



e-quilibrium

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Preventing Depression

Mental illness becomes front page news when a human being does something that is extremely repulsive and/or violent, even if the perpetrator of such behavior is not mentally ill. Statistically, persons with mental illness are unlikely to become violent, but our need to explain aberrant behavior often leads to the topic of mental illness when violence occurs. Ensuing discussion may highlight the need for better mental health services, but any mention of prevention tends to be focused on the prevention of violence, not the prevention of mental illness.

Some would argue that mental illness cannot be prevented, and indeed vulnerability to serious mental illnesses has a genetic component. However, the rapid rise in the most common mental health problems cannot be adequately explained with a genetic argument. Many behavioral, social, cultural, and environmental factors are involved. So while it is accurate to say that not all mental illness can be prevented, it is inaccurate to suggest that no mental health problems can be prevented.

In fact, there is compelling evidence demonstrating that one quarter to one half of episodes of major depression (the condition that has become a leading cause of disability) can be prevented. And, simply lessening the severity or duration of depression can minimize the impairment in functioning that occurs with this condition. Furthermore, given that depression is being found at younger ages, delaying the onset of depression itself has benefits.

What's involved in the prevention of depression? Studies to date have largely focused on the development of behaviors and thought patterns that are conducive to being resilient.

Examples of such skills include:

- Identifying and appropriately managing emotions, as well as impulses
- Problem-solving
- Assertiveness and the art of negotiation
- Disputing inaccurate thoughts (which are often negative thoughts)
- Building regular physical activity into one's schedule
- Practicing routines conducive to getting appropriate sleep

How and where can such skills be taught? Most of the relevant studies have examined formal educational programs, either in schools or with parents. Programs have also been tested in nursing homes. Certainly an important place for skill development is in the home, which highlights the necessity for parents to develop and practice these skills in order for their children to learn them. Certainly any person with the skills can model them for others with their behavior. Perhaps most challenging to achieve is a shift in cultural norms so that such skills are highly valued and nurtured.

Occasionally I will have a client who upon learning and benefiting from such skills will say, "I wish I had known these things earlier in my life. I would have avoided lots of suffering and problems." While I am pleased to hear how the individual is benefitting from what she/he has learned, it is regretful that resilience and effective coping aren't more widely promoted.

Mental health certainly can be nurtured. Doing so can reduce vulnerability to depression, but perhaps even more important and more tangible is that the skills of resilience enhance quality of life.

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