Feasibility of Enhancing Happiness and Resilience Family-Based Program on Depressive Symptoms among Adolescents

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Abstract

This pilot study examined the feasibility of implementing the Enhancing Happiness and Resilience Family-Based program. Purposive sampling was used to recruit 10 high-school adolescents with mild to moderate depressive symptoms in Kalasin Province, Northeastern, Thailand. Four measures were used to collect data including a demographic data record form, a Thai version of the Center for Epidemiologic Studies Depression Scale, The enhancing happiness and resilience family-based program, and a program evaluation questionnaire. The participants and family members participated in a weekly program for four weeks, 45-60
minutes per week. Descriptive statistics and a nonparametric test were used to analyze the data. Initial results of the pilot study showed that after completing the Enhancing Happiness and Resilience Family-Based program, participants had significantly decreased depressive symptoms. The participants and family members were satisfied with the program’s content and activities. The feasibility of implementing this program to reduce depressive symptoms among adolescents has been supported. Research beyond the pilot study is needed to examine the program under more controlled conditions. It is anticipated that psychiatric-mental health nurses will be able to implement the program for high-school students after further testing.

**Keywords:** Happiness, Resilience, Family Based Program, Depressive symptoms, Adolescents

**Introduction**

Depression has a high prevalence rate worldwide.\(^1\) Its onset occurs most frequently in adolescence, especially between the ages of 15 to 18 years,\(^2\) and creates a large cause of disease burden for this age group.\(^1\) In USA, the prevalence of major depressive episode among adolescents increased from 8.7% in 2005 to 11.3% in 2014.\(^3\) In Japan, the prevalence of depressive symptoms among Japanese high school students in 2016 was 24.9%\(^4\) and between 19%–30% for Thai high school adolescents.\(^5\) An episode of depression during this early age period increases the risk of subsequent depressive episodes in adulthood.\(^6\)

Depression affects all dimensions of adolescents, including physical, psychological, and social. Adolescents may have loss of energy, feelings of tiredness, disturbances in sleep and appetite, and somatic complaints.\(^7,8\) Most factors that influence adolescent depression are based on negative thoughts of self-views.\(^9\) They may suffer from feelings of sadness, guilt, low self-worth/esteem, loneliness, despair, loss of interest, inability to experience pleasure, irritability, mood swings, and poor resilience.\(^10\) Moreover, poor resilience among adolescents can induce interpersonal relationship problems, low problem-solving skills, and a lack of life’s goal.\(^11\) Adolescents may withdraw or isolate themselves from family and peers.\(^9\) Depression may impair an adolescent’s ability to function at school or cope with daily life. They may have academic problems, school dropout, substance abuse, high-risk sexual behavior, and an increased risk for suicide.\(^12,13,15\)

Another important factor that influences depressive symptoms among adolescents is family discord.\(^13\) Evidence supports that adolescent depressive symptoms are associated with difficult family relationships and can predict poor communication with parents over time.\(^14\) Family relationships and parenting styles have been shown to be significantly correlated with depressive symptoms.\(^15\) Negative parenting styles, such as overprotection, excessive over-control and expectations, insecure parental attachments, or neglect have also been associated with depressive symptoms. An empirical study in Thailand reported that 10.2% of Thai’s parenting style was authoritarian. This significantly correlated with depression among the Thai high school adolescents.\(^16\)

Happiness is a positive emotional state or a feeling of pleasure that is subjectively defined by each person.\(^17,18\) Happiness may increase good feelings, energy, self-esteem, positive self-views, optimism, strength, and resilience.\(^10\) Resilience is defined as positive adaptation in the face of risk or adversity.\(^19\) Resilience may increase adolescents’ strength to confront the problem in daily life and provide energy to reach life’s goal.\(^10\) There is evidence to