

Theories of Intelligence and Depression Among American Indian Youth

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Research-in-Progress



Introduction

There are many factors that may correlate with depressive symptoms in American Indian (AI) youth, including theories of intelligence, academic self-efficacy, cultural identity, and goal orientation. An *incremental* theory of intelligence suggests that intelligence is malleable, whereas an *entity* theory of intelligence suggests that intelligence is fixed and cannot be changed. Beliefs about the nature of intelligence can lead to differing goal orientations. That is, an incremental theory of intelligence may lead to a *learning* goal orientation, where individuals adopt the goal of improving ability. Conversely, an entity theory of intelligence may lead to a *validation* goal orientation, where individuals adopt the goal of demonstrating ability in efforts to gain validation from others (Dweck & Legget 1989). Validation goal orientations have been shown to predict higher levels of depression.

Statement of the Problem

This study will examine the possible direct and indirect relationships between theories of intelligence, goal orientation and depressive symptoms in efforts to identify some important causes of depression symptoms in AI youth.

Methods

- This sample includes 190 AI youth attending grades 7-12 on reservations located in the Northern Plains of the United States and Alaska.
- This study will examine archival, self-report survey data with measures including:
 1. **CDI – Children’s Depression Inventory**
 - 27 items were used to measure cognitive, affective, and behavioral depressive symptoms.
 - Students are given three values for each item ranging from 0-2, where higher scores indicate more intense depressive symptoms. (e.g., 0= *I’m sad once in a while*, 1= *I’m sad many times*, 2= *I’m sad all the time*)
 2. **ITI – Implicit Theories of Intelligence Scale for Children-Self Form**
 - 5 items were used to assess student’s individual theory of intelligence.
 - Students were asked to rank items on a 6-point Likert scale (e.g., 1= *strongly agree*, 2= *agree*, 3= *mostly agree*, 4= *mostly disagree*, 5= *disagree*, 6= *strongly disagree*) where higher scores indicate a more malleable theory of intelligence.
 3. **Questionnaire Goal Choice Items – Goal Orientation**
 - 4 items were used to assess Goal orientation using Dweck’s (1999) Questionnaire Goal Choice Items.
 - Students were asked to rate items on a 6-point Likert scale (e.g., 1= *strongly agree*, 2= *agree*, 3= *mostly agree*, 4= *mostly disagree*, 5= *disagree*, 6= *strongly disagree*) which indicated the degree to which these students endorsed challenge-oriented/learning goals or performance/validation goals.

Data Analysis

To determine whether a direct relation existed between theory of intelligence, goal orientation, and depressive symptoms, we will examine correlations between each of these components and depressive symptoms. This analysis will show which components are significantly correlated with depressive symptoms.

Additionally, to determine whether a learning goal orientation mediates the relationship between theory of intelligence and depression, a series of hierarchical multiple regressions will be computed.

Hypothesis

It is hypothesized that an incremental theory of intelligence and a learning goal orientation will be negatively correlated with depressive symptoms. In addition, goal orientation is predicted to mediate the relation between theory of intelligence and depressive symptoms.

Importance of Study

If goal orientation mediates the relation between theories of intelligence and depression, this implies that depression can be changed by altering theories of intelligence to include learning goals and this can be used in intervention programs for populations at high-risk for depression.

Acknowledgements

Walter Scott · Alicia Mousseau
Susan Stoddard · Zackie Salmon