

The Contrast Between Depression Now and in the Earlier Generations

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ABSTRACT

Depression is a mood disorder in which one experiences sadness, hopelessness, a loss of desire to live or to enjoy simple activities. It is a prevalent mental disorder that has historically been seen in all age groups. However, depression rates among adolescents have increased in the past few decades. Given this increase, researchers have increasingly studied this topic. According to some of the studies conducted in the past 20 years the increase in adolescent depression has been found to be associated with factors, including increased use of social media among adolescents, decreased free play among children, and more recent COVID-19-related impacts (e.g., staying locked up in their homes for more than a year, doing everything online, not being able to see their close friends.). This article reviews the aforementioned factors in relation to the significant increase in adolescent depression in recent years.

Introduction

Depression represents a serious mood disorder that, in severe cases, can destroy individuals both mentally and physically. Depression has a link to some other mental illnesses and suicide. Another symptom of depression is the loss of desire to live. Though often misconceived as and reduced to just sadness, depression is actually defined as the feeling of low self-worth, guilt, inability to feel emotion and the decreased ability to enjoy life for more than two weeks straight (Britannica, 2021). The fifth edition of the Diagnostic and Statistical Manual (DSM-5) includes many types of depression, such as persistent depressive disorder (PDD), seasonal affective disorder (SAD), and major depressive disorder (MDD) (APA, 2013). These types of depression can range from more mild, tolerable, and manageable to more severe and disruptive. In more severe cases multiple forms of care and longer treatment durations are often required (Lingiardi & McWilliams, 2021). With adult patients, depression is relatively easy to diagnose compared to adolescents because in adolescent's aspects of the normal developmental process can be confused as symptoms of a depressive disorder (Lingiardi & McWilliams, 2021). Early in the course of depression the most common symptoms clinicians usually look for include fatigue, lack of self-care and a change in sleeping habits. Later, depression may cause low self-esteem, feelings of failure and guilt. Among adolescents, depression is often described as a sense of spiraling down (Lingiardi & McWilliams, 2021). Depressed adolescents usually go through metabolization of anger, which is a subtype of depression. It is involving outbursts, fear of the loss of approval and impulsive acts.

Depression is one of the most common mental illnesses in the United States, with 8.4% of adults developing at least one depressive disorder, which is almost 21 million individuals (SAMHSA, 2020). Depression is also more frequently diagnosed in females (10.5%) compared to males (6.2%). In adults, rates of depression also vary by age. In 2020 17% of individuals aged 18-25 were diagnosed with depression, while about 9% of people between the ages 26-49 and almost 6% of people over 50 years old were diagnosed with depression. Meanwhile, 4.1 million (17%) of adolescents (i.e., individuals aged 12 to 17) are known to have suffer from depression in 2020. More specifically, depression rates are higher in female (~25%) than male adolescents (~9%) (SAMHSA, 2020). Depression is also affected by race. The highest rates of adult depression are seen in

those with 2 or more ethnicities (15%) compared to Hispanics (7%), whites (9.5%) and black or African Americans (6%). In adolescents, the highest rates are also seen in two or more ethnicities (29.9%) compared to Hispanics (15.7%), whites (18.7%), black or African Americans (12.9%) and Asians (13.9%).

Depression is also often associated with suicide and other psychiatric disorders. Suicide is one of the leading causes of death among adolescents, ~19% of high school students thought about attempting suicide and 8.9% attempted suicide at least once in the last 12 months. Compared to male students (6.6%), female students (11%) have committed suicide twice as often. Ethnicity is also a contributing factor for suicide rates. In comparison to whites (7.9%), American Indian or Alaska Native students have the highest attended suicide rates (25.5%).

The earliest traces of the concept of depression can be found as far back in history as classical Greek medicine, where the term melancholia was used to describe a state of sadness that lasts for a long period of time, often without any obvious reason and anxiety. This term evolved over time, such that it was regarded in the 16th century as a form of insanity. Then as a severe type of depression around the 20th century. (Wallace & Gach, 2008)

Two psychiatrists, Emil Kraepelin and Phillippe Pinel worked at asylums in the 19th-20th century. The work of Emil Kraepelin (1881) and Philippe Pinel (1792, in Paris) in asylums represents some of the earliest attempts to conduct systematic observation. Also, they recorded the symptoms patients experienced as well as how their condition evolved over extended periods of time. They created systems to categorize persons with diseases using such information. (Andrews, 1998). These classifications started to be used widely in asylums throughout Europe.

