

## **Attending to Metaphor in Adolescence Depression**

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### **ABSTRAK**

Tujuan kajian ini adalah untuk memahami pengalaman dan emosi remaja yang mengalami kemurungan dengan memerhatikan metafora yang digunakan oleh subjek kajian. Metafora berfungsi sebagai bahasa kiasan dalam penceritaan yang boleh membantu kami untuk memahami bahawa kemurungan adalah satu keadaan yang digambarkan dengan perasaan rendah diri, tahap aktiviti yang rendah, ataupun pesimis tentang masa depan. Kaedah kajian kualitatif telah dijalankan secara naratif inkuiri dan temu bual mendalam. Seramai tiga subjek kajian telah diambil dalam kajian ini. Setiap subjek kajian telah ditemu bual sebanyak tiga kali dalam sebulan. Setiap sesi temu bual mengambil masa antara empat puluh lima minit hingga satu jam. Terdapat tiga metafora ditemui iaitu *Gunung Berapi*, *Lubang Hitam*, *Digigit oleh Ikan Besar*. Keputusan analisis tematik menunjukkan bahawa pengalaman kemurungan adalah digambarkan sebagai pasif, tidak sukarela, dan pedih. Namun, proses pemulihan dicituskan oleh saat kesedaran yang berkaitan dengan hubungan interpersonal. Oleh itu, kesimpulan daripada kajian ini ialah emosi dan pengalaman kemurungan dapat digambarkan secara mendalam dengan penggunaan metafora dalam penceritaan. Konteks sosial yang positif dan menyokong adalah bermanfaat dalam proses menambah baik pemulihan bagi kemurungan dalam golongan remaja.

**Kata Kunci:** Remaja, kemurungan, metafora, pemulihan

### **INTRODUCTION**

Many adolescents in Malaysia suffer from depression, and the number of adolescent who suffer from depression has increased recently (Redhwan Ahmed & Dhekra Hamoud, 2012). Depression is a form of mental illness that will significantly impact individual's daily functioning which include disruption of mood and thus will adversely affect individual's psychosocial and occupational functioning (Secretariat, 2007). Depression affects nearly 2.3 million population in Malaysia and many people remains undetected and undertreated (Mukhtar & Oei, 2011).

According to Hankin (2006) the onset of depression often begins at adolescence period. There are approximately 10% to 20% of adolescents diagnosed with anxiety or major depressive disorder as stated in Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition (DSM-IV) with a higher prevalence at the middle to late adolescence period (Richardson, Russo, Lozano, McCauley, & Katon, 2010). It is actually one of the most

severe mental illnesses that strikes globally. According to the World Health Organization (WHO) media press during the celebration of 20th Anniversary of World Mental Health Day, depression is common in all regions of the world (Jasarevic, 2012).

Studies have shown that early episode of depressive symptoms in adolescence is associated with higher occurrence of future depressive disorders and other adverse mental health problem, and social role outcomes in adulthood (Wickrama & Wickrama, 2010; Jonsson, Bohman, Knorrning, Olsson, Paaren, & Knorrning, 2011). The alarming news is that the depressive symptomatology has become a common experience among the adolescent group (Mak, Blewitt, & Heaven, 2004).

Youths are different from adults in many ways as they are still in their transition of life (Papalia, Olds, & Feldman, 2009). They face many challenges coping with changes in life such as transition from secondary schools to colleges or university; from staying at home to moving away from home and also from being influenced more by family culture to peer and societal cultures. Therefore when they face life challenges such as failure in examination or being rejected or criticized by close friends they may not know how to express themselves. Attending to the language used, especially metaphors can help us better understand their emotions and struggles. Metaphor has been recognized as rich soil for psychotherapy (Mcmullen, 2008).

### **LITERATURE REVIEW**

Traditionally, metaphors were used for comparisons of concepts from a source domain to a targeted domain of experience under the tradition started by Aristotle. This theory of similarity utilizes the concepts of resemblance and substitution. In Latin, the transference has the meaning of “carry across”. Besides theory of similarity, metaphors are also being discussed in interaction theories (Halliday, 2007).

