Risk Factors for Depression

**Intro**
Major depression is an affective disorder characterized by anergia, anhedonia, and subjective low mood (American Psychiatric Association, 2015) that affects roughly 350 people worldwide (World Health Organization, 2012). Despite intensive research during the past several decades, etiology of depressive disorders is not conclusively known. However, research has implicated several risk factors. This essay will review the influences of genetics, early life experiences, personality, and stress on the development of depression.

**Genetics**
Genetic factors play important roles in the development of MDD, as indicated by family, twin, and adoption studies. Twin studies suggest a heritability of 40% to 50%, and family studies indicate a twofold to threefold increase in lifetime risk of developing MDD among first-degree relatives (Sullivan et al., 2000). As with other complex psychiatric disorders, there is no universal susceptibility gene for MDD. It can be expected that multiple genes with small effect sizes contribute to depression (Lohoff, 2010).

**Early Life Experiences**
Beck proposed a developmental and a maintenance model of depression (1979). In this model, core beliefs developed from key life experiences, specifically loss and rejection, predispose an individual to depression. This fits well with more recent research which confirms the influence of early life trauma on risk for depression (Jansen et al., 2006).

Early life rejection, particularly by primary caregivers is linked to insecure attachment and consequent later life depression (Pattem et al., 1993). Attachment is a strong disposition to seek proximity to and contact with a certain specific figure and to do so in certain situations, notably when frightened, tired or ill; it is a lasting psychological connectedness (Bowlby, 1969). Due to early experiences of abandonment and/or rejection, individuals develop a consequent negative internal working model. The internal working model is a set of expectations and beliefs about oneself and others (Bretherton & Munholland, 1999). Individuals with insecure attachment styles may see themselves as unlovable and unworthy of secure affectional ties (Sable, 2000). In adulthood, this manifests itself in adulthood as self-criticism and excessive reassurance seeking; this leads to turbulent relationships and a susceptibility to depression (Pattem et al., 1993).

**Personality**
Research has found that the influence of genetics and early traumatic events on chronic depression is mediated through the personality factor of neuroticism and may be one of the strongest risk factors for depression (Kendler and Gardner, 2011). Neuroticism refers to a tendency to experience negative affect. Longitudinal research (Hirschfeld et al, 1989; Krueger et al, 1996) has found that high premorbid neuroticism is positively associated with the development of depression and that