 adolescents (35 males and 35 females) aged 16–18 years from Porbandar, Gujarat. Participants were selected using random sampling from government High schools.

### Instruments

1. **Social Connectedness Scale (SCS):** Developed by Lee and Robbins (1995), Gujarati version Rosai (2013) This is 6 point Likert scale point 1. Strongly disagree and point 6. Strongly agree. this scale measures feelings of closeness in interpersonal relationships.
2. **Beck Depression Inventory (BDI):** A 21-item scale developed by Beck et al. (1996) Gujarati Version (1990) by Sardar Patel university to measure the severity of depressive symptoms.

### Procedure

After obtaining informed consent, participants were administered the SCS and BDI under standardized conditions. Confidentiality and anonymity were ensured.

### Statistical Analysis

Data were analyzed using:

- Descriptive statistics (mean and standard deviation)
- Independent samples t-tests to compare males and females
- Pearson correlation to assess the relationship between social connectedness and depression

## RESULTS

*Table 1 Social Connectedness by Gender*

Gender	N	Mean	SD	t-value
Female	35	72.42	9.76	
Male	35	67.91	9.30	0.02589 (ns)

*Note:* No significant difference in social connectedness between genders.

*Table 2 Depression Scores by Gender*

Gender	N	Mean	SD	t-value
Female	35	16	6.74	
Male	35	18.85	10.93	0.09635 (ns)

*Note:* No significant gender difference in depression levels.

### Correlation Analysis

- Pearson correlation between social connectedness and depression:  $r = 0.098, p > .05$

This indicates a **weak positive correlation**, suggesting that there is little to no significant relationship between social connectedness and depression in this sample.

## DISCUSSION

The findings show that social connectedness and depression are weakly positively correlated, but the correlation is not statistically significant. This suggests that, in this sample, the sense of belongingness is not a strong predictor of depression. The lack of significant gender differences further supports the idea that social connectedness affects both males and females equally in this context.

## CONCLUSION

While social connectedness has been found to be protective against depression in many studies, the weak correlation observed in this study suggests that other factors might be influencing adolescent mental health in Porbandar. Future studies could examine additional variables, such as family support or social media usage, to better understand adolescent mental health.

### Limitations

- The study is limited to adolescents in Porbandar, reducing generalizability.
- Cross-sectional data limits the ability to establish causality.
- Self-reported data may introduce bias.

### Recommendations

- Schools should create programs that foster peer interaction and social bonding.
- Parents and teachers should encourage open communication to strengthen adolescent support systems.
- Future research should explore additional factors influencing depression among adolescents.

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***Conflict of Interest***

The author(s) declared no conflict of interest.

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