

Risk factors and prevalence of adolescent depression in Yerevan, Armenia

(A Cross-Sectional Study)

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by

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TABLE OF CONTENTS

LIST OF ABBREVIATIONS.....	iii
ACKNOWLEDGMENT.....	iv
ABSTRACT.....	v
INTRODUCTION.....	1
Depression.....	1
Epidemiology of Depression.....	2
Depression in adolescents.....	2
Risk factors for adolescent depression.....	3
Situation in Armenia.....	4
Study aims.....	5
METHODS.....	6
Study design.....	6
Study population.....	6
Sample size calculation.....	7
Sampling strategy.....	8
Data collection.....	9
Study instrument.....	9
Variables.....	10
Data Management/Data Entry.....	11
Statistical Methods/Analysis.....	11
Ethical considerations.....	12
RESULTS.....	13
Socio-demographic characteristics.....	13
Simple logistic regression.....	14
Testing for multicollinearity between variables.....	15
Multiple logistic regression analysis.....	15
DISCUSSION.....	16
Strengths of the study.....	18
Limitations of the study.....	18
CONCLUSION.....	19
RECOMMENDATIONS.....	19
REFERENCES.....	21
Table 1. Number of high schools according to districts in Yerevan.....	24
Table 2. Participants' socio-demographic characteristics.....	25
Table 3. Description of different independent variables in depressed and not depressed groups.....	27
Table 4. Bivariate logistic regression analysis (unadjusted associations between depression status and independent variables.....	29
Table 5. Testing for multicollinearity between covariates.....	30
Table 6. Final multivariate logistic regression model for depression among 14-17 years old adolescents in Yerevan.....	31
APPENDIX 1: Study Instrument in English and Armenian.....	32
APPENDIX 2: Adolescent Assent Form in English and Armenian.....	47
APPENDIX 3: Contact information in case of questions in English and Armenian.....	49
APPENDIX 4: Informed letter to the head of the schools in English and Armenian.....	50
APPENDIX 5: Consent form to the head of group/grade in English and Armenian.....	51

LIST OF ABBREVIATIONS

MDD	Major Depressive Disorder
WHO	World Health Organization
CES-D	Center for Epidemiologic Studies Depression
BDI	Beck Depression Inventory
DSM-IV-TR	Diagnostic and Statistical Manual IV
LEC	Life Events Checklist
SDQ II	Self Description Questionnaire II
SBQ	Suicidal Behaviors Questionnaire
IRB	Institutional Review Board
MPH	Master of Public Health
CHSR	Center for Health Services Research and Development
OR	Odds Ratio
SCL	Symptom Checklist
HADS	Hospital Anxiety and Depression Scale
VIF	Variance Inflation Factor

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ABSTRACT

Background: Major Depression is a widespread and serious mental health illness. In 2012, 350 million people suffer from depression worldwide. Adolescents have the highest risk of depression. In this age range, 20% have some type of mental disorder and the most common one is depression. In 2012, a survey conducted by the Arabkir medical center in Armenia using a proxy measure of depression found 26% of adolescents with depression.

Objectives: The aim of this study was to measure the prevalence and explore risk factors for depression among adolescents 14-17 years-of-age in Yerevan.

Methods: A cross-sectional survey among 14-17 years old adolescents living and studying in high schools in Yerevan was conducted using two-stage cluster sampling of high schools. Basic descriptive statistics were conducted. Simple and multiple logistic regression analyses were carried out to test associations of potential risk factors with depression, while controlling for potential confounding.

Results: The final sample included 713 students. The prevalence rate of probable depression in the study population was 16.7%, 6.2% for boys and 21.6% for girls. After adjusting for confounders, the study identified potential risk factors associated with the development of depression, including female gender (OR 3.191; $p=0.000$), parents being divorced or separated (OR 2.808; $p=0.008$), having widowed parent (OR 2.544; $p=0.038$), negative change in parents' financial situation (OR 2.423; $p=0.000$), having trouble with classmates (OR 2.707; $p=0.000$), being dissatisfied with housing conditions (OR 3.352; $p=0.024$) and a protective association for having high self-esteem (OR 0.826; $p=0.000$).

Conclusion: This is the first study conducted in Armenia that explored risk factors and prevalence of depression among adolescents. Further research is needed to replicate and expand the findings of this study in the entire Armenian adolescents' population.

INTRODUCTION

Depression

There are various types of mental illnesses, including a wide range of uncomplicated and easily treatable disorders to very serious and severe mental illnesses which require extensive treatment. The most common and widespread psychological disorders include depression, anxiety, bipolar disorders, personality disorders, and psychotic disorders.^{1, 2}

Based on the Diagnostic and Statistical Manual IV (DSM-IV-TR), classifications of depressive disorders include Major Depressive Disorder (MDD), Dysthymic Disorder, and Depressive Disorder Not Otherwise Specified. These disorders are unipolar depressive disorders.³ Major Depression is a widespread and serious mental health illness.⁴ Major Depression is a clinical diagnosis defined as having at least one Major Depressive Episode. The DSM-IV-TR defines major depressive episodes as having at least a two-week period of time where nearly every day and most of the day there is a depressed mood or loss of interest in all activities. At least four symptoms from the following list is required to receive a diagnosis with a major depressive episode:³

- Depressed mood when a person feels sad or empty most of the day
- Loss of interest in all activities
- Positive or negative changes in appetite and weight
- Insomnia or hypersomnia almost every day
- Psychomotor agitation or retardation
- Decreased energy
- Feelings of worthlessness or guilt
- Difficulties in thinking or in concentrating
- Thoughts of death, suicide, and suicide attempt³

The DSM-IV-TR divides depression into the following categories: mild, moderate, severe without psychotic features, or severe with psychotic features.³

Epidemiology of Depression

Major Depression and anxiety are the most common disorders among mental illnesses.⁵

According to a WHO publication in 2012, 350 million people suffer from depression worldwide.⁶ The World Mental Health survey, which was conducted in 17 countries, found that every 20th person had experienced depression in the previous year.⁶ Depression leads to the highest total number of years lost due to disability.⁶ In 2001, unipolar depressive disorder was the leading cause of years-of-life-lost due to disability (YLD) in low, middle and high income countries. In low-and-middle-income countries, an estimated 43.2 millions of years (YLD) are lost due to disability because of depression, contributing to 9.1% of total YLD.⁷

In high-income countries, 8.39 millions of years are lost due to disability caused by depression, which comprises 11.8% of total YLD.⁷ Depression prevalence rates vary between countries. Lifetime prevalence for depression is estimated to be 17% globally. By the year 2020, depression is predicted to be the second leading cause of disability and projected to be the first leading contribution to disease burden by the year of 2030.⁶

Depression in adolescents

The adolescent age group is at the highest risk for developing depression.⁸ According to the WHO, adolescents are defined as being aged 10-19 years old.⁹ It is estimated that in this age range, 20% have some type of psychological disorder¹⁰ and the most common disorder is depression^{11,12}. In the United States, the prevalence rate of depressive disorders among 13-18 years old is 5.9% for girls and 4.6% for boys.¹³ At any given time, it is estimated that

worldwide one-out-of-13 adolescents has major depression.¹⁴ Close to an estimated 7% of adolescents with depression attempt suicide.¹⁵ With the advent of puberty, the prevalence rate of major depressive disorders increases. The proposed reason for this is that adolescence is an important developmental time period accompanied with rapid biological and social changes.¹⁶

Risk factors for adolescent depression

The main risk factors for adolescent depression are divided into four major groups: genetics, environmental factors, stressful life events, and child's individual characteristics.¹⁷

Genetic risk factors for adolescent depression have been most widely researched. From 20% to 50% of adolescents with depression have a family history of depression.¹⁴ Adolescents who have parents with a history of depression are at 3-4 times higher risk of developing depression than those with healthy parents without depression.¹² There is no difference in risk between those with only one or both parents diagnosed with depression.¹⁷

There are several *environmental factors* that are strongly associated with the adolescent's risk of developing depression, including conflicts in the family, low socioeconomic status, physical and/or sexual abuse, parental depression and stressful school environment.¹⁴

Stressful life events are also associated with higher risk of developing depression in adolescents. These events include deaths of family members, friends or loved ones. Divorced parents, negative peer relationships, loss of friendship and loss of parental job are also identified risk factors for depression.¹⁴ Adolescents with a family history of depression are found to be more sensitive to stressful environments and negative life events than those

without family history.¹⁴ Worldwide, half of depressed adolescents have experienced at least two negative life events before they developed depression.¹⁷

Individual characteristics of adolescents such as diminished self-esteem, high self-criticism, cognitive distortion, anxiety, negative attribution, reduced school performance, and social skills scarcity may also play a significant role in the development of depression. Having other mental illnesses such as anxiety disorders, attention deficit hyperactivity disorder, conduct disorder, social phobia, panic and separation anxiety disorder increases risk for depression.¹⁴ Female gender is also a well-established risk factor for major depressive disorder. Females have a two-times higher risk of developing depression after puberty than males.¹²

Situation in Armenia

Based on the World Health Organization's data obtained using the Symptom Checklist (SCL-90R), the Beck Depression Inventory (BDI) and the Hospital Anxiety and Depression Scale (HADS) in 2000-2002, Armenia had higher prevalence rates of psychological disorders than Russia and Western Europe.¹⁸ In 2008, the prevalence rate of psychological disorders in Armenia was reported to be 1.3%, but because it was tabulated based only on registered cases, it is very likely to be an underestimation of the true prevalence.¹⁹

There have been several studies on depression conducted in Armenia.²⁰ These include depression among survivors of the 1988 Gyumri earthquake.^{21- 22} Another study conducted in 2006 in Armenia assessed depression for 65-and-older persons residing in retirement homes as compared to those living in households.²³

There is very limited research evaluating depression among Armenian adolescents. In 2012, the Arabkir medical center conducted a survey on the health behaviors of school-aged children in Armenia.²⁴ The study involved 2,833 adolescents ages 11, 13, and 15 years old. The authors reported responses of participants to two questions that explored depression.