Around the 19th-20th centuries, psychologists around the world started using questionnaires to measure a large number of patients' behavior, attitudes and opinions in order to diagnose them more quickly. (McLeod, 2018). Before using any of the scales on adults in the general population, they devised a number of scales and tested them on college students. Large organizations like the American Psychological Association created standards for patient diagnosis that could be adopted by other organizations.

We now gather information on depression from two sources. First, we have information about medical diagnoses (Kathol et al., 1990). Doctors in several nations ask patients about their symptoms and determine how well they match the DSM-IV criteria for various mental disorders. Additionally, they use testing to rule out other illnesses that have similar symptoms (Kathol et al., 1990). We also have information about the intensity of depression, thanks to various surveys and rating systems used to gather this information from patients and the public.

At first scientists focused on adults more than adolescents but as time went by, they started to do some research on adolescent mental health as well. After studying adult depression, they also started to study depression in adolescents and children. Children's Depression Inventory (CDI) is a tool to assess the cognitive, affective, and behavioral symptoms of depression in children and adolescents between the ages of 7 and 17 (Kovacs, 1978). The severity of depressive symptoms in children is rated using the CDI. It was created by Maria Kovacs to make it simpler to identify childhood depression (Kovacs, 1978). It also helps medical professionals identify between pediatric dysthymic disorder and severe depressive disorder, as well as between these diseases and other psychiatric conditions.

In its primary aim, this paper reviews literature to better understand whether present-day youth may be more depressed than youth in earlier generations. The secondary aim of this paper is the identification of potential underlying factors of any observed changes in rates of depression within youth populations. With these aims in mind, the paper first examines the increase in adolescent depression over the last few decades and explores potential factors contributing to this increase. According to the literature reviewed in this paper, there has been a significant increase in the rates of adolescent depression. This paper discusses the increase and some of the reasons thought to be behind it.

The Emergence of Technology and Social Media

The phrase “social media ” is used to describe the range of mobile services, such as blogs, wikis, social bookmarking, social network sites, status update services, virtual world content and media sharing sites (Dewing, 2012). These services let users be a part of online discussions, share their lives and what they are doing, and become a member of online communities (Dewing, 2012).

When social media was first introduced, its main users were adults. However, there was a shift in the demographics of users in the late 2000s, which led to a sudden increase in its popularity and increasing global recognition. Teenagers quickly adapted to social media, replacing adults as the primary social media users (Dewing, 2012; Anderson & Jiang, 2018). Teenagers also started to use social media more frequently than adults (Anderson & Jiang, 2018). Over time, the ways that people use social media have evolved and changed.

When social media was first created it was intended to be used for a way to connect with society. Nowadays it is also used for other purposes than just connecting with society. The usage of social media also differs between adolescents and adults. Adolescents mostly use social media to usually just have fun, talk with their peers, post photos or videos about the things they do in a day and many more (Anderson & Jiang, 2018). However, adults tend to use social media mainly to be informed about the latest news and just to pass time when they are bored (Huntsville, 2021).

Twenge, Martin, and Spitzberg (2019) looked at national trends in the use of media over time/generations among U.S. high school students (N = 1,021,209; 51% female) between 1976 and 2016. According to these researchers, while in 2008 52% of 12th graders said that they use social media almost every day, by 2016 that number increased to 82%. The data on the daily usage of social media from 2016 also differs for different genders and ethnicities. For example, girls tend to use social media more than boys in a day. Also, the daily usage of social media for black and Hispanic 12th graders was greater than for white 12th graders. More specifically, black and Hispanic 12th graders used social media 81 times per day, while their white counterparts used social media 67 times per day (Twenge et al., 2019).

The relationship between social media and adolescent depression is complex and has many contributing factors. For example, social media use is thought to cause health problems, which may also lead to mental health problems. Specifically, when people are spending a lot of time on social media they are usually just sitting somewhere and not moving for a long period of time. This is called sedentary behavior, and if this behavior is consistent then it can cause serious health problems (McCrae & Grealish, 2019).

Twenge (2019) looked at several large studies that examined the effects of social media on mental health. Specifically, the researchers who conducted the studies looked at the relationship between social media screen time and depression, mental health. According to the results of this study as the usage of social media increases the psychological wellbeing of that person decreases. It is observed that adolescents that spend five or more hours a day on social media are 66% more likely to commit suicide compared to adolescents who only go on social media an hour a day.