However, the study of the use of metaphors has moved from a semantic study to social science domain which relates to human experience and human existence in which the meanings or values are embedded in the culture. Therefore it is no longer literally a transferring of meaning and neither is it used for interaction purpose solely in which the meanings are basically determined by the context of sentences. We agree that the traditional rhetoric studies were insufficient to study metaphors. Frye (in Ricoeur, 1997) holds the metaphors were rich in poetic meanings as it is an expression of creative imagination and association. Since metaphor is embedded in the language used and the meaning of language is deeply rooted in their culture. It is in the story telling (narratives) that we can grasp the meaning which include the “belief and intention” (Jaszczolt, 2002) of a person.

Paul Ricoeur (1988) holds that metaphor is still a way of signified, but it refers to conceptualized meanings in a more holistic way. And these

meanings may refer to the meanings experienced or acquired by people who have gone through some unique or difficult life experience and normally it is grounded in their experience which is organized in time and space. Therefore, pure semantic or interaction theories may not be sufficient to understand the meaning of metaphors given the expression of complicated life experience. Thus, we have adopted a functional approach to attend to the languages used in a counseling setting. This helps counsellors to better understand their clients and also it is beneficial for clients to express themselves and gain a better understanding of their experience in a more enlightening and holistic manner. This is supported by Lyddon and colleagues (2011) who note that metaphorical knowing is just as pervasive in scientific and theoretical discourse as it is in everyday life and storytelling.

McMullen (2008) holds that psychotherapy gives a fertile space for us to study metaphors. Sigmund Freud and Carl Jung (Gibbs, 2008) had initiated the use of metaphors in psychotherapy as metaphors facilitate psychoanalysis. Freud used metaphor of “transference” centrally as a metaphoric mutation to explain being in a relationship in the present as a temporal construct, a recreation of a relating from the past (Zindel, 2001). Zindel used metaphor in psychoanalytic terms as a way of being in a relationship more than reaching to the past from the present through the vehicle of the re-narration of stories. Metaphor expresses conscious and unconscious themes which become important for co-creating new. It is believed that metaphoric language provides a helpful tool for expression and understanding of human experience. In counseling sessions, when a client struggles to give meaning to feelings or personal experience and when he or she is not able to express words, by conceptualizing their struggles and experience using metaphors will be helpful. This will enable them to own a meaning or feeling that previously they were unable to feel or consider. It will also help them to understand themselves and the world in which they live. Therefore attending to metaphors can promote awareness so that adolescents can get in touch with their feelings as metaphors is capable of connecting the conscious and sub-consciousness even connecting all systems (Kok, 2011). In adolescence depression cases, drawing insight, accepting the darkness and painful experience become possible.

Besides, from neuropsychology, metaphors play a key role in “framing particular ways of understanding.” Therefore attending to the metaphors will help us to understand the sentiments and emotions (Kovecses, 2008; Kovecses 2010). Therefore in listening to clients’ story of depression, we can take note to the ways they describe their emotions. By attending to the metaphors and staying with the metaphors for more exploration will be helpful to help us get a better understand of their world.

## **METHOD**

We employed a qualitative, narrative research design as suggested by Riessman (2008) by using in-depth interview as a way of data collection. Participants were recruited from a private university in Kampar, Perak in March 2013 to April 2013. They were briefed about the research purposes and were informed the right to withdraw from the study if they felt uncomfortable about the topic. Written informed consent was obtained from each participant. Later, the participants were interviewed 3 to 4 sessions with approximately 45 minutes to an hour per session and the conversation was audio-taped. Subsequently, the audio recordings were transcribed for data analysis.

### **Sample**

Three participants were recruited through a snowball sampling technique as this technique is able to reach the hidden potential participants (Shaughnessy, Zechmeister, & Zechmeister, 2010). These participants were females with aged 22 to 24 and studying in a private university in Perak state, Malaysia. It should be taken into account that narrative research approach is not appropriate for large number of participants. The essence of good narrative study relies on its data richness and detailed description. Thus, the number of participants is not a significant issue in conducting a narrative study (Esin, 2011)

There are three criteria that must be met in recruiting the participant.