One question asked whether adolescents feel so desperate and sad that they could not do their normal daily activities during the past 12 months for at least a two-week period of time. About 26.0% (19.4% of boys and 32.0% of girls) responded affirmatively to this question, with the highest proportion of positive responses occurring among 15-year olds. A total of 8.9% of children reported having suicidal thoughts during the past 12 months, with 10.1% of the girls giving affirmative responses as compared to 7.5% of the boys. The proportion of those having suicidal thoughts progressively increased with age, with 5.3% indicating suicide thoughts among the 11 year-old group, 8.0% among the 13 year-olds and 13.3% among the 15 year-olds, and was higher in urban areas than rural areas.²⁴ The findings of this study show the need for further exploration of depression and its risk factors among Armenian adolescents to inform the development of effective interventions and policies aimed at prevention and management of adolescent depression.

Study aims

The aim of this study is to describe the prevalence of depression among Armenian adolescents and to explore the risk factors associated with depression among Armenian adolescents in Yerevan. The research questions are the following:

- What is the estimated prevalence of 14-17 year old adolescents having depression in Yerevan, Armenia?

- Are socio-demographic characteristics such as gender, socioeconomic status, family structure, and parents' education risk factors for developing depression among adolescents aged 14-17 year old adolescents in Yerevan, Armenia?
- Are socio-environmental relationships such as parental relationships, peer relationship and school socio-environment risk factors for developing depression among adolescents 14-17 years old in Yerevan, Armenia?
- Are stressful life events such as death of family member and loss of a close friend, risk factors for developing depression among adolescents 14-17 years old in Yerevan, Armenia?

METHODS

Study design

A cross-sectional survey of Yerevan adolescents using a self-administered survey instrument was conducted. The chosen study design was appropriate for answering research questions and was both cost- and time-efficient.²⁵

Study population

The target population of the study included adolescents 14-17 years old living and studying in high schools in Yerevan. Participants included students in 10th, 11th, and 12th high school grades in Yerevan²⁶. The students were chosen from the list of high schools of Yerevan City provided by the Ministry of Education of Armenia. There are 37 high schools in the city.²⁷ Thus the inclusion criteria for the study population were students 14-17 years old who were studying in 10th, 11th and 12th grades in high schools of Yerevan, Armenia and who speak and read Armenian.

Sample size calculation

The sample size was calculated based on a standard formula of comparing two equal size groups for cross-sectional and cohort studies.²⁸

$$\hat{n} = \frac{(z_{1-\frac{\alpha}{2}}\sqrt{2\bar{P}\bar{Q}} + z_{1-\beta}\sqrt{P_1Q_1 + P_2Q_2})^2}{(P_1 - P_2)^2}$$

As gender is one of the reported risk factors for adolescent depression and a leading risk factor to be evaluated in this study, the sample size calculation was based on this factor. The proportions of adolescents having depression (19% of boys and 32 % of girls) found in the study conducted by Arabkir medical center were used for calculating sample size for this study.²⁴ The female gender was used as the exposed group, and male gender as the unexposed group. It was assumed that approximately equal numbers of males and females would be available for sampling in each grade.

$$P_1 = 0.32$$

$$P_2 = 0.19$$

$$Q_1 = 1 - P_1 = 1 - 0.32 = 0.68$$

$$Q_2 = 1 - P_2 = 1 - 0.19 = 0.81$$

$$\bar{P} = \frac{P_1 + P_2}{2} = \frac{0.32 + 0.19}{2} = 0.255$$

$$\bar{Q} = 1 - \bar{P} = 1 - 0.255 = 0.745$$

In the following, \hat{n} is the required sample size for both groups without the continuity correction. Using 95% confidence intervals we have $z_{1-\frac{\alpha}{2}} = 1.96$ and using 80 % power we have $z_{1-\beta} = 0.842$. P_1 is the proportion with the outcome in the exposed group and P_2 is proportion in the unexposed group.

Solving the formula for the sample size, we have:

$$\begin{aligned} \hat{n} &= \frac{(z_{1-\frac{\alpha}{2}}\sqrt{2P\bar{Q}} + z_{1-\beta}\sqrt{P_1Q_1 + P_2Q_2})^2}{(P_1 - P_2)^2} \\ &= \frac{(1.96\sqrt{2(0.255)(0.745)} + 0.842\sqrt{(0.32)(0.68) + (0.19)(0.81)})^2}{(0.32 - 0.19)^2} \\ &= 175.3 \end{aligned}$$

To correct for the continuity correction, the following formula from the same source was used to appropriately adjust the sample size:

$$n = \frac{\hat{n}}{4} \left(1 + \sqrt{1 + \frac{4}{\hat{n}|P_2 - P_1|}}\right)^2 = \frac{175.3}{4} \left(1 + \sqrt{1 + \frac{4}{175.3|0.19 - 0.32|}}\right)^2 = 190$$

The sample size of 190 was calculated for each gender group. Considering the cluster design effect, the sample size was multiplied by two.²⁹ The final target sample size was 760.

Sampling strategy

The selection of participants was based on a two-stage cluster sampling²⁹ of high schools in Yerevan, Armenia. To achieve the planned sample size, 10 schools were randomly selected out of the 37 high schools in Yerevan.³⁰ The high schools were first assigned numbers and then selected through simple random sampling using a random numbers table.³¹ The 10 selected schools represented the clusters. An additional randomly-ordered list of remaining high schools (table 1) was created to replace those schools which might not give permission to conduct the study in their schools. From the 10 selected high schools, three randomly-selected classes (with an estimated average of 25 students) were invited to participate in the survey. The classes were stratified by 10th, 11th, and 12th grades so that one class was selected from each grade. This sampling scheme fulfilled the requirement of sampling a minimum of 75 students per high school ((760/10), the estimated sample size divided by ten high schools).

Data collection

After assent and consent were provided, data were collected using a self-administered questionnaire distributed to students in the three classes representing each of the selected grades. The student investigator collected data during March and April of 2013.

Study instrument

The study instrument is attached in Appendix 1. The main domains are as follows.

Depression: To measure the presence of depression in adolescents, the Center for Epidemiologic Studies Depression (CES-D) scale was used.³² The CES-D is a scale involving six aspects of depression: depressed mood, feelings of guilt and worthlessness, feelings of helplessness and hopelessness, psychomotor retardation, loss of appetite, and sleep disturbance.³² This instrument was validated and has been widely used for the Armenian population.¹⁹ The CES-D scale was originally developed for adults³², but there are also validation studies among children and adolescents.^{33,34}, where the self-report scale was followed by a diagnostic interview, to obtain information about the relationship between the scale scores and diagnoses of depression.

According to the literature the cutoff point for depression is different in different age groups, and thus validation studies have been conducted in different countries to determine these specific cutoff points for adult and adolescent populations separately. Scores on the Center for Epidemiological Studies Depression Scale³² can range from zero to 60. The original CES-D has been standardized for high school populations³⁵, by the author who developed CES-D scale with a score of 19 or higher indicating depressed mood. This cutoff score is used for 20 item CES-D scale. For the current study, because a 16 item CES-D scale was used, an equivalent cutoff of 15 was applied for depression among adolescents.

Identification of stressful life events: Stressful life events were assessed through the Life Events Checklist (LEC).³⁶⁻³⁷ For the purpose of this study, the student investigator used the shortened version of the Life Events Checklist with 15 questions.