The Decrease in Play Time

As stated in the previous sections there has been an increase in adolescent depression. Gray argues that increase in depression may be the result of a decrease in adolescents and children's play time. Gray (2011) theorizes that the decrease in depression among adolescents in the last decades may be explained by the significant decrease in their engagement in free play. Free play is when children autonomously choose an activity on their own. For example, when parents direct their kids to play a sport it is not considered free play but if someone wants to play basketball without being under the influence of their parents or friends then it is considered as free play (Gray, 2011). Since 1955, there has been a decline in adolescent free play (Gray, 2011). Within North America

in the 1950's it was possible to see big groups of children and adolescents playing outside after school, but today it is rare to see children or adolescents playing outside and even if they are outside, they are usually under the supervision of an authority, such as their teachers, parents or coaches (Gray, 2011).

According to a study done by sociologists at the University of Michigan, between 1981 and 1997 children and adolescents have less free time to play after school. Additionally, these authors reported a 25% decrease in children and adolescents' time spent playing, a 55% decrease in time spent talking to their family, and a 19% decrease in time spent watching television (Gray, 2011). Meanwhile, this study found that there was an 18% increase in the time children and adolescents spent at school, a 145% increase in the time spent doing their homework, and a 168% increase in the time spent shopping with their parents (Gray, 2011)

Gray looked at a study of Twenge and he found out that from the 1950s there has been a 85% increase in adolescent depression. According to the depression scale of the MMPI between the years 2000 and 2007 the college students that took this test scored 8% higher than the usual clinical depression rate. But between 1938 and 1955 only 1% of the college students scored higher than the usual clinical rate.

MMPI and MMPI-A tests were done to adolescents in the years 1948 and 1989. In these tests they asked the adolescents five questions 1- "I wake up fresh and rested most mornings", 2- "I work under great deal of tension", 3- "Life is a strain for me much of the time", 4- "I have certainly had more than my share of things to worry about" and 5- "I am afraid of losing my mind". According to the results of these tests in 1948, 74.6% of adolescents wake up fresh and rested most mornings, 16.2% work under great tension, 9.5% say that life is stressful most of the time, 22.6% have a lot to worry about and 4.1% are afraid of losing their mind. However, in 1989 31.3% of adolescents wake up fresh and rested, 41.6% work under great tension, 35.0% say that life is a strain most of the time, 55.2% have a lot to worry about and 23.4% are afraid of losing their mind.

The Effects of the Covid 19 Pandemic

The increase in adolescent depression in the last couple of years may also be of the impacts of the COVID-19 pandemic. COVID-19 (Coronavirus) is an infectious disease which started in March 2020 in China and managed to spread around the whole world, resulting in over 2 million deaths (Yen & Dankulincova, 2021) COVID-19 impacted individuals' school, work and social lives. Because of the COVID-19 pandemic, schools switched to online learning, many workplaces closed, and many people lost their jobs. Other impacts of COVID-19 included millions of people being stuck in their homes and not being able to go out for several months. pandemic negatively affected many people, with adolescents facing what researchers have argued may be the greatest psychological burden (Golberstein et al., 2020). Adolescents tend to have a less developed capacity to cope with emotions and deal with the psychological impacts of isolation and may struggle more than adults to cope with such problems. As a result of the feeling of isolation and lack of daily routine caused by the pandemic, many adolescents experience depressive symptoms.

Researchers have examined the relation of adolescents' mental health and the pandemic. The findings of such studies demonstrate a significant increase in depression rates during and after the pandemic. At the very start of the pandemic, they couldn't find any change in adolescents mental health due to the pandemic but as more time went on and the pandemic was still there then they started to see adolescent mental health's association with the Covid 19 pandemic. Research findings suggest that older adolescents faced greater psychological impacts of the pandemic than younger adolescents (Keyes et al., 2019). However, both younger and older adolescents demonstrated increased depressive symptoms over the course of the pandemic (Keyes et al., 2019).

Barendse and her colleagues collected data between January 2016 and September 2020 in order to assess whether levels of depression among adolescents increased during the COVID-19 pandemic. The authors' analysis of the data revealed a 28% median increase in adolescents' depression symptoms within the first six months of the COVID-19 pandemic.

