

Psychologist working to end the cycle of depression within families

February 9 2016, by Hallie Jacobs



As many as one in 10 children will experience depression.

Depression is now the leading cause of disability around the world,

beating out diabetes, stroke and cancer in impact on quality of life. Struggles with depression can begin early, and as many as one in 10 children will have an episode of depression.

The conversations surrounding [mental health](#) are gaining more attention, but the pervasiveness and severity of depression is often ignored.

Children with depressed [parents](#) are much more likely to develop the disorder themselves. Because depression is episodic and chronic, the earlier a person experiences an episode of depression, the more likely they are to experience depression throughout their lives.

It's a [vicious cycle](#).

"People are becoming increasingly aware of [mental health issues](#), but there's still this tremendous gap in how prevalent depression is in people's lives, and how much we talk about it," said Robin Weersing, associate professor in SDSU's Joint Doctoral Program in Clinical Psychology.

Stopping the cycle

After studying individual treatments for depressed adults and adolescents, it became clear to Weersing and her team that early intervention targeting families struggling with depression could help prevent the onset and development of depression in the next generation.

"We've done a lot of research on [depression treatment](#), but we are really focused on preventing depression before it happens in children, in the context of their family lives. We want to break the cycle of chronic problems with depression that you see with many of these at-risk kids," Weersing said.

According to Weersing, children of depressed parents are five times more likely to develop depression compared to children of non-depressed parents. This is a statistic she and her team hope to change.

Identifying a need

"Adolescence is a high-risk period, and a high-conflict period, which creates a lot of stress for both the children and parents," Weersing said. "It is the prime risk period for a first episode of depression in youth."

Identifying and helping children before they reach adolescence could be the key to preventing depression in this at-risk population, she said.

Weersing's team hosts [group therapy classes](#) for families at this critical developmental period.

In the classes, families learn healthy strategies to cope and deal with stress, reduce feelings of depression, and improve parenting skills.

"We also try to inoculate parents from episodes of depression," she said. "We're trying to get dual depression alleviation—to prevent the onset of depression of kids, while preventing future episodes of depression for parents. It's an ambitious goal, but depression is a familial disorder, and we have to start trying to tackle it from all angles."

Reaching out

Weersing's program focuses on helping local families and is open to parents with a history of depression and their [children](#) ages 9 to 15. The project is supported by a major grant to SDSU and Vanderbilt University from the National Institutes of Health.

Undergraduate and graduate students from SDSU are involved with every aspect of the research, giving them unique opportunities to develop research and clinical skills. From data analysis to neurological assessments, the experience is invaluable for undergraduate students, preparing for graduate programs in psychology, pediatrics, counseling, social work and psychiatry.

While depression is no easy feat to conquer, the positive approach to combating the disorder helps families learn skills that can help them immediately and down the road, she said.

"It's a positive study—it's about preventing [depression](#)," she said. "These parents are trying to do the best they can under difficult circumstances, so our mission is to provide better tools to make it easier for these parents."

Provided by San Diego State University

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