Self-perception: Six areas of self-perception were assessed by the Self Description Questionnaire II (SDQ II): body image, opposite sex relations, same sex relations, parent relations, general school image, and general self-esteem.³⁸ The Self Description Questionnaire II is designed to evaluate multiple dimensions of self-perception in high school adolescents.

Suicidal behavior: the Suicidal Behaviors Questionnaire (SBQ) assesses³⁹ whether adolescents have thoughts or have attempted suicide during their lifetime. From the original 90 questions, 4 were used to evaluate suicidal thoughts among adolescents.

Socio-demographic situation: The instrument also includes questions about age, gender, family structure, parental education and occupation, smoking, alcohol, and socioeconomic status.

Variables

The outcome variable of this study was probable depression status. Independent variables included age, gender, family structure, family size, parents' marital status, number of employed household members, mothers' education, mothers' employment, fathers' education, fathers' employment, smoking status, alcohol use, parent being away from home, negative change in parents financial situation, trouble with classmates, family member seriously ill, parents getting divorced, parents arguing with each other, being seriously ill or

injured, break up with boy/girlfriend, trouble with teacher, trouble with brother/sister, having a new stepmother or stepfather, having a new boy/girlfriend, losing close friend, arguing with parents, body image, general self-esteem, school performance, parental relationship, general standard of living rating and satisfaction with housing conditions.

Data Management/Data Entry

The student investigator conducted data entry and data analysis using SPSS 17 software. For data cleaning purposes, the student investigator performed range checks and spot checks.

Statistical Methods/Analysis

Basic descriptive statistics (means, frequencies, standard deviations and confidence intervals) were generated for study variables. After conducting recoding, the data was prepared to analysis. The cut-off point for depression status was having score of depression above 15, so a depression variable was created that discriminated scores less-than-or-equal to 15 as not depressed and above 15 as depressed. The study used the Pearson's chi-square test to compare differences in counts of independent variables by depression status. The study also utilized bivariate and multivariate logistic regression analyses to calculate unadjusted and adjusted odds ratios and 95% confidence intervals for measures of strength of association between independent variables and depression status. Most variables were dichotomous or continuous variables. For categorical variables, dummy variables were created to conduct multivariate analysis.

First, bivariate logistic regression analysis was conducted to identify variables significantly associated with depression status of adolescents. Then, multivariate logistic regression analysis was utilized to measure the association for each variable on the outcome, while

adjusting for confounding. The Hosmer-Lemeshow goodness-of-fit test was used to determine the fit of all logistic regression models. Independent variables were tested for collinearity using the VIF (variance inflation factor) statistic.

Multivariate logistic regression was used to construct the final model, and only those variables which were statistically-significantly associated with the outcome were retained in the model. In the final model, interaction terms were created and tested between the leading variable of interest gender and all other covariates.

Ethical considerations

The Institutional Review Board (IRB) of the American University of Armenia approved this research proposal. Informed consent letters (Appendix 4) were distributed to the heads of schools prior to the study and consent provided by the heads before classes were approached. Oral consents from the teachers (Appendix 5) of each class and students (Appendix 2) were obtained. For all study participants, the student investigator provided contacts of the staff of the Association of Child Psychologists and Psychiatrists (Appendix 3) so that for those who needed professional consultancy and support may get help. Participants received no incentives for their participation.

RESULTS

Overall, 759 students completed the self-administered questionnaires. The response rate for the students was 99.6%. Out of 10 selected schools, one school was not included in the study because the director refused to participate. Overall, nine high schools of Yerevan participated in the study. The response rate for schools participation was 90%. Those participants who did not complete the questionnaires appropriately and had more than four missing responses for the CES-D scale were excluded from the study. Overall, 46 students were excluded from the study. The data from the final sample of 713 participants were used for the analyses.

Socio-demographic characteristics

Table 2 summarizes the basic descriptive characteristics of the study population. The prevalence rate of probable depression in the study population was 16.7%, 6.2% for boys and 21.6% for girls. The mean age of the participants was 15.8 years (SD 0.9). Out of 713 interviewed participants, 226 (31.7%) were males and 487 (68.3%) were females. A total of 37.6% of the students were in 11th grade, 33.0% were in 10th grade and 29.5% were in 12th grade. About one-third of respondents (32.7%) had a family size of four. A total of 43.0% of the students were first born children, 11.8% were middle born and 38.2% were last born. A total of 87.3% of participants' parents were married. Approximately half of the participants (48.6%) had two working family members. A total of 65.3% of students' mothers and 92.9% of students' fathers were employed (Table 2).

The majority of participants' mothers and fathers had university degrees. A total of 22.6% of the participants reported that they had tried cigarette smoking. A total of 54.0% of the participants reported that they have never drunk alcohol. Somewhat less than half (44.8%)

rated their families' general standard of living as "average", and 41.4% are satisfied with their housing conditions. The range of family size is from one to 11.

Simple logistic regression

The results of simple logistic regression analysis for unadjusted associations between depression status and independent variables with odds ratios (OR), 95% confidence intervals (95% CI), and p-values are presented in Table 4. Female adolescents have 4.16 times higher odds of having depression as compared to male adolescents. Having divorced or separated parents increased unadjusted odds 2.44 times for depression as compared to those students who have married parents. Having widowed parent produced unadjusted odds for depression of 2.77 times. Students whose parents were away from home had 1.67 times higher odds of having depression as compared to those students whose parents were not away from home.

Those adolescents who experienced negative change in parents' financial situation had 3.64 times higher unadjusted odds of having depression. Those adolescents who reported having trouble with classmates were at 3.13 times higher adjusted odds for depression. Those adolescents whose parents have gotten divorced were at 2.04 times higher odds for depression. Those students who reported their parents argued with each other had a 3.79 times higher unadjusted odds for depression. Those students who argue more with their parents had 4.14 times higher odds for depression.

Both rating general standard of living as below average and being dissatisfied with housing conditions produced unadjusted odds for depression close to 3.5. Break up with boy/girlfriend, having trouble with brother and/or sister, losing a close friend, having a

seriously ill family member were also all associated with increased unadjusted odds for depression.

The unadjusted OR of the association between improving body image and depression was 0.87, which means that for every 1 unit increase in the body image score, the odds for depression declined by 13%. Among other bivariate statistically-significant protective factors were better parental relationship, improved school performance, and improved general self-esteem.

Testing for multicollinearity between variables

All the independent variables that were significant in bivariate logistic regression analysis and were included in the initial multivariate logistic regression analysis were tested for multicollinearity using the VIF (variance inflation factor) statistic (Table 5). The analysis found no multicollinearity within our covariates.

Multiple logistic regression analysis

Multiple logistic regression analysis was performed to detect associations between the dependent and independent variables while adjusting for confounders (Table 6). Covariates that were not statistically significant were removed from the final model. Interaction terms were created and tested for a leading covariate of interest gender with all other covariates, but no interaction terms were statistically significant and were thus all interaction terms were removed from the final model (not shown in table).

The final multiple logistic regression analysis found some important statistically significant risk factors for depression. After adjusting for confounders, the odds of having depression

was more than three times higher among female students than male students. Adjusted odds of having depression was 2.80 times higher in students having separated or divorced parents as compared to the students whose parents are married. Similarly, adjusted odds of having depression was 2.54 times higher in students having one parent dead. The adjusted odds of having depression was almost two-and-a-half times higher among those adolescents who experienced negative change in parents' financial situation. The adjusted odds of having depression was 2.70 times higher for students having problems with classmates. The adjusted odds of having depression was 3.35 times higher for students rating their housing conditions dissatisfactory compared to those who rate their housing conditions as neither dissatisfactory nor satisfactory.

A protective factor was also identified. For every 1 unit increase in general self esteem scale there was a 17% decrease of odds of having depression, after adjusting for potential confounders.

DISCUSSION

This cross-sectional study investigated the prevalence rate and the relationship for socio-demographic factors, environmental factors, and stressful life events with depression in 713 adolescents aged 14-17 years old in Yerevan.

The study found that the prevalence of probable depression was 16.7% among the adolescents in the study. According to 2007 year report in the United States approximately 28% of adolescents are expected to have had an episode of depression by the age of 19 years.¹⁷ Other study found that 20% of youth will have at least one episode of depression prior to reaching the age of 18 years.¹⁴ Young et al. mention that approximately 15% of adolescents experienced depression.⁴⁰

One of the most important determinants for depression was female gender. This finding corresponds well to the literature, which suggests that adolescent girls are at about two times higher risk for depression as compared to boys.⁴¹⁻⁴⁴ Though we explored potential effect modifications between gender and other independent variables to further explain the differences in depression between the adolescent boys and girls, we found no interactions. Two other important risk factors found in this study are related to parents' marital status. The results showed that having widowed, divorced or separated parents is statistically significantly associated with depression among Armenian adolescents.⁴⁵⁻⁴⁸ This indicates that major changes in the relationship between parents may have an impact on the likelihood of depression in their children.

