Interpersonal Approaches to Treating Depression in Adolescents and Adults

Presented By: Mary Acri, PhD
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Outline

1. Depression: An Overview
2. Interpersonal Theories of Depression
3. Assessment & Screening Tools, Strategies and Interventions
4. Case Example
6. Additional Resources
Depression: An Overview
Let’s Chat

‣ Is depression a common diagnosis that you treat or provide services for?

‣ What are you currently doing for adolescents who suffer with depression?

‣ What are you currently doing for adults who suffer with depression?
Prevalence

• Depression is a common mood disorder and the second leading cause of disability worldwide\(^1\)

• Epidemiological studies have shown that depression affects between 4-5% of adolescents annually, and 16.6% of adults at some point during their lifetime.\(^2,3\)

• Certain groups, including women and persons who are impacted by poverty, are at increased risk of depression.\(^4,5\)
Prevalence and Burden

- Untreated depression is associated with...
  - impairments in academic, social, and occupational functioning,
  - comorbid health and mental health disorders,
  - premature morbidity and mortality.6-8

- The annual economic burden of depression is approximated at 52.9 billion in the United States alone.9
Risk Factors

• Risk factors associated with depression include...
  • Biological factors
    • Genetics and hereditary factors\textsuperscript{10,11}

• Psychological factors
  • Co-morbid mental health problems, past suicide attempts\textsuperscript{12,13}

• Environmental and social factors
  • Stressful life events and early childhood experiences, rejection by peers and social isolation\textsuperscript{14-16}

• Among adolescents, a family history of depression and stress exposure are the strongest predictors of depression.\textsuperscript{2}
Theories: Object Relations

- One of the four schools of psychoanalytic theory.
- Premise is that human beings are shaped in relation to the significant others surrounding them.
- Object Relations theory suggests early relationships tend to set the tone for later relationships. Depression caused by problems people have in developing representations of healthy relationships.\(^{18-20}\)
Theories: Interactional Theory

- Postulated that our interactions with others can influence our emotional well-being.\(^{21}\)
- May be moderated by excessive reassurance and rejection.
Theories: Interpersonal Stress

- Those who excessively seek reassurance unintentionally generate negative life events, some of which are interpersonal in nature, that increase their risk for depression.\textsuperscript{22,23}
Assessment: The Bio-Psycho-Social-Spiritual History

Social-cultural - Economic - Political Systems

- Behavior
- Emotions
- Cognition
- Relationships
- Health/Lifestyle
- Spirituality
- Self-Concept
- World Views

Extended Family
Assessment: Ecomap

- Recreation
- Church
- School
- Friends
- College
- Counselor
- Work
- Sports
Assessment: Social Network Map

- Family
- Friends
- Community
- Work/School

- Intimate
- Close
- Distant
Screening and Assessment Tools

- Vary based upon type of relationship (e.g., with parent, significant other) and quality (e.g., trust, intimacy). Also may be part of a larger scale.

1. The Brief Impairment Scale-23 items, assesses functioning in three areas, including interpersonal relationships. For youth 4-17 years of age.²⁴

2. Dyadic Trust Scale-8 items, assesses trust in a romantic relationship.²⁵
Strategies

1. Identifying and Expressing Emotions in Current Relationships
   • Helping the client understand what emotion they are feeling and why.
   • Assisting the client in expressing emotion in a positive, healthy way.

2. Examining the connection between prior relationships and their influence upon current relationships, including one’s behaviors and emotions
3. When working with couples and families, identify negative communication patterns, unrealistic expectations, and how family members interact;

   Interventions may then include...
   a. Communication skills
   b. Education/setting realistic expectations
   c. Changing patterns of interactions

4. Modeling and role play corrective/adaptive interactions with others.
Intervention: Interpersonal Psychotherapy (IPT)

• Developed in the 1970’s.
• Psychodynamically informed.
• Concerned with the interpersonal context-relational factors that predispose, precipitate, and perpetuate the patient’s distress. Four problem areas.
• Brief treatment-ranges from 6-20 sessions.
• Effective for adolescents and adults.
• Individual, couples and group formats.
Stress-Diathesis Model

Psychosocial stressors from any of the problem areas can lead to psychological distress, especially when combined with an attachment disruption in the context of a poor social support network.