1. The depression onset age has to fall within the adolescence stage which is ranging from 13 to 18 (Santrock, 2008).
2. Participants should have been diagnosed as depression by a psychiatrist.
3. Participants have recovered from depression with the psychiatrist's diagnosis.

### **Data Collection**

This study implemented an unstructured in-depth interview protocols as suggested by Legard, Keegan, and Ward (2003). In-depth interview was used as it enabled the researchers to gather participant's detailed narrative account of depression experience (Smith, 2011). The focus of each interview was to explore, understand and help participants to express and bring meaning to their depression experiences.

All interviews started with an open-ended ground mapping question to provide freedom and opportunity for the participants to express and narrate their experiences in depression. Then, probes, content mining questions, and follow-up questions were formulated inpromptu to further achieve the richness and depth of the content during the interview. Unlike the traditional structured interview where detailed series of questions will be use to gather data (Smith, 2011).

Data collection stopped when it reached the point of data saturation, where no new information about the experiences of adolescence depression could be identified. The interview protocols suggested by Legard et al. (2003) as follow:

Stage 1 : Arrival (rapport building)

Stage 2 : Introducing the research (explain the purpose of study and obtain informed consent)

Stage 3 : Beginning the interview (gather personal data and background information)

Stage 4 : During the interview (guiding the participant through the focus and objectives of the interview)

Stage 5 : Ending the interview (signal the participant the approach of the end of session, make sure the participant has no unfinished business left over)

Stage 6 : After the interview (show gratitude on the participant's contribution, reassurance the confidentiality of data recorded)

### **Data Analysis**

After the audio recordings was transcribed, the researchers read through the transcript while listening to the audio recording to make sure the content of the transcript is same with the audio. Then, the transcripts were coded by two researchers manually. The similarities and differences in descriptive notes, concepts, and emerging themes were discussed among researchers. Later, the themes and descriptive concepts were brought to a higher meaning- making interpretation level. The procedures of data analysis as suggested by Smith, Flowers, and Larkin (2009) were implemented in this study as follows:

1. Read and re-reading (familiarize and conceptualize of the content)
2. Initial noting (descriptive comments, concepts were coded at the margin of the transcript)
3. Developing emergent themes (relate back and link themes to quotes in text, using a cyclical process)
4. Searching connection between emerging themes (compare the similarities and differences of the emergent themes, and examine texts more closely to greater depth of meaning and interpretation)
5. Moving to the next case (apply step 1 to 4 to other transcripts)
6. Looking pattern across cases (explore the connection between cases, and form a higher level of overarching themes for the study)

This paper explores the metaphors used by our research participants who were diagnosed with depression but on their way of recovery. While listening to the narratives, the researchers asked the participants if they had any images or pictures that would describe their experience, the participants thus came out with some figurative images to

help them to express their feelings. Three metaphors were used by the participants, namely (1) Volcano; (2) Black Hole; (3) Being bitten by big fish. We attend to the metaphors given by the participants and it was found that the metaphors helped them to express themselves more freely in a conceptualized manner, and by exploring the metaphors it helped to unpack the depression narratives.

## FINDING

There were three metaphors revealed from the interviews. The metaphors were used to describe and release the pain and struggles faced by the participants in journey of depression.

### Case 1: Volcano

Ms. S, a 24 year-old university student. She was diagnosed with depression during her secondary school time at the age of 15. She was brought up by a single mother worked as a prominent professional in medical health care line. During the interview session, she used the metaphor of a volcano to describe her depressed experience. She was the middle child of three, with an elder sister and a younger brother. Her birth was not welcomed by her family as she was expected to be born as a boy.

*"I suffered from middle child's symptoms: the elder child always gets more attention, and the youngest one, not because he is the youngest one, but because he is the only boy."*

Since young, she was treated badly by her family. She felt that her mother was unfair to her. She had to work hard and well behaved in order to gain attention and love from her mother by doing all the house chores such as cooking and cleaning. No matter how hard she had tried, she felt that her mother did not love and care about her as much as her other siblings.