Findings also showed that socioeconomic factors may also play a substantial role in adolescent depression. Study findings found that both negative changes in parents' financial situation and being dissatisfied with housing conditions was associated with increased likelihood of depression in the adolescents. Other studies have shown similar findings, where families' low socioeconomic status is linked to adolescent depression.^{47,49-54}

Findings of the study also showed that interpersonal relationships in school are also associated with increased likelihood of depression among adolescents. In our study reported having trouble with classmates was a risk factor for adolescent depression. This is consistent with other findings.^{47,55}

One of the potentially modifiable protective factors against depression found in our study was high self-esteem. This is also consistent with findings in other studies.^{47,55,56} If self-esteem is causally associated with the protective effect against adolescent depression, then programs

that improve self-esteem among this age group in the schools may provide an effective way to reduce rates of depression among these students.

Strengths of the study

This is the first study that explored the prevalence of and risk factors of depression among adolescents in Armenia. To measure depression among adolescents, we used the CES-D questionnaire, which is validated and widely used in Armenian population. Also many of the potential risk factors were measured by questions used widely internationally.

A two stage cluster sampling method allowed selection of schools through a random sampling scheme, giving equal chance of selection to schools and students from each districts in Yerevan. This provided us with a representative sample for Yerevan students in these grades. The use of self-administered questionnaires may have increased the validity of the findings, because it provided further confidentiality and hopefully provided impetus for students to answer to the questions more honestly, especially for more sensitive questions. Another strength of the study is that we provided a service to the students by informing them about services to the students for psychological counseling services.

The power analysis also showed that the actual power was much larger (0.99) than the originally calculated power (0.80) for the main independent variable (gender).

Limitations of the study

Several potential limitations should be considered when interpreting our results. The risk factor assessment instruments were not validated in the Armenian adolescent population, but

it was developed based on other questionnaires previously used to investigate the risk factors for depression in other countries and pretested among their study populations.

Other potential limitation of this study could be the recall bias, because participants were asked about events that had happened during the past five years of the respondents' lifetime. Those 46 participants who did not complete the questionnaires and were removed from the study could have been different from those who completed the survey, which could cause some bias, but this only represented 6% of the entire study population-limiting the potential bias. The study results also cannot necessarily be generalized for the whole of Armenia, because it was conducted only in Yerevan.

CONCLUSION

The study found the estimated prevalence of depression among 14-17 years old adolescents in Yerevan, Armenia. The study identified several important factors associated with the development of depression in Armenia. These factors included female gender, parents being divorced or separated, having parent, who died, experiencing negative change in parents' financial situation, having trouble with classmates, low general self esteem, being dissatisfied with housing conditions.

RECOMMENDATIONS

This study's findings provide information on the design and development of more effective interventions to reduce depression among adolescents in Yerevan. It not only identified those adolescents at highest risk for depression, but also found a modifiable protective factor of higher self-esteem that might be translated into an effective program in the schools to reduce the likelihood of depression.

Further research is needed to replicate and expand the findings of this study in the entire Armenian adolescents' population. It would be important to conduct a similar study in the rural areas of Armenia in order to compare the prevalence of depression and its risk factors between urban and rural areas.

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Table 1. Number of high schools according to districts in Yerevan

N	Sampling Order	Name	District
1	8	N 159 h/s	Nor Nork
2	36	N 139 h/s after K. Demirchyan	Nor Nork
3	27	N 142 h/s after A. Gharibyan	Nor Nork
4	12	N 62 h/s	Nor Nork
5	35	N 198 h/s	Nor Nork
6	3	N 149 h/s after V. Davtyan	Arabkir
7	20	N 148 h/s after M. Galshoyan	Arabkir
8	24	N 83 h/s after H. Galstyan	Arabkir
9	34	N 54 h/s after M. Kajuni	Arabkir
10	33	N 190 h/s after G. Gyulbekyan	Malatia
11	9	N 105 h/s	Malatia
12	32	N 184 h/s after S. Khanzadyan	Malatia
13	1	N 112 h/s after Sh. Simonyan	Malatia
14	26	N 3 h/s after M. Abeghyan	Kentron
15	30	N 42 h/s after T. Shevchenko	Kentron
16	17	N 29 h/s after A. Margaryan	Kentron
17	4	N 182 h/s after G. Emin	Kentron
18	37	N 114 h/s after Kh. Dashtents	Kentron
19	18	Yerevan state Engineer constructing university h/s	Kentron
20	7	Yerevan state Engineer university h/s	Kentron
21	5	Yerevan state pedagogical university h/s after Kh. Abovyan	Kentron
22	19	Yerevan state agriculture university h/s	Kentron
23	25	N 189 h/s after S. Gevorgyan	Davitashen
24	15	N 170 h/s	Avan
25	16	N 16 h/s after Av. Isahakyan	Erebuni
26	11	N 119 h/s after B. Jamkochyan	Erebuni
27	10	N 195 high school	Ajapnyak
28	29	N 94 h/s after G. Margaryan	Ajapnyak
29	14	N 118 h/s after A. Yerznkyan	Ajapnyak
30	31	N 109 h/s	Ajapnyak
31	6	N 115 h/s after S. Hovsepyan	Shengavit
32	28	N 97 h/s	Shengavit
33	22	N 65 h/s after Leo	Shengavit
34	21	N 46 h/s	Shengavit
35	23	N 127 h/s after L. Arisyan	Kanaker-Zeytun
36	2	N 103 h/s after H. Gyulikekhvyan	Kanaker-Zeytun
37	13	N 30 h/s	Kanaker-Zeytun

Table 2. Participants' socio-demographic characteristics

Variable	Mean	SD	n (N=713)	Percent
Gender (male)			226	31.7%
Age (years)	15.76	0.923		
14			61	8.6%
15			226	31.7%
16			249	34.9%
17			169	24.8%
School Grade				
10 th			235	33%
11 th			268	37.6%
12 th			210	29.5%
Number of family members	4.84	1.368		
1			1	0.1%
2			16	2.3%
3			63	9.3%
4			223	32.7%
5			199	29.2%
6			121	17.8%
7			34	5%
8			11	1.6%
9			5	0.7%
10			6	0.9%
11			2	0.3%
Birth order				
First born			303	43.0%
Middle born			83	11.8%
Last born			269	38.2%
Only child			47	6.7%
Twins			3	0.4%
Parents' marital status				
Married			617	87.3%
Divorced			38	5.4%
Separated			14	2.0%
Never married			2	0.3%
Never married, but live together			2	0.3%
Widowed			34	4.8%
Widowed parent				
Mother Dead			5	0.7%
Father Dead			29	4.1%
Number of family members employed	2.01	0.953		
0			10	1.4%
1			193	27.8%
2			338	48.6%
3			103	14.8%
4			40	5.8%
5			6	0.9%
6			5	0.7%
Mother				
Employed			370	53.9%

	Unemployed	235	34.2%
	Self-employed	77	11.2%
	Seasonal worker or farmer	2	0.3%
	Retired	2	0.3%
Mother's education			
	School (less than 10 years)	6	0.9%
	School (10 years)	75	11.7%
	Professional technical education (10-13 years)	91	14.2%
	Institute/University	429	67.1%
	Postgraduate	39	6.1%
Father			
	Employed	593	91.3%
	Unemployed	33	5.1%
	Self-employed	6	0.9%
	Seasonal worker or farmer	8	1.2%
	Retired	5	0.7%
Father's education			
	School (less than 10 years)	17	2.8%
	School (10 years)	73	12.2%
	Professional technical education (10-13 years)	99	16.6%
	Institute/University	359	60.2%
	Postgraduate	48	8.1%
Family general standard of living			
	Substantially below average	8	1.2%
	Little below average	32	4.7%
	Average	307	44.8%
	Little above average	261	38.0%
	Substantially above average	78	11.4%
Satisfaction with housing conditions			
	Very dissatisfied	11	1.6%
	Dissatisfied	15	2.2%
	Neither dissatisfied nor satisfied	141	20.3%
	Satisfied	288	41.4%
	Very satisfied	241	34.6%

Table 3. Description of different independent variables in depressed and not depressed groups

