

Liam Myles¹, Emanuele Merlo²

Incongruities between perceived control and desire for control: accounting for depressive symptomatology in adolescence

Rozbieżność między poczuciem kontroli a potrzebą kontroli:
próba wyjaśnienia występowania objawów depresji w okresie dojrzewania

¹ Department of Psychology, University of Cambridge, Cambridge, UK

² Department of Adult and Childhood Human Pathology, University of Messina, Messina, Italy

Correspondence: Liam Myles, Department of Psychology, University of Cambridge, Fitzwilliam College, Storey's Way, Cambridge, CB3 0DG, Cambridgeshire, UK, tel.: 07530 659 997, e-mail: liam.a.myles@outlook.com

ORCID iDs

1. Liam Myles <https://orcid.org/0000-0002-7050-8112>

2. Emanuele Merlo <https://orcid.org/0000-0001-6041-9186>

Abstract

Adolescence reflects a particularly challenging time for many individuals and is often accompanied by a rise in psychological difficulties. Symptoms of depression represent a particularly common problem experienced by adolescents, with over 21% of the population experiencing such symptoms at some point in their lives. These statistics underline the critical importance of understanding the cognitive mechanisms underpinning the upsurge of depressive symptoms during adolescence. Previous literature has emphasised the importance of both perceived control and desire for control in the manifestation of depressive symptomatology. Indeed, contemporary research indicates that both greater perceived control and elevated desire for control are associated with a reduced risk of depression. This paper extends contemporary theories of depression and outlines a novel model to account for the rise in psychological difficulties during adolescence. Re-examination of the literature indicates that the upsurge of psychological difficulties during adolescence stems from a discrepancy between one's desire for control and one's perception of control. More specifically, it is argued that elevated desire for control in the absence of correspondingly high perceived control, at least partially, contributes to poor psychological welfare in adolescence. The clinical implications are subsequently discussed, with reference to the importance of considering the extent to which adolescents desire control over their lives when undertaking therapeutic interventions.

Keywords: depression, perceived control, desire for control, adolescence

Streszczenie

Okres dojrzewania jest dla wielu osób szczególnie trudnym czasem i często towarzyszy mu nasilenie problemów w sferze psychologicznej. Objawy depresji są szczególnie powszechne wśród młodzieży – doświadcza ich w pewnym momencie swojego życia ponad 21% populacji. Statystyki te wskazują na kluczowe znaczenie zrozumienia mechanizmów poznawczych leżących u podstaw nagłego nasilenia objawów depresji w okresie dojrzewania. We wcześniej opublikowanym piśmiennictwie podkreślano rolę zarówno poczucia kontroli, jak i potrzeby kontroli w symptomatologii depresji. Współczesne badania faktycznie wskazują, że zwiększenie zarówno poczucia kontroli, jak i jej potrzeby wiąże się ze zmniejszeniem ryzyka wystąpienia depresji. W przedstawionej pracy rozszerzono współczesne teorie dotyczące tej jednostki chorobowej oraz przedstawiono nowy model wyjaśniający nasilenie problemów psychologicznych w okresie dojrzewania. Ponowna analiza literatury wskazuje, że narastanie trudności o charakterze psychologicznym w okresie dojrzewania wynika z rozbieżności między potrzebą a poczuciem kontroli. Stwierdzono, że zwiększona potrzeba kontroli przy braku odpowiednio wysokiego poczucia kontroli co najmniej częściowo przyczynia się do obniżenia poziomu dobrostanu psychicznego w okresie dojrzewania. W pracy omówiono również implikacje kliniczne, odnosząc się do znaczenia kwestii, w jakim stopniu młodzi ludzie pragną kontrolować swoje życie w momencie podejmowania interwencji terapeutycznych.

Słowa kluczowe: depresja, kontrola postrzegana, potrzeba kontroli, okres dojrzewania

Adolescence reflects a particularly challenging time for many individuals and is often accompanied by a rise in psychological difficulties (Maughan et al., 2013; Moffitt et al., 2010; Thapar et al., 2012). The importance of working to develop psychological interventions for adolescents has been recognised by “Psychiatria i Psychologia Kliniczna,” with a vast number of publications detailing the bases of psychological difficulties experienced during adolescence (Myles and Merlo, 2021). Depression refers to low mood, persistent despondency and loss of interest in activities that were previously pleasurable (American Psychiatric Association, 2013). Symptoms of depression are a particularly common problem experienced by adolescents (Maughan et al., 2013; Thapar et al., 2012), with over 21% of the population experiencing symptoms at some point in their lives (Auerbach et al., 2018). These statistics underline the critical importance of understanding the cognitive mechanisms underpinning the upsurge of depression during adolescence, so that interventions can be developed to support our teenage population. This paper aims to extend contemporary theories of depression and outline a novel model to account for the rise in psychological difficulties during adolescence. To anticipate the conclusions of this article, re-examination of the literature indicates that the upsurge of psychological difficulties during adolescence stems from a discrepancy between one’s desire for control and one’s perception of control. More specifically, it is argued that elevated desire for control in the absence of correspondingly high perceived control, at least partially, contributes to poor psychological welfare in adolescence.