*"Not that I minded, but just be faired, you know. There are many details I can provide, for examples, if my mother was cooking curry, if it was not enough for two persons, between me and my brother, she would say let the boy eat first. After he eats, then only you eat."*

It was just too overwhelming for an adolescent at the age of fifteen to handle the great intensity of negative emotions and stress. She had to handle her own academic and co-curriculum at school. Moreover, she had to wake up early in the morning to get all the house chores done before she went to school. Besides, she had to handle her mother's emotions due to work stress.

*"All house works came to me and the stress my mother experienced from my brother also came to me. I was only 15 years old at that time. I was introverted."*

The enormous negative emotions and stresses started to accumulate, and they resembled the picture of active volcano which was ready to erupt. She felt that her mom had disparaged her, no matter how

much efforts she had put in. The teachers and friends at school started to ignore her when she was no longer the best student in the school. She felt betrayed, angry and frustrated. Her anger and frustration were represented by the hot boiling magma under the volcano which was ready to erupt.

*“There is a roof in the center of the school and there is a cross on the roof and surrounded by buildings at both sides. I have the visions that I wanted to hang all the teachers in the center with the one particular teacher who I hated the most in the center.”*

The experience of depression was similar to an active volcano where it was dangerous and unstable. She mentioned that she had disorganized sleeping patterns, fluctuation of body weight, and she felt agitated to a maximum boiling point where there was a moment she even tried to put an end to her life.

*“I went to the kitchen and took the knife. I hold the knife on one side and one hand on another side, and then I told myself that I just needed to close my eyes and brought it together and cut.”*

Her recovery took place when there was one time she was so upset and she decided to leave the house. Suddenly, she realized that the world was so beautiful and how precious life was, as it was the creation of God, no one had the right to take from her, even herself. Life itself was great. All of a sudden, she realized that “it all depends on how people live their life”. Ever since then, she begins to read self-help book which include motivational and aspiration real life stories. Sometimes, she rewards herself by a treat of ice-cream. She decided she would love herself, even though nobody loves her.

*“When I went out, something amazing happened, the sun was shining, even though I was walking beside a drain. That day the drain looked so beautiful. Even though it was just a drain, you know, there was a kind of yellow flowers. I looked at the flowers and said, “Even though just weeds, they were still so beautiful, and actually life is very beautiful just that how people wants their lives to be”*

## **Case 2: Black hole**

Ms. W was a 23 year-old university student. She was diagnosed with depression at the age of 20 during her first year of her university life. She was enrolled in forensic science program offered by a university in Kelantan which was very far away from her hometown. She found it very difficult to adapt with her new environment in the university such as the food and the culture were so different for her. Besides, she found it difficult to complete her assignments as it was competitive among the course mates.

*“Every time, they want to compare the results, so it gives me a lot of stress like I couldn't find friends who can accept me but only friend who like want to use me when they need me and also friends who only compare my result, so very stressful and also very hard to cope with the environment*

*there because the hostel I stay was in a very... in a very bad condition and always...*

The first episode of depression came with the panic attack during her examination in a hall. She found herself so helpless and no one was willing to help her. She described her depression experience as falling into a real deep black hole and no one was there to help her and she couldn't get up from the deep black hole by herself. She was left alone in darkness and her heartbeat was the one and only companionship she had in the deep black hole.

*"And then my friends also don't want to help me. So, feel ... I get more stress then got one time during midterm I had panic attack, like I couldn't continue with the exam and then couldn't breathe. "*

Besides, her mother was very particular with her study; she would embarrass her family and bring down the family name if she couldn't graduate from the university. She felt that she was having great responsibility on her shoulders to take care of the family name and she was the only one among her siblings who had the chance to enter university. So, she must not let her family down even though she could not cope with her study. She had gone through a dilemma state where she had no one to turn to.

*"Because... like she ... she emphasize more on the ... family name...the face, like when relative ask "where is your daughter study now?" Then if want to say I withdraw from university and then come back. It was like no face already right? Withdraw? Then they will ask why withdraw, then if I tell them I got depression then it was like no face for my family."*

She was even pushed deeper into the deep black hole by her boy friend whom she met in the university. She found out that her boy friend used her to complete his assignment and accused her to be the root of all source of negative emotions. The situation became worse when her boy friend tried to repair their relationship after breaking up but failed.