Variable		Not depressed n(%)	Depressed n(%)	P- value*
Age (years)	14	56 (91.8%)	5 (8.2%)	0.279
	15	189 (83.6%)	37 (16.4%)	
	16	205 (82.3%)	44 (17.7%)	
	17	144 (81.4%)	33 (18.6%)	
Gender	Males	212 (93.8%)	14 (6.2%)	0.000
	Females	382 (78.4%)	105 (21.6%)	
Grade	10th	201 (85.5%)	34 (14.5%)	0.054
	11th	229 (85.4%)	39 (14.6%)	
	12th	164 (78.1%)	46 (21.9%)	
Number of family members	1-3	67 (83.8%)	13 (16.3%)	0.523
	4	192 (86.1%)	31 (13.9%)	
	5	160 (80.4%)	39 (19.6%)	
	6	102 (84.3%)	19 (15.7%)	
	7-11	46 (79.3%)	12 (20.7%)	
Birth order	First born	248 (81.8%)	55 (18.2%)	0.769
	Middle born	69 (83.1%)	14 (16.9%)	
	Last born	228 (84.8%)	41 (15.2%)	
	Only child and twins	43 (86.0%)	7 (14.0%)	
Parents' marital status	Married	528 (85.3%)	91 (14.7%)	0.001
	Divorced or separated	38 (70.4%)	16 (29.6%)	
	Widowed	23 (67.6%)	11 (32.4%)	
Number of employed household members	0-1	163 (80.3%)	40 (19.7%)	0.416
	2	280 (82.8%)	58 (17.2%)	
	3	90 (87.4%)	13 (12.6%)	
	4-6	44 (86.3%)	7 (13.7%)	
Mothers' Education	≤10 years	62 (76.5%)	19 (23.5%)	0.003
	10-13 years	67 (73.6%)	24 (26.4%)	
	≥13 years	403 (86.1%)	65 (13.9%)	
Mother is current employed	Yes	380 (84.6%)	69 (15.4%)	0.178
	No	191 (80.6%)	46 (19.4%)	
Fathers' education	≤10 years	74 (82.2%)	16 (17.8%)	0.925
	10-13 years	82 (82.8%)	17 (17.2%)	
	≥13 years	341 (83.8 %)	66 (16.2%)	
Father is current employed	Yes	510 (84.0%)	97 (16.0%)	0.644
	No	33(86.8%)	5 (13.2%)	
Smoking	No	459 (84.5%)	84 (15.5%)	0.116
	Yes	126 (79.2%)	33 (20.8%)	
Smoking age	<7 years old	21 (75.0%)	7 (25.0%)	0.278
	8-11 years	16 (69.6%)	7 (30.4%)	
	12-15 years	66 (85.7%)	11 (14.3%)	
	>16 years old	25 (75.8%)	8 (24.2%)	
Alcohol use	<once a week	544 (83.8%)	105 (16.2%)	0.224
	>once a week	25 (75.8%)	8 (24.2%)	

Parent being away from home				
	No	376 (85.8%)	62 (14.2%)	0.011
	Yes	199 (78.3%)	55 (21.7%)	
Negative change in parents financial situation				
	No	359 (90.7%)	37 (9.3%)	0.000
	Yes	216 (72.7%)	81 (27.3%)	
Trouble with classmates				
	No	310 (90.6%)	32 (9.4%)	0.000
	Yes	266 (75.6%)	86 (24.4%)	
Family member seriously ill				
	No	434 (85.1%)	76 (14.9%)	0.017
	Yes	140 (77.3%)	41 (22.7%)	
Parents gotten divorced				
	No	540 (83.9%)	104 (16.1%)	0.034
	Yes	33 (71.7%)	13 (28.3%)	
Parents arguing with each other				
	No	491 (87.2%)	72 (12.8%)	0.000
	Yes	81 (64.3%)	45 (35.7%)	
Being seriously ill or injured				
	No	489 (84.2%)	92 (15.8%)	0.070
	Yes	84 (77.1%)	25 (22.9%)	
Break up with boy/girlfriend				
	No	408 (85.9%)	67 (14.1%)	0.003
	Yes	164 (76.6%)	50 (23.4%)	
Trouble with teacher				
	No	364 (84.7%)	66 (15.3%)	0.148
	Yes	209 (80.4%)	51 (19.6%)	
Trouble with brother/sister				
	No	422 (87.0%)	63 (13.0%)	0.000
	Yes	151 (73.7%)	54 (26.3%)	
New boy/girlfriend				
	No	409 (83.8%)	79 (16.2%)	0.373
	Yes	162 (81.0%)	38 (19.0%)	
Loosing close friend				
	No	433 (86.1%)	70 (13.9%)	0.001
	Yes	141 (75.0%)	47 (25.0%)	
Arguing more with parents				
	No	460 (88.8%)	58 (11.2%)	0.000
	Yes	113 (65.7%)	59 (34.3%)	
Rating general standard of living				
	Below average	24 (60%)	16 (40.0%)	0.000
	Average	256 (83.4%)	51 (16.6%)	
	Above average	290 (85.5%)	49 (14.5%)	
Satisfaction with housing conditions				
	Dissatisfied	12 (46.2%)	14 (53.8%)	0.000
	Neither dis. nor satisfied	104 (73.8%)	37 (26.2%)	
	Satisfied	463 (87.5%)	66 (12.35%)	

*Statistically significant difference, $p \leq 0.05$

Table 4. Bivariate logistic regression analysis (unadjusted associations between depression status and independent variables

Variable		P-value*	OR	95% CI	
Gender	Males				
	Females	0.000	4.162	2.325	7.452
Parents' marital status[#]	Married (Ref.)				
	Divorced or separated	0.005	2.439	1.306	4.556
	Widowed	0.008	2.771	1.306	5.876
Parent being away from home	No				
	Yes	0.012	1.676	1.122	2.505
Negative change in parents financial situation	No				
	Yes	0.000	3.639	2.381	5.560
Trouble with classmates	No	0.000	3.132	2.022	4.852
	Yes				
Family member seriously ill	No	0.018	1.672	1.093	2.558
	Yes				
Parents gotten divorced	No	0.038	2.045	1.041	4.018
	Yes				
Parents arguing with each other	No	0.000	3.789	2.439	5.885
	Yes				
Break up with boy/girlfriend	No	0.003	1.857	1.234	2.794
	Yes				
Trouble with brother/sister	No	0.000	2.395	1.593	3.603
	Yes				
Loosing close friend	No	0.001	2.062	1.361	3.124
	Yes				
Arguing more with parents	No	0.000	4.141	2.730	6.282
	Yes				
Body image		0.000	0.872	0.828	0.918
Parental relationship		0.000	0.803	0.760	0.848
School performance		0.000	0.901	0.865	0.939
General self esteem		0.000	0.836	0.800	0.873
Rating general standard of living[#]	Average (Ref.)				
	Below average	0.000	3.457	1.723	6.936
	Above average	0.537	0.876	0.576	1.334
Satisfaction with housing conditions[#]	Neither dis. nor satisfied (Ref.)				
	Dissatisfied	0.003	3.560	1.519	8.342
	Satisfied	0.000	0.435	0.279	0.678

[#] Dummy variables

* Statistically significant difference, $p \leq 0.05$

Table 5. Testing for multicollinearity between covariates

Variable		VIF
Gender	Males	1.186
	Females	
Parents' marital status[#]	Married (Ref.)	2.110
	Divorced or separated	
	Widowed	
Parent being away from home	No	1.105
	Yes	
Negative change in parents financial situation	No	1.310
	Yes	
Trouble with classmates	No	1.212
	Yes	
Family member seriously ill	No	1.135
	Yes	
Parents gotten divorced	No	2.179
	Yes	
Parents arguing with each other	No	1.390
	Yes	
Break up with boy/girlfriend	No	1.179
	Yes	
Trouble with brother/sister	No	1.209
	Yes	
Loosing close friend	No	1.148
	Yes	
Arguing more with parents	No	1.394
	Yes	
Body image		1.442
Parental relationship		1.731
School performance		1.236
Self scale		1.682
Rating general standard of living[#]	Below average	1.184
	Average (Ref.)	
	Above average	
Satisfaction with housing conditions[#]	Neither dis. nor satisfied (Ref.)	1.166
	Dissatisfied	
	Satisfied	

[#] Dummy variables

Table 6. Final multivariate logistic regression model for depression among 14-17 years old adolescents in Yerevan

Variable	P-value*	OR	95% CI	
Gender				
Males				
Females	0.000	3.191	1.674	6.083
Parents' marital status[#]				
Married (Ref. group)				
Divorced or separated	0.008	2.808	1.308	6.031
Widowed	0.038	2.544	1.052	6.155
Negative change in parents financial situation				
No				
Yes	0.000	2.423	1.478	3.971
Trouble with classmates				
No				
Yes	0.000	2.707	1.624	4.514
General self-esteem(scale)				
	0.000	0.826	0.785	0.868
Satisfaction with housing conditions[#]				
Neither dissatisfied nor satisfied (Ref.)				
Dissatisfied	0.024	3.352	1.172	9.592
Satisfied	0.221	0.720	0.426	1.218

[#] Dummy variables

*Statistically significant difference, $p \leq 0.05$

APPENDIX 1: Study Instrument in English and Armenian

ID _____

Dear Student,

Please actively participate in this survey. Please read the questions carefully and honestly answer to all questions. There are no right or wrong answers, we are interested in your own viewpoint. You don't need to mention your name, this survey is anonymous. Your answers are confidential and will be used for this research only. Your answers will not be available to your teachers, parents, friends or other people.

