DEPRESSION, PATHOLOGICAL DEPENDENCE, AND RISKY BEHAVIOUR IN ADOLESCENCE

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SUMMARY

During adolescence, there is an increased chance of increased incidence of depression and the development of addictive/dependent behaviours such as pathological gambling, excessive Internet use and compulsive shopping, Here we present a psychoeducational approach in the schools of Pescara and Penne to identify and treat these problems.

Key words: psychoeducation – dependence – depression - pathological gambling - internet use - compulsive shopping - adolescence

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INTRODUCTION

Adolescence is an age of change, experimentation, research and exploration. These changes involve all the dimentions of the individual, from the soma to the psyche, from the personality to cognitive processes, and even involve relational aspects and the context into which we all live.

Like every 'passage' this stage involves some 'loss', which in this case is in the main the gradual separation from the world of infancy, which is seen as a necessary reorientation of the person's relationship with himself, with his parental figures, and with the outside world. These tasks, of their very nature are extremely complex and serious, and in certain circumstances can become problematic and make the adolescent a person 'at risk' of different forms of pathology.

'Adolescence is a step in the development of every individual, and it is often described in terms which could equally be used to describe an episode of depression' and it is almost possible to affirm that there is no adolescence without depression' (Marcelli & Bracconier 2000). However the adolescent, as opposed to the depressed person, is involved in a process of reorientation of himself, of his own dynamics and psychic orientation, which is aimed, as is mourning, at moving away from and making onself safe from a sad situation. The depressive mood, however, and the affective manifestations correlated to it, are extremely frequent, and if persistent become a warning sign which needs to be examined. According to

Marcelli & Bracconier (2000), many of the pathological behaviours of adolescence can be attributewd to depression, but often its symptoms are hidden by other actions related to depression, such as pathological dependences and risk taking in general.

Adolescence is the key period for experimentation with most psychoactive substances, be they legal or illegal, and for the development of forms of dependence, not only on substances, but also on compulsive, repeated acts. The English term addiction, from the latin addictus, effectively suggests that we are dealing with actions to which the individual is rendered a slave, in spite of himself.

Both dependency behaviours and those caused by the use of substances are characterised by:

- compulsiveness, that is the inexhorable need to do the act;
- craving, a sensation of tention and irresistible attraction to certain substances or experiences to the extent of losing control and undertaking a series of obligatory actions aimed at satisfying the need in spite of obstacles and dangers;
- an experience of pleasure or relief while the behaviour is happening;
- persistence of the action despite the presence of negative consequences.

The literature, furthermore, confirms that there is now an increase in polydependence, that is the existence of one or more forms of dependence (both in terms of substances and actions) in the same person, and of cross-addiction, that is the move from one addiction to another in the same person.

Even in a seventeen year old, it is possible to detect a clear syndrome of dependence, whose signs may well have begun to develop at the age of thirteen. It is in the initial phases of life that, through the exchanges with the most significant persons, the child learns social behaviours which, progressively, are re-proposed and challenged within the child's peer group. The influence of peers lies, not so much in co-ertion or direct imposition, but in suggesting that certain actions are the norm and prevalent, and in offering the opportunity to carry out risky actions and subordinate affective bonds to them.

The search for new sensations, and impulsivity, so typical of adolescence, if pushed to an extreme, constitute personality traits which render individuals mor susceptible to the development of pathological dependencies. Testing out the young person's personal capacities and autonomy, linked with the desire to experiment and widen his repertouire of experiences can increase exponentially and dramatically the taking of risks.

Impulsivity prevents postponement of gratification, and leads to disinhibited behaviour, and the limiting of the adolescent's view to the present moment, thus reducing any planning and any capacity to look to the future.

INTERVENTION

Since 2004, the Department of Mental Health of Pescara has been participating in European Depression Day, by paying particular attention to the world of the school, and focussing on the students in the last three years of secondary education.

