



Observed maternal responses to adolescent behaviour predict the onset of major depression

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ABSTRACT

Two mechanisms have been proposed regarding relations between parental responses to adolescent affective behaviours and the development of depression: the elicitation of parental negativity and the suppression of parental aggression. This study aimed to investigate the boundary conditions under which these two mechanisms operate in relation to the prospective prediction of Major Depressive Disorder (MDD) onset in adolescence. A community sample of 159 adolescents (aged 11–13 years) with no history of MDD completed a family interaction assessment with their mothers, and were followed-up with a diagnostic interview 2–3 years later. Results showed that onset of MDD was prospectively predicted by the elicitation of maternal aggression in response to adolescent aggression (in girls only) and maternal dysphoria in response to adolescent aggression, as well as the suppression of maternal aggression and dysphoria in response to adolescent dysphoria. Thus, support was obtained for both the elicitation of negativity mechanism in relation to maternal responses to adolescents' aggressive behaviours, and the suppression of aggression mechanisms in relation to maternal responses to adolescents' dysphoric behaviours. Mothers' responses to adolescents' aggressive and dysphoric behaviours may differentially influence the risk of MDD onset for adolescents over time.

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Introduction

The current study investigated the prospective influence of maternal responses to adolescents' affective behaviours on the onset of Major Depressive Disorder (MDD). Epidemiological research has shown that the onset of MDD commonly occurs in adolescence, with an estimated 20–28% of young people experiencing an episode of MDD by age 19 (Hankin et al., 1998; Kessler et al., 2005; Lewinsohn, Rohde, & Seeley, 1998). Episodes of MDD in adolescence have been associated with a range of negative outcomes, such as concurrent and future psychosocial dysfunction (Fergusson & Woodward, 2002; Lewinsohn et al., 1998; Lewinsohn, Rohde, Seeley, Klein, & Gotlib, 2003) and high rates of recurrence

(Hankin et al., 1998; Lewinsohn, Rhode, Klein, & Seeley, 1999). Thus, a better understanding of the risk factors associated with MDD onset in this age group is needed to inform preventative efforts in this area (Kovacs, Joorman, & Gotlib, 2008; Mrazek & Haggerty, 1994).

It has been suggested that risk for depression may increase in adolescence as a consequence of the significant biological, cognitive, emotional and social changes that occur during this developmental period (Graber, 2009; Masten, 2004; Shortt & Spence, 2006). Within the social sphere, the role of peers as agents of socialization increases during adolescence (Steinberg & Morris, 2001), however, parents remain a significant influence on development (Stocker, Richmond, Rhoades, & Kiang, 2007). Indeed, there is evidence to suggest that family relations are more strongly related to adolescent depressive outcomes than are peer relations, both cross-sectionally (MacPhee & Andrews, 2006) and longitudinally (Stice, Ragan, & Randall, 2004; Windle, 1992). Furthermore, some evidence suggests that family relations may be a more important predictor for girls than boys (Denham, Mitchell-Copeland, Strandberg, Auerbach, & Blair, 1997; Windle, 1992).

Abbreviations: EPI, Event–Planning Interaction; PSI, Problem–Solving Interaction; SEIFA, Socio-Economic Indexes for Areas.

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Parental responses to adolescents' affective behaviours

Two mechanisms have been proposed regarding the relations between parental responses to their child's affective behaviours and the development of depression, and these mechanisms relate to either the elicitation or suppression of parental negativity in response to their child's behaviours. The elicitation of negativity mechanism is based on the premise that when children's negative behaviours elicit negative parental responses, the child's arousal increases, thus impairing their ability to regulate distress and increasing their risk of negative socio-emotional outcomes, including depression (Eisenberg, Cumberland, & Spinrad, 1998; Morris, Silk, Steinberg, Myers, & Robinson, 2007). In contrast, the suppression of parental negativity mechanism is based on findings that depressive behaviour in young people suppresses negative parental reactions, especially aggression, thus inadvertently reinforcing the child's depressive behaviour and increasing their risk for the development of depression (Sheeber, Hops, & Davis, 2001). On the surface, these mechanisms appear contradictory, and existing studies have either supported one mechanism or the other; to the best of our knowledge, no published study has examined, or found support for, both mechanisms within the same sample. One of the aims of the current study was to explicitly examine both mechanisms to try to resolve this apparent contradiction.

