

INTERVENTIONS FOR YOUTH DEPRESSION: FROM SYMPTOM REDUCTION TO WELL-BEING AND OPTIMAL FUNCTIONING

INTERVENCIONES PARA DEPRESIÓN EN JÓVENES: DE LA REDUCCIÓN DE SÍNTOMAS AL BIENESTAR Y FUNCIONAMIENTO ÓPTIMO

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Received: February 19, 2014
Revised: September 15, 2014
Accepted: October 18, 2014

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Abstract

Depression is a major public health problem in children and adolescents, which makes the identification and implementation of effective interventions an increasing concern. Therefore, the main aim of this article is to discuss theoretically different psychological interventions for depression. In particular, those focused on psychopathology and depressive symptom reduction and the new interventions based on the positive psychology approach, which focus on optimal functioning and well-being. Empirically supported interventions for children and adolescents, such as cognitive-behavioral therapy (CBT) and interpersonal therapy (IPT), have focus on symptom reduction, which represents an incomplete vision of youth functioning. In contrast, interventions based on positive psychology promote a more balanced approach that takes into consideration the negative and positive aspects of experience and aims to enhance well-being. We present and discuss new interventions, such as the Optimal Functioning Therapy for Adolescents, which suggest that the focus of interventions for depressed adolescents should integrate symptom reduction and well-being enhancement to achieve optimal functioning. Helping young people be happier and more engaged in their lives is part of a new perspective for clinical psychology practice.

Keywords: Depression, youth, interventions, well-being, optimal functioning.

Resumen

La depresión es un problema de salud pública importante en niños y adolescentes, lo que hace que identificar e implementar intervenciones efectivas para su tratamiento sea de creciente interés. Por lo tanto, el objetivo principal de este artículo es discutir teóricamente diferentes intervenciones psicológicas para la depresión. En particular, las que se abordan la psicopatología, la reducción de los síntomas depresivos y las nuevas intervenciones basadas en el enfoque de la psicología positiva, que se centran en el funcionamiento óptimo y el bienestar de la persona. Intervenciones con respaldo empírico para los niños y adolescentes, como la terapia cognitivo-conductual (TCC) y la terapia interpersonal (IPT), tienen un enfoque de reducción de síntomas, lo que representa una visión incompleta de funcionamiento en la juventud. En contraste, las intervenciones basadas en la psicología positiva promueven una aproximación más equilibrada que contempla los aspectos negativos y positivos de la experiencia y tiene como objetivo mejorar el bienestar. En el artículo, se presentan y discuten intervenciones nuevas, como la Terapia del Funcionamiento Óptimo Terapia para Adolescentes, que sugieren que el enfoque de las intervenciones para los adolescentes con depresión debería integrar la reducción de síntomas y la mejora de su bienestar para lograr un funcionamiento óptimo. Ayudar a que los jóvenes sean más felices y más comprometidos en sus vidas es parte de una nueva perspectiva para la práctica de la psicología clínica.

Palabras clave: Depresión, la juventud, las intervenciones, el bienestar, el funcionamiento óptimo.

Introduction

In the last three decades, there has been greater recognition and scientific interest about depression in children and adolescents (Baker, 2006; Burgić-Radmanović, 2011). Depression is an important public health problem and is among the most common and incapacitating psychological disorders (Horowitz & Garber, 2006; Weisz, McCarty, & Valeri, 2006). Prevalence rates of depression stand at 2% in children and range between 5% and 8% in adolescents (Choe, Emslie, & Mayes, 2012; Rhode, Lewinsohn, Klein, Seeley, & Gau, 2012).). Currently, prevalence rates of depression have gradually increased, especially in adolescents (Williams, O'Connor, Eder, & Whitlock, 2009); in addition, the age at first onset of depressive episodes is gradually lower (Reinecke, Curry, & March, 2009). Early-onset depression increases the risk for subsequent depressive episodes during adolescence and adulthood, and studies show recurrence rates between 45% and 75% over a 3 to 7 year period in these developmental stages

(Horowitz & Garber, 2006; Weisz et al., 2006). Hence, children and adolescents depression seems to be characterized by an episodic and chronic course, with recurrence in adulthood (Choe et al., 2012).

Depression is also associated with several negative psychosocial consequences, including substance abuse, school dropout, health problems, and impaired interpersonal relationships (Cheung, Kozloff, & Sacks, 2013; Horowitz & Garber, 2006; Weersing & Brent, 2006). Most depressed children and adolescents present comorbidity with other psychiatric disorders, particularly anxiety disorders (30% - 80%; Baker, 2006; Rhode et al., 2012). Also, these populations are at greater risk of developing substance abuse disorders and maladaptive behaviors, such as suicide attempts, the third cause of death among adolescents (Rhode et al., 2012; Weisz et al., 2006).

There have been significant efforts to identify the most effective therapeutic approaches to treat depression in these developmental stages, because

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