The study conducted by Barendse et al (2020) and her colleagues found that the depression symptoms seen in adolescents increase by 28% from 0.195 to 0.250. During the pandemic the average person's depression rates increased by 0.07% (Marjolein et al., 2022). It is also seen that race/ethnicity is important for the increase of depression because of the pandemic. Barendse et al. (2020) and her colleagues found out that the biggest increase was seen in biracial/multiracial adolescents (Marjolein et al., 2022). Before the pandemic white's depression symptoms mean were 0.17, Asians were 0.20, biracial/multiracial were 0.22, black/ African Americans were 0.13, Latino/Hispanics were 0.15 and other races were 0.14. However, after the pandemic the mean rates showed an increase. In whites the mean rates were 0.21, Asians were 0.21, biracial/multiracial were 0.30, black/African Americans were 0.17, Latino/Hispanics were 0.18 and other race/ethnicities were 0.21 (Marjolein et al., 2022).

Conclusion

Depression rates increased from 6.6% to 7.3% between 2005 year and 2015 year (Goodwin, 2017). The studies reviewed in this paper (e.g., examples of studied reviewed) suggest that there is a potential connection between this increase in depression among adolescents and the decreased engagement in free play since 1950 year, the increased usage of social media within the 2000s, and the effects of the COVID-19 pandemic (e.g., examples) since 2020.

In the first section of the current paper, Peter Gray's (2011) theory about the connection between free play and depression is discussed. According to Peter Gray (2011), engagement in free play began to decline in the 1950's due to a decreased desire among adolescents and children to go outside and play with their friends after school. Gray states that the increase in psychopathology in the last half century in the USA and other countries is related with the increase of depression. The second section of the current paper discusses the relation between the increase in rates of depression and social media use, which may be explained by changes in the demographics of social media users and social media platforms, themselves. While adults initially represented the primary population of social media users at the start of the 2000s, adolescents now represent the population most active on social media (Dewing, 2012; Anderson & Jiang, 2018). Indeed, adolescents increasingly rely on social media for activities and functions, such as talking to their friends and family, socializing with their peers and connecting with society. While the increased use of social media became a problem for adolescents' mental health around the early 2000s, the psychological impacts of COVID-19 represent a more recent yet nonetheless important factor also contributing to the increase in depression among adolescents. For example, government restrictions on in-person gatherings for academic and social purposes have significantly affected adolescents, often by leading to the emergence of mental health issues (Marjolein et al., 2022).

Limitations

Despite the importance of this topic, the current body of literature on the recent increase in adolescent depression is limited to mostly short-term studies that examine changes in levels of depression within just a two-year period.

Additionally, Gray's (2011) research was conducted 70 years ago, which limits its relevance to contemporary life, especially given that the world is quite different than it was in the 1950's. There were different life circumstances for adolescents. Also, since COVID-19 has been a problem for only two years, long term studies on the effects of the pandemic on rates of adolescent depression are not yet available.

Future Research

There is a need for further research exploring the underlying factors of the observed increase in adolescent depression since the middle of the 19th century. Specifically, researchers should focus on developing and implementing long term studies to examine changes in depression levels among adolescents over time. Additionally, researchers should try creative approaches to this research, using mixed sources of data, including more recent measures of adolescent depression as well as archival data pertaining to past levels of depression.

In order to find more accurate studies and results for this topic future studies should look into the effect of play on children and teenagers more. Since some of these studies were conducted 70 years ago, they are not accurate enough. But if we had more recent studies that were conducted in recent external factors then we will get more accurate results. Future studies about COVID-19 should do a long-term study from the start of the pandemic to the very end. This way we can get better results and we can be able to better compare the differences in adolescent depression effect by the pandemic.

Implications for Practice

To reduce the usage of social media therapists should motivate adolescents to use their phone less by maybe putting on screen time, reading more books and going out to hang out with their friends rather than spending their whole day talking to them on social media. We should try to restore children's free time to make them less depressed. In order to achieve that therapists should encourage parents to trust their children and let them go outside more. Therapists should also use play therapy on their child clients. Play therapy is when therapists use play on children that are under 12 years old for them to better understand and express their emotions. That's why if therapists use play therapy on children who have decreased play time, then they will start to feel less depressed. Finally, about the effects of the COVID-19 pandemic adolescents should be encouraged to see therapists in person since they spent more than a year doing everything online and not going out.

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