

ROLE OF RISK FAMILY SOCIALIZATION FACTORS IN THE DEVELOPMENT OF DEPRESSION

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Abstract:

Objectives: The aim of this research was to discover on a non-clinical sample the risk factors having a role in the development of predisposition to depression. Methods: The sample was taken on the basis of the existence or lack of predisposing factor: 232 persons belonged to the group of imperilled people, and 219 persons were in the control group. Results: On grounds of a non-clinical sample our research substantiated that certain family socialisation factors may also play role as risk factors in the development of depression. We managed to substantiate that the primary risk factors were the punishing and neglecting way of breeding by parents, the manipulative, inconsistent and consistent educational attitudes, the conflict filled family attitude, and several elements of parental treatment.

Key words: *predisposition to depression, factors, family socialisation.*

1.INTRODUCTION

The predisposing psychosocial factors contribute in a significant extent to the development of depression. According to the vulnerability theory of Brown and Harris (1986) three basic psychosocial factors play an essential role in the development of predisposition to depression: the appearance of the disorder in the family, early-age loss and stressful life.

Several examinations have studied recently the correlation between the predisposing factors and the development of predisposition to depression. The findings of such researches show that, among others, the early loss of mother (Costello, 1982), the positive family anamnesis, early losses, the stressful life and the lack of social support and intimate relations may have predisposing effects (O'Neil et al., 1986), as well as the separation from the parents (Furukawa et al., 1999) or the divorce of parents, if such things occurred in childhood (Palosaari and Aro, 1999).

The researches carried out by Margitics (2005) substantiated unequivocally that the predisposing factors, which may be relevant in terms of the development of predisposition to depression also have their impacts on the sample belonging to the non-clinical population.

In families from lower social levels, the children are exposed to higher stress and this may contribute to the development of the symptoms of depression (Pikó and Fitzpatrick, 2001)

The dysfunctional actions of the parent may also predispose to adult age depression already in the childhood in the case of persons who are inclined to that (Csorba et al., 1994). Conflicts in family, bad relationship with or between the parents, the lack of trust or maltreatment by the parent may lead to the symptoms of depression in adolescent age (Formoso et al., 2000).

Other researches found positive interrelation between depression and the breeding techniques of parents, particularly between rejecting and punishing parental methods, as well as in the field of inconsistency, the lack of acceptance, neglect and malignancy on the parents' side (Richter, 1986).

Our aim with this research was to discover among healthy young people belonging to the non-clinical population the risk and protective factors playing role in the development of predisposition to depression and being related to the family socialisation factors. We intend to contribute with the results of the examination to the effectiveness of preventive programs dealing with the mental health of the youth, and to provide new information for the experts working with families.

2.SAMPLE AND METHODS

700 college students were involved in the research, 681 persons among them (465 females, 216 males) had results worthwhile for evaluation.

The average age was 19.98 (standard deviation 1.51), the value of median was 20 years of age.

When examining the risk factors those students were put in the group of imperilled persons in the case of whom any of the following predisposing factors were present: positive family anamnesis; suffered losses in their early age; suffered longer separation during the first ten years of their lives; suffered more than one of the mentioned negative effects. Those students were put in the control group in the case of whom no effect of any predisposing factor could be detected; the stress load was below the average during the past half a year, the median in the Lifetime Events Questionnaire reached (-6), or a lower point.

The sample developed in accordance with the aforementioned criteria had the following composition: 232 persons belonged to the group of imperilled persons (161 females, 71 males), and 219 persons were in the control group (135 females, 84 males).

During our investigations we used the following tools for the measurement:

Examination of risk factors: Background Questionnaire. Investigation of the actual symptoms of depression: Abridged, screening version of Beck's Depression Inventory (Beck A. T., Beck R. W. 1972). Examination of the family socialisation: Hungarian version of Goch's Family Socialisation Questionnaire (Sallay and Dabert, 2002). The Hungarian adaptation of Parental Bonding Instrument, developed by Parker et al. (Tóth and Gervai, 1999). Examination of lifetime events: Secondary School Lifetime Questionnaire developed by Cohen et al., the Hungarian version adapted by Csorba et al. (Csorba et al., 1994).