From 2009, we began to organise the collection of data via questionnaires, as well as organising educative meetings with the students, and during European Depression Day 2011, thanks to the project 'Depression, Pathological dependencies, and risk behaviours in adolescence,' which this Department has promoted, we have taken the opportunity to increase the population which we were targeting, run small experiential discussion groups, as well as the plenary sessions, and carry out a more standardised and systematic study of both depression and of habits linked with pathological dependence in our population.

Every student received three formative, theoretical and experiential meetings of two hours each in which they discussed and studied the following themes; pathological dependence, with particular reference to the new dependencies (technologies, gambling, compulsive shopping, etc), depression in adolescence, and risk taking behaviours. During the last session, we assessed the participants by administering two questionnaires about depression and about habits linked with dependence.

The children have shown interest, curiosity and sensibility and have allowed themselves to be guided to explore aspects which at first glance may have appeared to be far off from their experience and their understanding. The scientific and informational content have always been accompanied by reflection and discussion, and the choice to work with small groups (two classes at maximum) has encouraged debate, and given the possibility to ask questions and speak openly. The students have been able to understand the psychic suffering of depressed persons, and the links between the difficult tasks of adolescence and depressive mood, dependence and risk seeking behaviours. Most student found that this understanding gave them reassurance regarding their own internal concerns, and to a lesser extent it was also possible to identify difficult situations which affected some of them. Thus the climate of open dialogue enabled them to recount their individual stories and to share their personal difficulties.

STUDY

The students involved range in age between 16 and 19 years, and belong to three institutes in Pescara (Liceo Scientifico "Galilei", I.T.C.G.T. "Acerbo" e Liceo Artistico "Misticoni-Bellisario") and two institutes in Penne, province of Pescara (Liceo "Da Penne-Dei Fiori", which includes the liceo scientifico e l'artistico, and I.T.C.G. "Marconi").

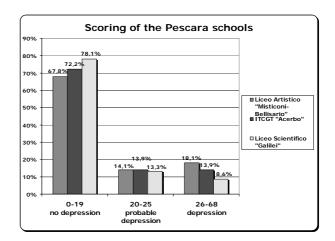
The sample includes 712 subjects of which 390 are from Pescara and 322 from Penne.

The instruments used were the "Plutchik-Van Praag self-report Depression scale (PVP)" of Plutchik and Van Praag, aimed at the diagnosis of depressive states, and the "Questionario per la valutazione delle abitudini giovanili" of Craparo, Epifanio and De Grazia. This second instrument was originally designed to study dependence related behaviours related to the use of the internet and video games, and was adapted by us with the addition of two further sections to identify behaviours linked with gambling and compulsive shopping.

RESULTS

Scoring of the Pescara schools in the test for depression

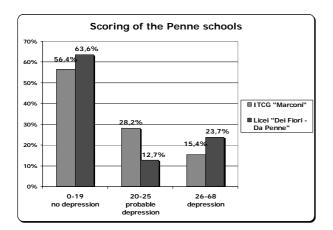
		Numbers of subjects			
		Liceo Artistico	ITCGT Acerbo	Liceo Scientifico	
	0-19=no depression	120	78	82	
Score	20-25= probable depression	25	15	15	
Range	26-68= s depression	32	15	9	



		Number of Subjects		
		ITCG Marconi	Liceo "Dei Fiori- Da Penne"	
	0-19 =no depression	22	180	
Score	20-25= probable depression	11	36	
Ranges	26-68= depression	6	67	

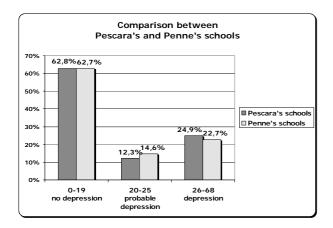
Scoring of the Penne schools in the test for

depression



Comparison between the schools

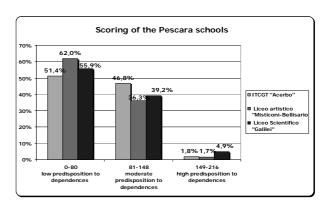
		Number of subjects		
		Pescara's schools	Penne's schools	
	0-19 = no depression	280	202	
Score	20-25 = probable depression	55	47	
Ranges	26-68 = depression	111	73	



The graph compares the scores of all subjects from the schools of Pescara with all those of the schools of Penne. There are no statistically significant differences between the students in the urban area and those in the provinces. The students whose scorings suggest a classification of 'depression' include 24.9% (Pescara) and 22.7% (Penne) of the whole sample. If we also include those scorings which suggest 'probable depression', then we can say that about 37% of the population show difficulties ascribable to depression.

