

Assessment of the Depression-level effectiveness of the Curse Words in Young Adults in Private Co-Educational Pharmaceutical Institutions in Pune University, India: A Preplanned, Causal-Pathway-Based Analysis



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Abstract

Depression and substance abuse is on the increase all over the world. The poor and the rich are also involved in this dangerous habit has impact not only on reproductive health but also has impact on family, society, increase in health care expense and increased criminal activity. Health care providers are more concerned with treating the victims and less concerned on its prevention. Pregnant women bear a greater brunt and there is adverse pregnancy outcome. Low birth weight, preterm labor, increased in miscarriage and raised perinatal mortality is some of the adverse effects. Children of such parents are more likely to inherit this bad trait. Children living in abusive homes where drugs and alcohol abuse occur simultaneously are often deprived of more than just the basics of food and shelter. Depression is defined as, "Any act on the part of the husband, partner or family which causes physical, mental, social or psychological trauma to the woman and prevents her from developing her personality." Reason for the increase in depression violence are; urbanization, industrialization, growth of urban slums, co-education and co-working in offices and factories, modern movies, television, obscene and pornographic literature and decreasing religious restrictions.

Keywords: Cursing; Depression; Anger; Young Adults; Curse Words; Abuse

Introduction

As we aware sex lives in black mind [1,2]. The research investigated whether young adults' use of curse words are related to depression and anger. Prior research has suggested links between the use of curse words and anger and between depression and anger. In a large study involving university undergraduates, we assessed depression, frequency of curse word usage, and expressive anger. The results showed that for women, but not men, the relationship between the use of curse words and depression was mediated by anger [3,4]. Cursing was not significantly related to depression in men. These results suggest that the use of curse words may be useful in identifying women experiencing depression symptoms non-clinical investigation in privately manage co-educational pharmaceutical institution in pune university. Implications for using verbal behaviors as indicators of depression are discussed. Depression is a mental illness that affects approximately 350 million people each year (Reported World Health Organization,

2016). Prior research has shown that anger can be a major symptom in those experiencing depression. Verbal behavior is an important source of information about individuals seeking mental health treatment, such as those seeking treatment for depression. The focus of the present research was to investigate the extent to which depression lead to the use of some forms of verbal behavior, such as use of curse words examination had been done dilation of pupil, skin tone of women. The effects that depression has on both the individual and society are far-reaching. Depression significantly decreases quality of life at the individual level. Recent economic analyses have shown that the cost of major depressive disorder in the India particular pharmacy institution in private for personal benefit has goes up in 2017, taking into account direct, suicide-related, and workplace costs.

Factors such as decreased productivity at work and increased health care costs to employers have increased over time as

depressive disorders have become more widespread. The World Health Organization estimates that depression will be the second most prevalent disorder in the world if it continues to increase at the current rate (WHO, 2016). According to the Diagnostic and Statistical Manual- Fifth Edition (2013), major depressive disorder (MDD) and related depressive disorders are characterized by persistent. Depression has also a relationship between age variation in heterosexual attraction and using depressive words to expressed forced sex and abuse habit [5,6]. Depressive symptoms that affect normal functioning, such as loss of interest or pleasure, loss of happiness, loss good looking, loss of easy smile, dirty body smell, unhygienic staff, and loss of health principal in previously enjoyed activities and disturbance of mood and acidity personality, personality of urine disorder and cancer prone personality is also a extended cause of depression in middle age staff of pharmacy institution. A variety of other possible symptoms such as change in weight or appetite, disordered sleep, and fatigue, skin rashes and lupus may also present. Major depressive disorder is characterized by symptomology for at least two weeks, whereas longer lasting mood disorders such as persistent depressive disorder (previously medical science called dysthymia) can last for up to five years, with depressive symptoms similar to MDD. Depression occurs comorbidly with a variety of other psychological and physical conditions, such as anxiety and chronic illness that can define by the body structure, body asymmetry and body line. Young adults such as college students are diagnosed with depression at a very high rate, and depression has been identified as the number one health problem among college students. Not everyone who is depressed seeks treatment or perceives the need to seek treatment. Lack of treatment leads to decreased quality of life and increased economic burden associated with depressive disorders. Current estimates suggest that of individuals who are experiencing depressive symptoms, only 70-75% seek treatment. Common reasons for not seeking treatment include inability to access treatment due to financial or untold, stigma due to cultural expectations, embarrassment, or a need to cope with issues internally without the help of others. Alternatively, some individuals may not perceive the severity of their depressive symptoms to be great enough to seek treatment. While symptoms such as low mood, fatigue, and sleep issues, inability of love are somewhat commonly known to be associated with depression, there are some symptom patterns that may not be as familiar. For example, lack of ability to concentrate, memory problems, and physical symptoms such as gastrointestinal issues or migraines can also be indicators of depression. Irritability and anger can be symptoms of depression. Externalizing behaviors such as these may be expressed as self-destructive behavior, such as risk-taking and substance abuse, especially for men. It has been well documented that there are sex differences in the symptoms of depression unawareness of love sex [7,8].

