

Loneliness and Depression or Depression-Related Factors among Child Welfare-Involved Adolescent Females

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Marina Lalayants, Ph.D. & Jonathan D. Prince, Ph.D Silberman School of Social Work at Hunter College, City University of New York

Background

Loneliness and depression are interrelated among children, adolescents, and adults

However, the literature on loneliness and depression among adolescents is largely cross-sectional instead of longitudinal.

The findings of longitudinal studies have been mixed and contradictory:

- Some evidence suggests that depression predicts loneliness but not vice versa (Lasgaard, Goossens & Elklit, 2011).
- Other evidence suggests that loneliness leads to depression but not vice versa (Vanhalst et al., 2010).

Study Purpose

- Disentangle the causal relationships between loneliness and depression
- Examine bidirectional associations between loneliness and factors that are potentially related to depression, including
 - Low future expectations
 - School disengagement

Methods

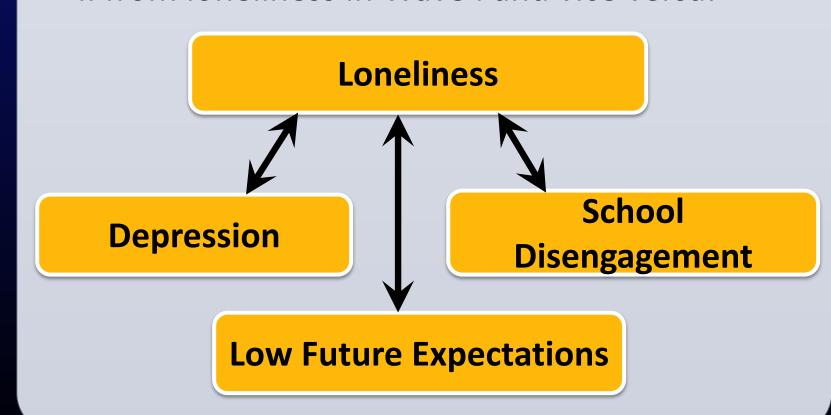
- Focused on child welfare-involved adolescents females
- ➤ Used the National Survey of Child and Adolescent Well-Being II (NSCAW II)
 - Wave I: 2008-2009 (N=5,872)
 - Wave II: 18 months later (N=4,750)
 - The sample was restricted to females over the age of 11 without missing data.

Methods (cont.)

Controlled for child age, race, household poverty, in-home vs. out-of-home care, type of reported child maltreatment, high stress in the family, serious mental illness in a caregiver, poor parenting skills in the caregiver, inappropriate or excessive discipline by the caregiver, presence of arrest history in the caregiver, depression or other emotional problems in the child, social support in the child's family.

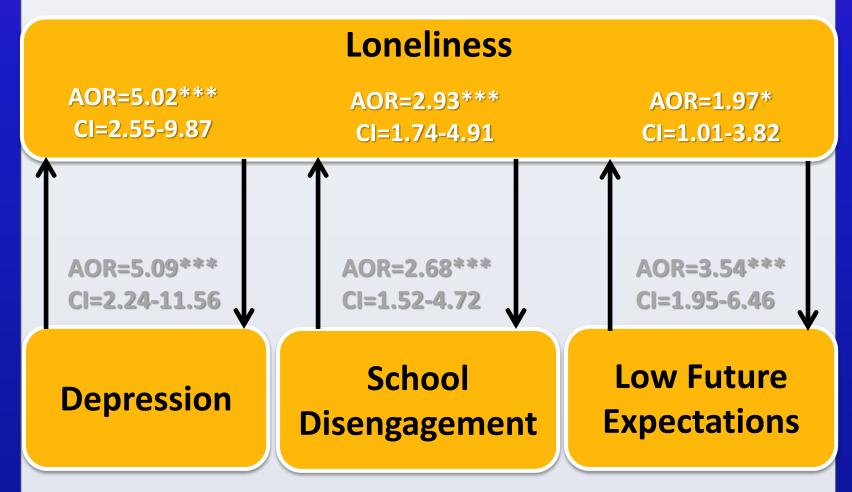
Used the following measures:

- Children's Depression Inventory (Kovacs, 1985).
- *School Engagement Questionnaire* (adapted from the Drug Free Schools Outcome study; (NSCAW I Research Group, 1999).
- Low expectations for the future (NSCAW-developed questions)
- -Duke-University of North Carolina Functional Social Support Questionnaire (NSCAW-adapted version; Broadhead, Gehlbach, DeGruy & Kaplan, 1988)
- DSM-IV criteria for SUD.
- Used adjusted logistic regression to predict depression or depression-related factors in Wave II from loneliness in Wave I and vice versa:



Results

Figure 1: Bidirectional relationships^a between loneliness and depression, loneliness and school disengagement, and loneliness and low expectations for the future.



^aAdjusted odds ratios (AORs) and confidence intervals (CIs) reflect predictions of Wave II outcomes from covariates in Wave I after adjusting for control variables.

*p<.05, ***p<.001

There were statistically significant bidirectional relationships between:

- loneliness and depression
- loneliness and school disengagement
- loneliness and low expectations for the future.

The effect sizes were substantial:

- Lonely female adolescents in Wave I were
 3 5 times more likely to have depression or depression-related factors in Wave II.
- Female adolescents with depression or depression-related factors in Wave I were
- 2 5 times more likely to be lonely in Wave II.

Implications

Identifying loneliness could proactively address:

- Depression
- School Disengagement
- Low Future Expectations

Identifying depression, school disengagement, or low future expectations could address:

- Loneliness
- Loneliness-related outcomes
- poor psychosocial functioning
- substance abuse
- suicidal behavior

Our findings contradict research suggesting:

- Depression predicts loneliness but not vice
- Loneliness predicts depression but not vice versa (Vanhalst et al., 2010).

Our study appears to be the first to:

versa (Lasgaard et al., 2011).

- Focus on child welfare-involved adolescent females who have higher-than-average rates of both loneliness and depression
- Examine factors that relate potentially to depression, including school disengagement and low expectations for the future.

References

Broadhead, W. E., Gehlbach, S. H., DeGruy, F. V., & Kaplan, B. H. (1988). The UNC Functional Social Support Questionnaire: Measurement of social support in family medicine patients. *Medical Care*, 26(7), 709-723.

Kovacs, M. (1985). The Children's Depression Inventory (CDI). *Psychopharmacology Bulletin 21*, 995-998.

Lasgaard, M., Goossens, L., & Elklit, A. (2011). Loneliness, depressive symptomatology, and suicide ideation in adolescence: Cross-sectional and longitudinal analyses. *Journal of Abnormal Child Psychology*, 39, 137-150.

Vanhalst, J., Klimstra, T.A., Luyckx, K., Scholte, R. H. J., Engels, R. C. M. E., & Goossens, L. (2012). The interplay of loneliness and depressive symptoms across adolescence: Exploring the role of personality traits. *Journal of Youth & Adolescence, 41,* 776-787.

Conclusion

Interventions are needed that:

- Identify adolescents with loneliness, depression or depression-related factors.
- Prevent depression, school disengagement, or low expectations for the future by addressing loneliness; e.g., enhancing peer or family relationships, promoting participation in prosocial activities (i.e., sports, clubs at school, youth groups in the community), etc.

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