<p>1. What is your birth date? _____ / _____ / _____ Day / Month / Year</p>
<p>2. What is your gender? 1. Male 2. Female</p>
<p>3. In which grade do you study now? 1. 10 2. 11 3. 12</p>
<p>4. What is the total number of people living in your household including yourself? _____</p>
<p>5. With whom do you live in your household? (Check all that apply)</p> <p>Adults</p> <p><input type="checkbox"/>1. Mother <input type="checkbox"/>2. Father <input type="checkbox"/>3. Stepmother <input type="checkbox"/>4. Stepfather <input type="checkbox"/>5. Grandmother <input type="checkbox"/>6. Grandfather <input type="checkbox"/>8. Others (<i>specify</i>) _____</p> <p>Children</p> <p>Please indicate how many sisters and brothers live with you in your family?</p> <p><input type="checkbox"/>9. Sisters/stepsisters _____ <input type="checkbox"/>10. Brothers/stepbrothers _____</p>
<p>6. What is your birth order among your sisters/stepsisters and brothers/stepbrothers living in your family?</p> <p>1. First born 2. Middle born 3. Last born 4. Other (<i>specify</i>) _____</p>
<p>7. Your parents are:</p> <p>1. Married 2. Divorced 3. Separated 4. Never married 5. Never married but living together 6. Widowed (<i>Please specify which parent is dead</i>) _____ 7. Other (<i>specify</i>) _____</p>
<p>8. How many members of your household are currently employed (including self-employed, seasonal worker, farmer or other regular work)? _____</p>

Please continue answering questions, if you have a mother/female guardian, but if you do not have a mother/female guardian please go to question 11.

9. Is your mother/female guardian currently employed?

1. Yes
2. No
3. Self-employed
4. Seasonal worker or farmer
5. Retired
6. Don't know
7. Other (*specify*) _____

10. How much education has your mother/female guardian completed?

1. School (less than 10 years)
2. School (10 years)
3. Professional technical education (10-13 years)
4. Institute/University
5. Postgraduate
6. Don't know
7. Other (*specify*) _____

Please continue answering questions if you have a father/male guardian, but if you do not have a father/male guardian please go to question 13.

11. Is your father/male guardian currently employed?

1. Yes
2. No
3. Self-employed
4. Seasonal worker or farmer
5. Retired
6. Don't know
7. Other (*specify*) _____

12. How much education has your father/male guardian completed?

1. School (less than 10 years)
2. School (10 years)
3. Professional technical education (10-13 years)
4. Institute/University
5. Postgraduate
6. Don't know
7. Other (*specify*) _____

<p>13. Have you ever tried cigarette smoking, even one or two puffs?</p> <ol style="list-style-type: none"> 1. Yes 2. No (SKIP TO Q. 17)
<p>14. How old were you when you first tried a cigarette</p> <ol style="list-style-type: none"> 1. 7 years old or younger 2. 8 or 9 years old 3. 10 or 11 years old 4. 12 or 13 years old 5. 14 or 15 years old 6. 16 years old or older
<p>15. During the past 30 days (one month), on how many days did you smoke cigarettes?</p> <ol style="list-style-type: none"> 1. 0 days (SKIP TO Q. 17) 2. 1 or 2 days 3. 3 to 5 days 4. 6 to 9 days 5. 10 to 19 days 6. 20 to 29 days 7. All 30 days
<p>16. During the past 30 days (one month), on the days you smoked, how many cigarettes did you usually smoke?</p> <ol style="list-style-type: none"> 1. Less than 1 cigarette per day 2. 1 cigarette per day 3. 2 to 5 cigarettes per day 4. 6 to 10 cigarettes per day 5. 11 to 20 cigarettes per day 6. More than 20 cigarettes per day
<p>17. On average, how often do you drink alcoholic beverages?</p> <ol style="list-style-type: none"> 1. Never (SKIP TO Q.19) 2. Less than once a week 3. One to three times a week 4. Four or more times a week 5. Daily
<p>18. How many drinks containing alcohol do you have on a typical day when you are drinking (one drink is 1 glass of wine; can/bottle of beer; shot of liquor, whiskey or vodka, or mixed drink)?</p> <ol style="list-style-type: none"> 1. none 2. 1 or 2 3. 3 or 4 4. 5 or more

CES-D

Below is a list of the ways you might have felt or behaved. Please tell me how often you have felt this way during the **past seven days**.

During the Past Week

N		Rarely or none of the time (less than 1 day)	Some or a little of the time (1-2 days)	Occasionally or a moderate amount of time (3-4 days)	Most or all of the time (5-7 days)
19	I was bothered by things that usually don't bother me.	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>
20	I did not feel like eating; my appetite was poor.	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>
21	I felt that I could not shake off the blues even with help from my family or friends.	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>
22	I had trouble keeping my mind on what I was doing.	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>
23	I felt depressed.	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>
24	I felt that everything I did was an effort.	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>
25	I thought my life had been a failure.	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>
26	I felt fearful.	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>
27	My sleep was restless.	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>
28	I talked less than usual.	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>
29	I felt lonely.	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>
30	People were unfriendly.	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>
31	I had crying spells.	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>
32	I felt sad.	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>
33	I felt that people dislike me.	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>
34	I could not get "going."	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>

Life Events Checklist

Below is a list of things that sometimes happen to children. Put a “+” in the space by each of the events that have happened to you during the past five years. For each of the events you check, also indicate if you felt that the event was a good event or bad event. Finally, write down how much you feel the event has changed or has had an impact or effect on your life by placing a circle around the correct statement. Remember for each event you have experienced over the past five year

- (1) Place a “+” in the space after each question to indicate you have experienced the event
- (2) If you put “+” after the event, then in one of next 2 columns indicate whether you viewed the event as a good or bad event
- (3) Then in one out of last 4 columns indicate how much effect the event has had on your life.
- (4) If you haven’t experienced the event then put “-” in the space after the question and go to the next question.

N	Event	Whether occurred	Good	Bad	No impact	Some impact	Moderate impact	Great impact
35	Has either parent been away from home more?							
36	Has there been a negative change in how much money your parents have?							
37	Have you had any trouble with classmates?							
38	Has any family member been seriously ill or injured?							
39	Have your parents gotten divorced?							
40	Have your parents been arguing more?							
41	Have you been seriously ill or injured?							
42	Have you broken up with a boy/girlfriend?							
43	Have you had trouble with a teacher?							
44	Have you had trouble with a brother or sister?							
45	Do you have a new stepmother or stepfather?							
46	Have you had a new boyfriend/girlfriend?							
47	Have you lost a close friend?							
48	Have you been arguing more with your parents?							
49	Are there any other events that we haven’t talked about? Fill in below:							
50								
51								
52								
53								

Self Description Questionnaire II

Use the six-point scale to indicate how true (like you) or how false (unlike you), each statement over the page is as a description of you. Please do not leave any statements blank.

N		False, Not like me at all; it isn't like me at all	Mostly false	More false than true	More true than false	Mostly true	Statement describes me well; it is very much like me
54	I hate the way I look	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>	6. <input type="checkbox"/>
55	Overall, I am a failure	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>	6. <input type="checkbox"/>
56	It is difficult to make friends with members of my own sex	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>	6. <input type="checkbox"/>
57	My parents are usually unhappy or disappointed with what I do	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>	6. <input type="checkbox"/>
58	I get bad marks in most school subjects	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>	6. <input type="checkbox"/>
59	Other people think I am good looking	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>	6. <input type="checkbox"/>
60	I make friends easily with boys	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>	6. <input type="checkbox"/>
61	My parents really love me a lot	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>	6. <input type="checkbox"/>
62	I get a lot of attention from members of the opposite sex	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>	6. <input type="checkbox"/>
63	I have trouble with most school subjects	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>	6. <input type="checkbox"/>
64	If I really try I can do almost anything I want to do	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>	6. <input type="checkbox"/>
65	Most of my friends are better looking than I am	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>	6. <input type="checkbox"/>
66	People of the opposite sex whom I like, don't like me	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>	6. <input type="checkbox"/>
67	I have lots of arguments with my parents	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>	6. <input type="checkbox"/>
68	I am too stupid at school to get into a good university	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>	6. <input type="checkbox"/>
69	I feel that my life is not very useful	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>	6. <input type="checkbox"/>
70	I make friends easily with girls	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>	6. <input type="checkbox"/>
71	I am good looking	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>	6. <input type="checkbox"/>
72	My parents understand me	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>	6. <input type="checkbox"/>
73	Most school subjects are just too hard for me	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>	6. <input type="checkbox"/>
74	Nothing I do ever seems to turn out right	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>	6. <input type="checkbox"/>
75	Overall, I have a lot to be proud of	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>	6. <input type="checkbox"/>
76	I have good friends who are members of my own sex	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>	6. <input type="checkbox"/>
77	Most things I do, I do well	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>	6. <input type="checkbox"/>