Women are more likely to exhibit higher levels of internalizing symptoms (e.g., stress, rumination), while males are more likely to exhibit more externalizing symptoms (e.g., aggression). In addition,

women are more frequently diagnosed with depressive disorders and depressive symptoms for females are found to be more severe that comes under not to true principal of health. In a 2015 study, college of pharmacy Pune University found that, in a large sample of individuals diagnosed with Major Depressive Disorder (MDD) females had higher reported levels of comorbidity and symptom severity including symptoms such as: weight gain, anxiety, and suicidal ideation. It has been suggested that the increased negative symptomology experienced by females when compared to males might be due to ovarian hormones and varying levels of sensitivity to adrenal hormones in the hypothalamic-pituitary-adrenal (HPA) axis when exposed to stress. Other explanations pertaining to the sex-differences between depression symptoms and behavior have focused largely on cultural gender socialization. Specifically, in western cultures, males are more frequently socialized to believe that it is more socially acceptable to exhibit anger while females are not this could be why depressed males engage in more externalizing symptoms (i.e., aggression) than females. The purpose of the present research was to test the hypothesis non-clinical investigation that individuals who are experiencing depression symptoms produce some forms of verbal behaviors, such as use of curse words. We further hypothesized that the relationship between cursing and depression may be mediated by anger. Separate lines of research have shown that anger is related to depression and that anger is related to cursing with higher levels of anger related to higher levels of both depression and cursing. The body of literature documenting the relationship between anger and depression is vast. The link between anger and depression was known. The degree of anger and severity of depression are positively correlated. Aggression, irritability, and hostility are related terms that refer to anger directed outwardly [9,10]. The cognitive act of rumination mediated the relationship between depression and anger in a nonclinical community sample of adults, suggesting that anger and depression interact in a way that is characterized by both internal and external manifestations. Indeed, found that cognitive components of anger/hostility predicted increases in depression among a sample of nonclinical older adults. Anger mediated the relationship between college students' emotion regulation abilities and their depression. The students were a nonclinical sample, similar to the one reported in the present study. The relationship between anger and cursing has been substantially examined as well. Primary purpose of cursing is to express emotions such as anger, and to portray that emotion to others through the verbal behavior of cursing. Cursing has been shown to have a dampening effect on intense feelings of anger and frustration, providing an outlet for expression without requiring the person to necessarily engage in aggressive physical acts to channel the emotion. Points out that the intensity of curse words can be adjusted [11,12].

Method

Participants

Fifty five (20 women, 25 men) undergraduates who were enrolled in courses in the department at RD College of Pharmacy

affiliated to Pune University Pune participated in exchange for course credit. The sample was 8% White, 5% Black, 6% Obese; 5% unsymmetrical body; 1% living with poor sanitation, and 1% indicated other including adult. Sixty five percent of the sample reported high family income to be 60,000 or more.

Materials

Participants completed survey in which the use of curse words, depression symptoms, anger, and demographics were assessed. We assessed participants' use of curse words using the self-report method described by researcher (2017). Participants were asked to rate the frequency with which they used 20 curse words used frequently by Marathi speakers (i.e., Bhikari, do not respect, fake smile, showing up high style, do not come to college, bastard, bitch, go to home, Nitch). Frequency of usage was rated on a 6-point scale (1 = never, 2 = rarely, as in once or twice a year, 3 = occasionally, as in once or twice a month, 4 = about once or twice a week, 5 = about once or twice a day, and 6 = three to five times a day, and 7 = more than five times a day).

Procedure

Participants viewed the invitation to participate in the study on SONA, which directed them to the survey which was implemented with a professional license of SurveyMonkey.com

Result

The research examined the relationships among use of curse words, anger, and depression symptoms in order to determine whether cursing may be predictive of depression symptoms in young adults. The results confirmed that for women, the relationship between use of curse words and depression symptoms was mediated fully by expressive anger. For men, the relationship between depression and use of curse words was not significant. The present research had many similarities in findings with previous research. First and foremost, the present study found that females reported higher levels of depression than males. I would like to request Hon'ble Present Prime Minister of India to stop approval of course who has poor level sanitation, low level oxygen uptake, abuse words used by head of the department, I would also like to request Hon'ble present prime minister to check the Ashaaram pattern in private Pharmaceutical Institution in Pune University, India.

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