*"At that time we had already broken up, but he said he really wanted to meet me... When we met, he was very nice and sweet to me, so it was like giving me a hope that we will become lover again. After that... I went back to my hometown, and then he sends me a message telling that we cannot get back together. So, it is like he gives me a hope and he take it away and I am like falling into a very deep hole"*

She was helpless and hopeless in the deep black hole. She cried frequently without any reasons and she had excessive sleeping pattern in order to avoid the pain and unwanted thought by falling asleep. There was a moment, she was so hopeless that she attempted suicide.

*"I wanted to... I wanted people to help me to get back up (deep black hole). But, that time, I did not... because I felt like I want to give up already (suicidal thought)."*

The recovery of Ms. W started when she was sent to hospital for institutionalization after she was found to have suicide ideation and she was



going to do her third attempt. During her stay in the hospital, she was placed together with the schizophrenia patients. Suddenly, she realized that she was lucky because there was a future for her as compared to the schizophrenia patients, and she realized that she had parents, friends and lecturer who loved and supported her so much all these while.

*“When I was there I saw a lot of people. They are suffering from schizophrenia. So, is like I suddenly feel that, actually I am luckier, I am very lucky, because I just have depression, and they don’t know what they are doing. At least, I know what I’ doing and I have the chance to study and I still have a chance to live my life but they couldn’t control what they are doing. And when I see them I see myself very fortunate.”*

### **Case 3: Being bitten by big fish**

Ms. Z, a 23 year-old fresh graduate. She was diagnosed with depression at the age of 14 when she could not cope well in the new secondary school environment and she could not adapt the changes from primary to secondary such as she had to wake up earlier in order to go to school which was located very far away from her house as compared to her primary school. She had to leave with her previous friends and make new friends, and adapt to new teachers in her new secondary school. On top of that, it was very competitive as she was attending a famous school in town.

*“The school I went was well known secondary school, so very competitive. Then I always wanted to be the first in everything, many competitors. Then secondary teachers were different from my primary teacher.”*

She used to be the top student in her primary school, and she found it very competitive in her secondary school. A perfectionist like her was not able to accept the taste of defeat; she wanted to be the best of best. However, she failed to be the best in the school even though she had gave her very best by taking extra tuition, spending hours to do revision. She felt that it was just too embarrassing and awkward to tell her friends.

*“I felt very depressed and not happy. I was not satisfied with my results When my friends asked me, how was your results, then they were shocked when I told them. Then they would ask if I felt embarrassed, because I always like to compare my results and my friend’s results. And I found that some of my friends scored better results.”*

Then she started to isolate herself by not talking to her friends and even family members. Also, she started to withdraw herself into her own world because she didn’t want to face the reality that she was no longer the top student. She felt that she was looked down upon by her friends and teacher, her existence was being neglected by them. She no longer lived under the spot light.

*“I feel that if I fail they will look down on me, and they also will not notice my existence.”*

The experience of depression described by her was being bitten by a big fish. She was a small fish swimming in the sea and being chased and bitten by a big fish which resembled depression. She had to put a lot of efforts to come out from depression but the big fish was just too fast and keep biting her. It was painful yet unavoidable experience as she could not help herself out of the situation.

*"I try to break through with all my strength but I couldn't break through."*

The turning point in Ms. Z depression episode was when her mother brought her to a Taoist temple to seek help. She was deeply touched and tears dropped when she saw her mother, a tough woman who never cried even when the family faced hard time, knelt in front of the temple and cried for help. She suddenly felt the greatest love of all from her mother. A love that was selfless. She knew she must not let her mother down. Since then, she gave 100 percent of cooperation to the doctor and therapist in order to help herself out from depression.

*"Because before that incidence, I didn't realize it, I didn't really notice that, then she brought me to the temple and she knelt down in front of the person (spirit medium)... I suddenly realize (love from her mother*

### **Summary of Findings**

Although depression can be understood as a state of despondency characterized by feeling of inadequacy, lowered activity, pessimism about the future and feel hopelessness. The participants in this study have discovered more about themselves and the strength within while they were traveling the journey of depression. They realized and discovered the love and supports from their loved one.