In support of the "elicitation of negativity" mechanism, Eisenberg et al. (1999) reported that parents' self-reported distress in response to their four-to-six-year-old children's negative emotions was associated, both concurrently and longitudinally, with high levels of internalizing symptoms in their children. Additionally, higher rates of parental punitive and minimizing responses to children's negative emotions have been cross-sectionally associated with poorer emotional competence and social functioning outcomes in children (Eisenberg, Fabes, & Murphy, 1996; Fabes, Poulin, Eisenberg, & Madden-Derich, 2002). There is also evidence to suggest that parents of adolescents with internalizing and/or externalizing difficulties respond to their adolescent's sadness with more neglectful responses, and to anger with more punishing, magnifying and neglectful responses, when compared to parents of adolescents without behaviour problems (Klimes-Dougan et al., 2007). In contrast, Pineda, Cole, and Bruce (2007) reported that while mothers of adolescents with elevated depressive symptoms were observed to respond less supportively to their child's dysphoric behaviour compared to the mothers of non-depressed adolescents, they did not respond more critically.

Other observational studies have yielded support for the suppression of negativity mechanism. Sheeber, Hops, Andrews, Alpert, and Davis (1998) found that adolescent dysphoric behaviour suppressed fathers' aggressive responses (relative to the base rates of fathers' aggressive behaviour) in families of depressed adolescents to a greater degree than in the families of non-depressed adolescents. This pattern of behaviour was observed again one year later, regardless of whether the adolescents' depressive episode had resolved, suggesting that such interaction patterns were not state-dependent. Dadds, Sanders, Morrison, and Rebgetz (1992) reported that, in a clinical sample of 7- to 14-year-old children, the parents of more severely depressed children displayed less aversive behaviour overall than did the parents of less severely depressed children. When combined, the findings of these studies suggest that the parents of depressed young people may suppress aggressive responses to their child's dysphoria, thus potentially providing negative reinforcement of depressive behaviour.

Interestingly, Slesnick and Waldron (1997) found evidence that depressed adolescents' depressive speech suppressed parental

aversive comments, but this effect was stronger in non-depressed adolescents. However, when parents' nonverbal affective behaviour was examined in addition to the content of their speech, it was found that parents of depressed adolescents expressed more aversive content with positive affect than parents of non-depressed adolescents, possibly indicating a 'softening' of the aversive message being directed at their depressed adolescent. This could be interpreted as consistent with the suppression of aggression mechanism.

In summary, there is evidence to suggest that both the elicitation and suppression of parental negativity may be associated with depression. However, a number of limitations and methodological differences in the existing evidence base render it difficult to identify the boundary conditions under which these two mechanisms may operate. In particular, it is not known whether the mechanisms differ according to the type of negative emotion parents are responding to, or whether the mechanisms operate prospectively as well as cross-sectionally. Studies finding support for the elicitation of negativity mechanism (e.g., Eisenberg et al., 1996; Fabes et al., 2002) have not typically distinguished between the type of negative behaviours to which parents are responding; that is, whether they are responding to aggressive or dysphoric behaviours in their children. The studies that have made this distinction have not tended to report significant associations between the elicitation of negative responses and risk for depression (Pineda et al., 2007), with the exception of Klimes-Dougan et al. (2007), who found that negative parental responses to sadness and anger were associated with problem status in their children. However, this study was cross-sectional and did not distinguish between adolescents experiencing internalizing or externalizing symptoms. Most studies that have observed an association between the suppression of parental aggression and child depression have utilised samples of individuals who are already depressed (Dadds et al., 1992; Sheeber et al., 1998), so it is unclear whether this pattern of parental behaviour exists prior to the onset of disorder, or whether it is a concomitant or consequent feature of the influence of adolescent depression on family environments.

The current study addressed these issues by differentiating between dysphoric and aggressive maternal and adolescent behaviours, and using a prospective design. The two mechanisms under discussion (i.e., elicitation of negativity and suppression of aggression) predict that different patterns of parental response behaviours will influence adolescent outcomes. The elicitation of negativity mechanism predicts that the elicitation of negative parental responses to adolescent negative behaviour is likely to increase risk for MDD onset, but the existing literature is unclear as to the operation of this mechanism in relation to specific negative behaviours (i.e., dysphoric and aggressive) exhibited by parents and adolescents. The literature supporting the suppression of aggression mechanism has identified the suppression of parental aggression in response to adolescent dysphoria as the specific behaviour sequence of relevance to this mechanism, but it is unclear whether this is the only behaviour sequence of relevance in predicting MDD onset in adolescence. The aim of this study, therefore, was to identify which patterns of maternal response to their children's dysphoric and aggressive behaviour (i.e., either the elicitation or suppression of maternal dysphoria or aggression) were predictive of the onset of MDD.

Methods

Recruitment and screening of participants

A sample of 2453 final year primary school students in Melbourne, Australia (53.5% of the total sampling population; 52%

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