PERCEIVED CONTROL AND DEPRESSIVE SYMPTOMOLOGY

Early psychological research underscored the importance of perceived autonomy in maintaining one’s psychological welfare (Bandura, 2010; Haidt and Rodin, 1999; White, 1959). Seminal theories suggested that the perceived absence of the ability to control events within one’s environment entailed a causal role in the manifestation of depression (Abramson et al., 1989, 1978; Seligman, 1975). This assumption has been formalised in “Hopelessness Theory” and has received significant empirical support over the last 45 years.

Seminal evidence for the influence of perceived control on psychological welfare comes from research by Glass and Singer (1972), who exposed participants to noxious tones in an experimental setting. Participants were either provided with a button that they could press to terminate the tone or were not provided with any means to terminate the tone. Despite very few terminating the tone in the former condition, participants with access to the button reported reduced psychological distress in response to the noxious stimulus. These results indicate that the perception of control over one’s environment can attenuate one’s propensity to distress in response to noxious environmental events. Masses of subsequent research in both experimental and ecological contexts ascertained supportive evidence for

the role of perceived control in the manifestation of depressive symptomatology. In both adults and adolescents, contemporary literature indicates that diminished perceptions of control are associated with greater depressive symptomatology (Bjørkløf et al., 2016; Cheng et al., 2013; Crandall et al., 2018; Kleinberg et al., 2013; Myles et al., 2020; Volz et al., 2019). Critically, perceived control entails a causal influence on psychological welfare. Evidence for this comes from demonstrations that reductions in perceived control often precede the manifestation of depression (Bjørkløf et al., 2018; Tobin and Raymundo, 2010), with subsequent remission associated with prior elevations in perceived control (Hamilton and Abramson, 1983). Furthermore, low perceived control has been causally implicated in attempting to take one’s own life (Crona et al., 2017; Nicolopoulos et al., 2018), with increments in perceived control associated with subsequent reductions in suicidal ideation (Bostik and Everall, 2007). These results provide overwhelming evidence that maintaining a perception of control over one’s life is critical in preventing the onset of symptoms of depression.

DESIRE FOR CONTROL AND DEPRESSIVE SYMPTOMOLOGY

There is growing evidence that one’s desire for control, pertaining to the extent to which one wishes to exert control over their environment, also influences their risk of developing depressive symptomatology. Preliminary evidence indicates that there is an inverse relationship between desire for control and depressive symptomatology, such that a lower desire for control over one’s life is associated with more severe symptoms of depression (Amoura et al., 2013, 2014; Burger, 1984; Hornsey et al., 2019; Myles et al., 2020). Indeed, diminished desire for control is associated with various factors that have been causally implicated in the development of depression, including loneliness (Solano, 1987) and maladaptive coping styles in response to environmental stressors (Gebhardt and Brosschot, 2002). These results support the notion that reduced desire for control leaves one more susceptible to developing symptoms of depression.

PERCEIVED CONTROL, DESIRE FOR CONTROL AND DEPRESSION

Critically, there is growing evidence that perceived control and desire for control interact to influence one’s risk of depression (Myles et al., 2020). Whilst there is somewhat limited evidence on this, Amoura et al. (2014) reported that elevated desire for control relative to one’s perceived control increases one’s risk of developing depressive symptomatology, compared to a situation in which one’s perceived control is relatively greater than one’s desire for control. Moreover, a recent study by Myles et al. (2021) suggested that desire for control moderates the relationship between perceived control and depressive symptomatology. Specifically, the authors reported that fluctuations in perceived control

maintain a greater impact on depressive symptomology in individuals with lower desire for control, compared to those with higher desire for control. Accordingly, these results indicate that a high desire for control in the absence of a correspondingly high perception of control may increase one's risk of depression (Kakihara et al., 2010; Myles, 2020b).