78. How would you rate your families' general standard of living?		
<ol style="list-style-type: none"> 1. Substantially below average 2. Little below average 3. Average 4. Little above average 5. Substantially above average 		
79. How satisfied are you with your housing conditions?		
<ol style="list-style-type: none"> 1. Very dissatisfied 2. Dissatisfied 3. Neither dissatisfied nor satisfied 4. Satisfied 5. Very satisfied 		
80. Have you thought about or attempted suicide in your lifetime?		
<ol style="list-style-type: none"> 1. No (<i>SKIP TO Q.84</i>) 2. It was just a passing thought 3. I briefly considered it, but not seriously 4. I thought about it and was somewhat serious 5. I had a plan of suicide, which I thought would work and seriously considered it 6. I attempted suicide, but I do not think I really meant to die 7. I attempted suicide, and I think I really hoped to die 		
81. How often have you thought about suicide?		
<ol style="list-style-type: none"> 1. Not at all 2. Rarely 3. Sometimes 4. Often 5. Very often 		
82. What chance is there that you will consider the possibility, no matter how remote, of suicide?		
<ol style="list-style-type: none"> 1. No chance at all 2. A little chance 3. Some chance 4. Likely 5. Very likely 		
83. How likely is that you will attempt suicide?		
<ol style="list-style-type: none"> 1. No chance at all 2. A little chance 3. Some chance 4. Likely 5. Very likely 		
84. What deaths have occurred in your family during your lifetime?		
	Relationship to you	Year of death
1		
2		
3		
4		
5		

Սիրելի՛ ավագ դպրոցի սան,

Խնդրում ենք Ձեզ ակտիվորեն մասնակցել այս հարցմանը: Խնդրում ենք ուշադիր կարդալ հարցը և անկեղծորեն պատասխանել բոլոր հարցերին: Հարցերը չունեն ճիշտ կամ սխալ պատասխաններ, մեզ հետաքրքրում է հենց Ձեր կարծիքը:

Անհրաժեշտ չէ նշել Ձեր անուն-ազգանունը, այս հարցումն անանուն է: Ձեր պատասխանները հասանելի են միմիայն հարցումն անցկացնող խմբին, այն չեն տեսնի ոչ Ձեր ուսուցիչները, ոչ էլ ծնողները, ընկերները կամ այլ անձինք:

<p>1. Նշեք Ձեր ծննդյան ամսաթիվը _____/_____/_____</p> <p style="text-align: center;">Օր / Ամիս / Տարի</p>
<p>2. Ձեր սեռը.</p> <p style="margin-left: 20px;">1. Արական</p> <p style="margin-left: 20px;">2. Իգական</p>
<p>3. Ո՞ր դասարանում եք սովորում:</p> <p style="margin-left: 20px;">1. 10-րդ</p> <p style="margin-left: 20px;">2. 11-րդ</p> <p style="margin-left: 20px;">3. 12-րդ</p>
<p>4. Քանի՞ հոգի է ապրում Ձեր տանը ներառյալ Ձեզ: _____</p>
<p>5. Ու՞մ հետ եք ապրում Ձեր տանը: (Նշեք բոլորին)</p> <p style="margin-left: 20px;">Մեծահասակներ</p> <p style="margin-left: 40px;"><input type="checkbox"/>1. Մայր</p> <p style="margin-left: 40px;"><input type="checkbox"/>2. Հայր</p> <p style="margin-left: 40px;"><input type="checkbox"/>3. Խորթ մայր</p> <p style="margin-left: 40px;"><input type="checkbox"/>4. Խորթ հայր</p> <p style="margin-left: 40px;"><input type="checkbox"/>5. Տատիկ</p> <p style="margin-left: 40px;"><input type="checkbox"/>6. Պապիկ</p> <p style="margin-left: 40px;"><input type="checkbox"/>8. Այլ (նշել) _____</p> <p style="margin-left: 20px;">Երեխաներ</p> <p style="margin-left: 20px;">Նշեք քանի՞ քույր և եղբայր ունեք (նշեք 0 եթե չունեք)</p> <p style="margin-left: 40px;"><input type="checkbox"/>9. Քույր (խորթ քույր) _____</p> <p style="margin-left: 40px;"><input type="checkbox"/>10. Եղբայր (խորթ եղբայր) _____</p>
<p>6. Ո՞րն է Ձեր ծննդյան հերթականությունը Ձեր քույրերի և եղբայրների միջև:</p> <p style="margin-left: 20px;">1. Առաջինն եմ ծնվել</p> <p style="margin-left: 20px;">2. Միջնեկն եմ ծնվել</p> <p style="margin-left: 20px;">3. Վերջինն եմ ծնվել</p> <p style="margin-left: 20px;">4. Այլ (նշել) _____</p>

7. Ձեր ծնողները

1. Անուսնացած են
2. Բաժանված են
3. Ապրում են առանձին
4. Երբեք չեն անուսնացել
5. Երբեք չեն անուսնացել, բայց ապրում են միասին
6. Այրի է (*Նշեք խնդրեն թե որ ծնողն է մահացել*) _____
7. Այլ (*Նշել*) _____

8. Ձեր տան անդամներից քանի՞ հոգի է աշխատում (հաշվեք նաև նրանց, ովքեր աշխատում են տանը, զբաղվում են հողագործությամբ, սեզոնային կամ արտագնա աշխատանքով): _____

Շարունակեք պատասխանել հարցերին եթե Դուք ունեք մայր (կին խնամակալ): Եթե Դուք չունեք մայր (կին խնամակալ), ապա անցեք հարց 11-ին:

9. Ձեր մայրը (կին խնամակալը) ներկայում աշխատու՞մ է:

1. Այո
2. Ոչ
3. Տանն է աշխատում
4. Սեզոնային աշխատող կամ հողագործ է
5. Թոշակառու է
6. Չգիտեմ
7. Այլ (*Նշել*) _____

10. Նշեք ամենաբարձր կրթությունը, որ Ձեր մայրը (կին խնամակալը) ստացել է:

1. Թերի միջնակարգ (10 տարուց քիչ)
2. Դպրոց (10 տարի)
3. Միջին մասնագիտական (10-13 տարի)
4. Ինստիտուտ/համալսարան
5. Հետդիպլոմային/Ասպիրանտուրա
6. Չգիտեմ
7. Այլ (*Նշել*) _____

Շարունակեք պատասխանել հարցերին եթե Դուք ունեք հայր (տղամարդ խնամակալ): Եթե Դուք չունեք հայր (տղամարդ խնամակալ), ապա անցեք հարց 13-ին:

11. Ձեր հայրը (տղամարդ խնամակալը) ներկայում աշխատու՞մ է:

1. Այո
2. Ոչ
3. Տանն է աշխատում
4. Սեզոնային աշխատող կամ հողագործ է
5. Թոշակառու է
6. Չգիտեմ
7. Այլ (*Նշել*) _____

12. Նշեք ամենաբարձր կրթությունը, որ Ձեր հայրը (տղամարդ խնամակալը) ստացել է:

1. Թերի միջնակարգ (10 տարուց քիչ)
2. Դպրոց (10 տարի)
3. Միջին մասնագիտական (10-13 տարի)
4. Ինստիտուտ/համալսարան
5. Հետդիպլոմային/Ասպիրանտուրա
6. Չգիտեմ
7. Այլ (**Նշել**) _____

13., Դուք երբևէ փորձել եք ծխել՝ ներառյալ մեկ - երկու անգամ ծուխը քաշելու փորձը:

1. Այո
2. Ոչ (**Անցնել Հարց 17-ին**)

14. Քանի՞ տարեկան էիք դուք, երբ առաջին անգամ փորձեցիք ծխախոտ:

1. 7 տարեկանում կամ ավելի փոքր հասակում
2. 8 կամ 9 տարեկանում
3. 10 կամ 11 տարեկանում
4. 12 կամ 13 տարեկանում
5. 14 կամ 15 տարեկանում
6. 16 տարեկանում կամ ավելի մեծ հասակում

15. Վերջին 30 օրվա (մեկ ամսվա) ընթացքում քանի՞ անգամ եք ծխախոտ օգտագործել:

1. Ոչ մի օր (**Անցնել Հարց 17-ին**)
2. 1 կամ 2 օր
3. 3-5 օր
4. 6-9 օր
5. 10-19 օր
6. 20-29 օր
7. ամեն օր