Goal-symptom reduction, improved functioning and enhanced social support.
The Interpersonal Triad

- Interpersonal distress leads to psychological sx$s.
- Stressors start this process.
- Capacity of individual to manage crisis biologically and psychologically is influenced by:
  - Biopsychosocialspiritual vulnerabilities (diatheses)
  - Strengths (temperament, attachment style). May modulate or exacerbate the crisis.
- Significant relationships and social support provide the context in which the stress-diathesis interaction occurs, and further modifies the individual's ability to cope with his or her distress.
Problem Areas

▶ Grief
  • Death or loss

▶ Interpersonal Disputes
  • e.g., disputes within families

▶ Role Transitions
  • e.g., divorce, new job, diagnosis of a health condition

▶ Interpersonal sensitivity (deficits)
  • Difficulty forming/maintaining relationships
Structure

- Five phases
  1. Assessment - Clinical interview and determines the appropriateness of IPT for the individual.
  2. Initial Sessions - Creating an interpersonal inventory, developing an interpersonal formulation, contracting for a number of sessions.
  3. Middle Sessions - Address the relevant problem area
  4. Termination Sessions for Acute Treatment
  5. Maintenance Sessions
Techniques

- Nondirective and directive exploration
- Clarification
- Encouragement of affect
  - Express, understand, and manage affect, so to recognize one’s affect, communicate it to others
- Communication analysis
  - Identifying communication patterns and response elicited from others, motivate client to communicate more effectively, learn new ways to communicate.
- Role play
- Problem solving
- Therapeutic relationship
IPT for Adolescents

- Typically for adolescents between 12-18 years of age.

- 1x week, for 12-16 weeks.

- Goals: Remittance of depression via strengthening communication and problem solving skills.

- Family involvement critical. Caregivers receive psychoeducation about depression, learn different patterns of interaction/communication, problem-solving skills, and practice with their child.
IPT for Adolescents

- Phases

Initial Phase

1. Psychoeducation
2. Assigning the sick role
3. Interpersonal inventory
4. Formulating the problem area (same as adults)
IPT for Adolescents

Phases

Middle Phase

1. Actively work on problem area
   - Strategies: clarification of and emotional expression
   - Analysis of communication and problem solving
   - Skill instruction in both areas
   - Role play and homework assignments
IPT for Adolescents

Phases

Termination Phase

1. Review of work together/feelings about ending
2. Relapse prevention and assessment of need for future treatment
Case Example?

- How would you apply these approaches to an adolescent or adult with depression?
- What strategies would you use?
References


References


27. Interpersonal Psychotherapy for Adolescents. Downloaded May 1, 2018 from [http://www.cebc4cw.org/program/interpersonal-psychotherapy-for-depressed-adolescents/detailed](http://www.cebc4cw.org/program/interpersonal-psychotherapy-for-depressed-adolescents/detailed)
Q&A
Resources

1. **IPT for adolescents**
   [http://www.cebc4cw.org/program/interpersonal-psychotherapy-for-depressed-adolescents/detailed](http://www.cebc4cw.org/program/interpersonal-psychotherapy-for-depressed-adolescents/detailed)

2. [https://iptinstitute.com](https://iptinstitute.com)

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Upcoming Events with CTAC

- Effectively Employing and Supervising Youth Peer Advocates, with Bianca Logan, Brianna Valesey, and Azaria Wittekind
  - When: Thursday, June 14 - 1:00 PM

- Motivational Interviewing: Clinical Updates Within Substance Abuse Treatment, with Tara Dewitt
  - When: Tuesday, June 19 - 12:00 PM

- Addressing the Mental Health Needs of Children with Incarcerated Parents, with Anna Morgan-Mullane
  - When: Wednesday, June 27 - 12:00 PM

- And, many other offerings! Visit www.ctacny.org for more information!