PERCEIVED CONTROL, DESIRE FOR CONTROL AND PSYCHOLOGICAL WELFARE IN ADOLESCENCE

Whilst relevant more generally, these findings may be particularly pertinent to adolescent psychological welfare. Adolescence represents a period of time in which young people attempt to exert increasing quantities of independence (Eccles et al., 1991; Kakihara and Tilton-Weaver, 2009; Spear and Kulbok, 2004; Wray-Lake et al., 2010), such as staying out late with friends, going to new places and attending parties. One can consider this motivation to be more independent, autonomous and free a facet of elevated desire for control (Burger and Cooper, 1979; Burger and Solano, 1994). In contrast, the independence that adolescents consciously acknowledge that they are being afforded reflects the extent to which they perceive they are in control (Paulhus and Van Selst, 1990).

Indeed, adolescents' greater desire for control is often met with greater control afforded by caregivers. For example, caregivers may allow their children to stay out until 20:00 instead of 18:00, go into the city on their own and attend their first party. Critically, however, such elevations in control may not be matched by correspondingly high increments in perceived control, in situations that carers implement particular restrictions on independence. In line with this proposition, highly controlling parental behaviour has been implicated in the manifestation of internalising difficulties during adolescence (Gecas and Seff, 1990). Importantly, increments in control, subsequent to reductions in controlling parental behaviour, are associated with improved psychological welfare (Conger et al., 1997), indicating that the interaction between desire for control and perceived control entails a causal influence over psychological health. Moreover, intentionally harming oneself, and even attempting to take one's own life, can occur consequential to individuals wanting to be in control of their lives, but feeling that they lack control (Sinclair and Green, 2005; Pavulans et al., 2012). Indeed, this represents a tragic example of the impact of high desire for control in the absence of perceived control.

One interpretation of this literature is that the upsurge in psychological difficulties during adolescence (Maughan et al., 2013; Moffitt et al., 2010; Thapar et al., 2012) may, at least partially, stem from a greater discrepancy between one's desire for control and one's perceived control (Amoura et al., 2014; Kakihara et al., 2010; Myles et al., 2020). Specifically, if adolescents experience a situation in which their desire for control over their lives is greater than their

perceived control, this may have a detrimental impact on their psychological welfare (Myles, 2020b). These results underscore the cognitive mechanisms that may underpin the upsurge in depressive symptomology during adolescence.

CLINICAL IMPLICATIONS

This theory has numerous important clinical implications (Thavapalan et al., 2021). It indicates that clinicians should undertake interventions aiming to empower adolescents by bolstering their perception of control, such that it equates to their desire for control. It is important to highlight the distinction between *actual* control and *perceived* control. This theory does not mean that carers should afford adolescents unlimited freedom, as this could lead to a multitude of obvious problems, not least negligence. However, it is important to increase the extent to which adolescents *perceive* they are in control of their lives. For example, this may involve using strategies to re-orient adolescents' attention towards situations that they possess greater control over, highlighting that perceived absences of control may be over-stated or increasing adolescents' decision making power in specific situations. Indeed, clinical psychologists regularly use cognitive therapy to support clients with symptoms of depression by challenging situations in which they perceive they lack control, in an endeavour to bolster their perception of control (Myles, 2020a). Whilst the efficacy of such interventions is well supported (Pereira et al., 2018; Segal et al., 2018), clinicians must also consider the extent to which clients desire control and aim to match their perceptions of control accordingly. Importantly, such approaches may serve a preventative function. Supporting adolescents to maintain a perception of control that corresponds to their desire for control will support adolescents in maintaining healthy psychological welfare and avoiding the development of depression.

DIRECTIONS FOR FUTURE RESEARCH

Whilst the literature discussed in this review provides strong evidence for this theory, future research is needed to verify whether discrepancies between one's desire for control and one's perception of control entail a causal role in the manifestation of depression. Due to the novel nature of this theory, the literature currently lacks critical evidence examining the causal nature of this relationship. Indeed, understanding the cognitive mechanisms underpinning poor psychological welfare in this age group is of critical importance if we are to develop more effective interventions to support our adolescent populations (Myles, 2021a, 2021b).

CONCLUDING COMMENTS

In conclusion, the literature indicates that the upsurge in psychological difficulties during adolescence may, at least

partially, stem from a discrepancy between their desire for control and their perception of control. Specifically, poor psychological welfare may be a product of high desire for control in the absence of correspondingly high perceived control. It is critical that clinicians consider the extent to which adolescents desire control over their lives when undertaking therapeutic interventions, in order to equate their perception of control with their desire for control.

Conflict of interest

The authors report no financial or personal relationships with other individuals or organisations that could adversely affect the content of the publication and claim ownership of this publication.

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