Besides descriptive statistics we applied dual-sample t-test for the comparative statistical analysis of the test group and the control group. Data were processed by means of the SPSS for Windows 12.0 statistical program package.

3.RESULTS

During the inspection of the risk factors we analysed all scales of the Family Socialisation Questionnaire and Parental Bonding Instrument to discover the interrelationship between them and the depressive syndromes.

It is apparent that strong and significant deviations were found in many fields between the imperilled group and the control group based on each scale of the two instruments.

Examining the family atmosphere in the two mentioned groups, we found significant deviations regarding the conflict oriented family atmosphere. The members of the imperilled group, independent of their sex, perceived that the atmosphere of their family was strained with more conflicts than the families of the control group members.

No remarkable differences were found by us in terms of breeding targets between the two groups.

An obvious deviation considering the educational attitudes was revealed between the two groups with respect to the manipulative educational attitude that was typical of the imperilled group both regarding the whole sample and for the sexes respectively. It is interesting that the members of both groups perceived their mothers to be more manipulative than their fathers.

Another significant deviation was between the maternal and paternal inconsistent educational attitude, as well as in the field of consistent educational attitude, which was also a characteristic typical to the parents of the persons belonging to the group of imperilled students. Regarding the sexes, such differences were revealed only in the case of women, and we found that such educational attitudes were even more typical to the parents of the students in the group of imperilled persons. Regarding the mentioned attitudes considerable deviations concerning the maternal and paternal educational attitudes were not found in either of the groups.

In terms of the educational style the members of the group of imperilled persons found their parents (primarily the mothers) preferred the punishing educational style, and they found that the lack of supportive educational style was also typical to them however they felt the mother more supportive.

In all scales of the Parental Bonding Instrument firmly significant deviations were found between the two groups. In the case of the group of imperilled persons we found that the parental treatment was characterised by maternal and paternal affection and care, and a lower level of restriction alike, as well as by an intensive maternal and paternal overprotection. Examining the sexes separately the same deviations were revealed in the case of females, however for the males we found significant deviations between the two groups only for the lack of paternal affection and care.

4.CONCLUSION

Our survey verified on a non-clinical sample that certain family socialisation factors may play a role as risk factors in the development of depression in the case of vulnerable persons.

Examining the family atmosphere we could identify the conflict burden family atmosphere as risk factor in line with the results of the researches carried out by Formoso et al., (2000), and we managed to prove the protective effect of the calm and conflict free family atmosphere.

From among the breeding targets neither the lack of breeding for autonomy nor the breeding for conformity were revealed as risk factors.

The examination of the parental educational style showed that the punishing educational style can be identified as a risk factor, that certified the results of the researches implemented by Richter (1986). Additionally we found that the lack of supportive educational style may also be considered as a risk factor. The opponent end points of this educational style have

protective values, that is, the lack of punishing educational style and the preference of supportive breeding style.

Considering the educational attitudes, all the three may emerge as risk factor during family socialisation, if the parents prefer these. The preference of manipulative educational attitude by the parents supports Adler's theory on the development of depression, namely that the depressive behaviour is a subconscious manipulative attempt for the satisfaction of emotional claims (Adler, 1937). Consistent educational attitude coupled with the punishing educational style may appear as an intensive risk factor.

Examining the parental treatment the lack of maternal and paternal affection and care, as well as the lack of restriction, and the maternal and paternal overprotection may also appear as risk factors.

Examining the results of the researches with regard to sexes we found that in the case of women all the aforementioned risk factors activate their effects. In the case of men the situation was different. In their case only the conflict burden family atmosphere, the manipulative and inconsistent educational attitude of parents as well as the lack of paternal affection and care appeared as risk factors. The rest of the examined family socialisation factors did not appear in their cases as risk factors.

The results of our survey indicate that women are more sensitive to the effects of family socialisation appearing risk factors.

The mental hygienic interpretation of the results of our research clearly evidence the need of experts to form the consciousness concerning the discovered risk factors during the supporting and therapy work with families, in order to avoid the manifestation of the serious form of depression requiring clinical treatment in the case of as many persons exposed to risks (imperilled persons) as possible.

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