*"The experience of being depressed and going through these much challenges, it makes me more mature and stronger and therefore, when others are going through hard time, I've the empathy. I can understand."*

Metaphor allowed the clients to get closer to the painful and difficult experience in life. The journey of depression seemed to be a heavy, unbearable one. It was just beyond the limit of what an adolescent can cope with. They were the lone traveler in their depressed journey. The situation would be worsening if they had no one to turn to or no one seemed to understand what they had gone through. They didn't want to fall into depression (the metaphor of dark hole) but the difficulties in life had led them into such an involuntary experience. The supports from the family members and friends around them have contributed to their recovery.

### **DISCUSSION**

It was found that the participants used metaphors to describe their depressed experience. Whilst in attending the metaphors, we asked questions about the metaphors (such as when did the volcano erupt? What would you do when

being bitten by a big fish? What would you do if someone passes you a stick and what would be helpful when you were in the darkness of black hole? It was found that more details were drawn out when metaphors were explored. Metaphors are able to help in reaching the depth of the mind, and participants were able to express the unbearable pains which they might not be able to do it otherwise. From the poetic perspectives, it touches the emotions and sentiments of the participants.

Metaphors utilize imagery and affective, figurative associations which can sharpen and deepen thinking and understanding. Counselling deals with a lot of ambivalent emotions and expressing of transitional experience. It was found in our study that metaphor helps to fully explore those complicated feelings as it relates to the complicated depressed story in a more holistic and conceptualized manner. This is because for most of the people, even after recovery, may not want to reminiscence as it would bring back loads of depressed memory. However, the abstraction of metaphors helps us to grasp the sensitive past which was too sensitive to go into details. The shared imagery language gives counsellor a tool to get closer to the internal landscape of the client, and thus also able to provoke “aha” moments. Hidden message was grasped and meanings were explored. Therefore it is possible to bring into greater understanding and awareness.

Adolescence depression episode started when they began to ask the question of self. According to Roger (1951 as cited in Miller 2012), individuals took experiences, attribute meaning to them through their feelings and used this as feedback to form their self identity. The self image was formed by the views of others. The depressed adolescents had experienced self doubts, losing themselves in term of self-esteem, self-concept, self worth and unconditional positive self-regards in their transition stage. They perceived themselves had been depreciated, devalued and disregarded as an individual by the people whom they concerned. The concept of condition of worth was then emerged where they perceived that performing or behaving in particular way in order to exchange positive regard from significant others in their social environment (Roger, 1959 as cited in Patterson & Joseph, 2007).

The finding suggested that the “ah-ha” moment experienced by the depressed adolescent was the significant turning point to the route of recovery. It was the moment when self discovery kicked in. Roger (1951 as cited in Iberg, 2001) suggested that unconditional positive regards by others was able to create an individual awareness of self, and would be able to restore the individual’s unconditional positive self-regard. The unconditional positive regard by the significant others in the depressed adolescent social environment promotes self-acceptance and bring changes (Wilkins, 2000). Thus, the healing or the recovery from depression is possible if the social environment context of the depressed adolescent is positive and supportive. As Rennie (2004) mentioned an interpersonal involvement not only served to construct self-identity, but also people will seek help from others. They look for opinions, advices, and guidance. They

also engage in discussion in terms of their experience because it will help them to make a meaning in their experience

### CONCLUSION

Going through depression at young age is a painful experience. Our research participants have utilized metaphors in the description and expression of their profound emotions. The depression narratives were insightful as metaphors have played a facilitating role in the conceptualization of experience. All of our three research participants were on their way of recovery, and a positive and supportive social context was found to be helpful in enhancing the recovery process of adolescence depression.

### ACKNOWLEDGEMENT

This work was supported by UTAR Research Fund, year 2013. Project number: 6200/K21. The authors would also like to express our gratitude to all the research participants who have shared their life experience with us.

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Bilangan/Number 28 (1)

ISSN 2289-8174

2014

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