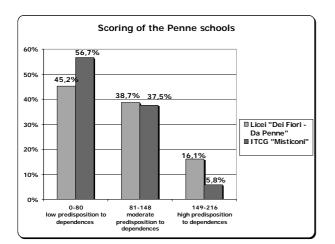
Scoring of the Pescara schools in the questionnaire on dependence on the: internet, videogames, gambling, compulsive shopping

		Number of subjects		
		ITCGT Acerbo	Liceo Artistico	Liceo Scientifico
	0-80 = low predisposition to dependences	56	111	57
Score	81-148 = moderate predisposition to dependences	51	65	40
Ranges	149-216 = high predisposition to dependences	2	3	5



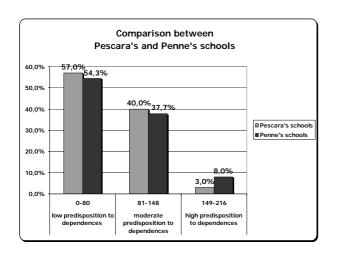
Scoring of the Penne schools in the questionnaire on dependence on the: internet, videogames, gambling, compulsive shopping

		Number of subjects	
		ITCG	Liceo "Dei Fiori-
		Marconi	Da Penne"
	0-80= low predisposition to dependences	14	68
Score	81-148= moderate predisposition to dependences	12	45
Ranges	149-216= high predisposition to dependences	5	7



Comparison between the schools

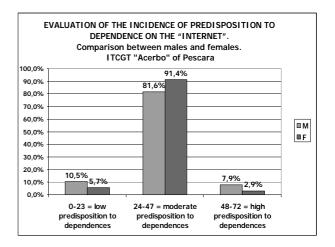
		Number of subjects	
		Penne's schools	Pescara's schools
	0-80 = low predisposition to dependences	82	224
Score	81-148 = moderate predisposition to dependences	57	156
Ranges	149-216 = high predisposition to dependences	12	10



The graph compares the scores which measure the habits linked with internet use, videogames, gambling, and shopping among all the subjects in all the schools of Pescara and Penne. There are no statistically significant differences between the students of the urban area and the countryside, instead there appear to be very similar trends in which the percentage of affected persons decreases as the risk increases. We can, however, note that there is a high number of subjects who are positioned in the central group with a medium risk.

Evaluation of the incidence of predisposition to dependence on the internet

The data from the questionnaires has demonstrated a predominant use of the internet as compared with the other possible objects of dependence. In order to further evaluate this in percentage terms, we have chosen as an example the population of the I.T.C.G.T. "Acerbo", comparing the two sexes. By calculating the maximum and minimum scorings attained by the students of the institute, we have identified three groups (0-23: low predisposition to dependence, 24-47: moderate predisposition to dependence, 48-72: high predisposition to dependence).



If we consider the predisposition of students to the dependence on the internet alone, almost all of the population is at moderate risk. This finding is extremely alarming, especially as the net, with its intrinsic characteristics, is becoming the key source of access to numerous other forms of dependence such as gambling and compulsive shopping.

CONCLUSION

In view of our experience over the last few years and after this first attempt at an evaluation, we feel it important to affirm the fundamental value of prevention, especially when it is delivered through the main educative agencies such as schools. This form of intervention, because it is not identified with clinical and medical stereotypes, facilitates information and understanding and enables us to keep in contact with a group in the population who are at risk of the development of numerous forms of psychopathology.

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