16. Վերջին 30 օրվա (մեկ ամսվա) ընթացքում սովորաբար քանի՞ ծխախոտ եք ծխել այն օրերին, երբ ծխել եք:

1. օրական 1 ծխախոտից պակաս
2. օրական 1 ծխախոտ
3. օրական 2-5 ծխախոտ
4. օրական 6-10 ծխախոտ
5. օրական 11-20 ծխախոտ
6. օրական 20 ծխախոտից ավելի

17. Միջինում որքա՞ն հաճախ եք օգտագործում ռգելից խմիչքներ:

1. Երբեք (**Անցնել Հարց 19-ին**)
2. Շաբաթը մեկ անգամից հազվադեպ

<p>3. Շաբաթը մեկից երեք անգամ</p> <p>4. Շաբաթը չորս անգամ կամ ավելի հաճախ</p>
<p>18. Սովորաբար, օրական քանի՞ բաժին ոգելից խմիչք եք Ղուք օգտագործում այն օրերին, երբ օգտագործում եք <i>(մեկ բաժին է մի բաժակ գինին կամ մի շիշ գարեջուրը կամ մի ըմպանակ լիկյորը, կոնյակը կամ օղին):</i></p> <p>1. Ոչ մի</p> <p>2. Մեկից երկու</p> <p>3. Երեքից չորս</p> <p>4. Հինգ կամ ավելի</p>

Նշեք, խնդրեմ թե **վերջին 7 օրվա** ընթացքում Ղուք որքա՞ն հաճախ եք զգացել Ձեզ այնպես, ինչպես նկարագրված է այստեղ (**Պատասխանեք, խնդրեմ, ԲՈՒՈՐ հարցերին**)

		Հազվադեպ կամ երբեք (<1 օր)	Երբեմն (1-2 օր)	Բավականին հաճախ (3-4 օր)	Մշտապես (5-7 օր)
19	Ես հուզվում էի այնպիսի բաներից, որոնք սովորաբար ինձ չեն հուզում:	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>
20	Ես չեի ուզում ուտել: Վատ ախորժակ ունեի:	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>
21	Ես չեի կարողանում ազատվել տխրությունից՝ անգամ ընտանիքիս և ընկերներիս օգնությամբ:	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>
22	Ես չէի կարողանում ուշադրությունս կենտրոնացնել արածիս վրա:	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>
23	Ես ինձ ընկճված էի զգում:	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>
24	Ես ամեն ինչ անում էի մեծ դժվարությամբ:	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>
25	Ես մտածում էի, որ կյանքս իզուր է անցել:	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>
26	Ես վախ էի զգում:	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>
27	Ես վատ էի քնում:	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>
28	Ես ավելի քիչ էի խոսում, քան սովորաբար:	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>
29	Ես ինձ միայնակ էի զգում:	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>
30	Մարդիք անբարյացկամ էին:	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>
31	Ես լացի պոռթկումներ էի ունենում:	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>
32	Ես տխուր էի:	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>
33	Ես զգում էի, որ դուր չեմ գալիս մարդկանց:	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>
34	Ես չէի կարողանում հուռնի մեջ ընկնել:	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>

- Ստորև բերված է իրադարձությունների ցանկ, որ կարող են պատահել երեխաների հետ:
- Ա)** Կարդացեք յուրաքանչյուր իրադարձությունը և հաջորդող սյունյակում դրեք «+» եթե այն պատահել է Ձեզ հետ **վերջին հինգ տարիների ընթացքում**:
 - Բ)** Հաջորդ երկու սյունյակներից մեկում նշեք, թե արդյոք այն **լավ** թե՛ **վատ** է եղել Ձեզ համար:
 - Գ)** Վերջին չորս սյունյակներից մեկում նշեք, թե այդ դեպքը որքա՞ն լավ կամ վատ կերպով է անդրադարձել Ձեզ վրա կամ փոխել Ձեր կյանքը:
 - Դ)** Եթե դեպքը չի պատահել Ձեզ հետ **վերջին հինգ տարիների ընթացքում**, ապա հաջորդող սյունյակում դրեք «-» և անցեք հաջորդ հարցին:

		Արդյոք պատահել է	Լավ	Վատ	Ոչ մի ազդեցություն	Որոշ ազդեցություն	Չափավոր ազդեցություն	Մեծ ազդեցություն
35	Արդյոք Ձեր ծնողներից մեկը տանից բացակայե՞լ է երկար ժամանակով:							
36	Արդյոք եղե՞լ է բացասական փոփոխություն Ձեր ծնողների ֆինանսական կարգավիճակում:							
37	Ունեցե՞լ եք արդյոք խնդիրներ դասընկերների հետ:							
38	Արդյոք ընտանիքի որևէ անդամ լուրջ հիվանդ կամ վիրավոր եղե՞լ է:							
39	Ձեր ծնողները ամուսնալուծվե՞լ են:							
40	Արդյոք Ձեր ծնողները վիճե՞լ են միմյանց հետ ավելի հաճախ:							
41	Արդյոք Դուք եղե՞լ եք լուրջ հիվանդ կամ վիրավոր:							
42	Արդյոք Դուք դադարեցրե՞լ եք Ձեր սիրային հարաբերությունները ընկերոջ կամ ընկերուհու հետ:							
43	Արդյոք ունեցե՞լ եք խնդիրներ Ձեր ուսուցչի հետ:							
44	Արդյոք ունեցե՞լ եք խնդիրներ Ձեր քրոջ կամ եղբոր հետ:							
45	Արդյոք Դուք ունեցե՞լ եք նոր խորթ մայր կամ խորթ հայր:							

46	Արդյոք Ունեցե՞լ եք նոր սիրային հարաբերություններ (ընկեր կամ ընկերուհի):						
47	Արդյոք Դուք կորցրե՞լ եք Ձեր մտերիմ ընկերոջը:						
48	Արդյո՞ք ավելի հաճախ եք սկսել վիճել Ձեր ծնողների հետ:						
49	Եթե կան այլ իրադարձություններ, որոնք մենք չենք նշել լրացրե՞ք ստորև.						
50							
51							
52							
53							

Վեց բալանոց սանդղակով նշեք թե որքանո՞վ է Ձեզ համապատասխանում կամ չի համապատասխանում յուրաքանչյուր արտահայտությունը: Խնդրում ենք **չթողնել** որևէ հարց անպատասխան:

		Ճիշտ է, ընդհանր ապես իմ մասին է	Հիմնականում ճիշտ է	Ավելի շատ սխալ է քան ճիշտ	Ավելի շատ ճիշտ է քան սխալ	Հիմնականում ճիշտ է	Շատ ճիշտ է, սա իմ մասին է
54	Ես ատում եմ իմ արտաքին տեսքը:	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>	6. <input type="checkbox"/>
55	Ընդհանուր առմամբ ես ծախողակ եմ:	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>	6. <input type="checkbox"/>
56	Ինձ համար դժվար է ընկերանալ իմ սեռի ներկայացուցիչների հետ:	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>	6. <input type="checkbox"/>
57	Իմ ծնողները սովորաբար դժգոհ կամ հիասթափված են նրանից թե ինչ եմ անում:	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>	6. <input type="checkbox"/>
58	Ես վատ գնահատականներ եմ ստանում դպրոցական առարկաների մեծ մասից:	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>	6. <input type="checkbox"/>
59	Ուրիշները կարծում են, որ ես լավ տեսք ունեմ:	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>	6. <input type="checkbox"/>
60	Ես ավելի հեշտ եմ ընկերանում տղաների հետ:	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>	6. <input type="checkbox"/>
61	Իմ ծնողները իսկապես ինձ շատ են սիրում:	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>	6. <input type="checkbox"/>
62	Ես շատ ուշադրության եմ արժանանում հակառակ սեռի ներկայացուցիչների կողմից:	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>	6. <input type="checkbox"/>

63	Ես դժվարություն ունեմ դպրոցական շատ առարկաներից:	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>	6. <input type="checkbox"/>
64	Եթե ես իսկապես փորձեմ ես կարող եմ անել, գրեթե ամեն բան, ինչ ուզում եմ:	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>	6. <input type="checkbox"/>
65	Իմ ընկերներից շատերը ավելի լավ տեսք ունեն բան ես:	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>	6. <input type="checkbox"/>
66	Ես դուր չեմ գալիս այն հակառակ սեռի ներկայացուցիչներին, ովքեր ինձ դուր են գալիս:	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>	6. <input type="checkbox"/>
67	Ես ունեմ բազմաթիվ խնդիրներ իմ ծնողների հետ:	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>	6. <input type="checkbox"/>
68	Ես թույլ առաջադիմություն ունեմ դպրոցում համալսարան ընդունվելու համար:	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>	6. <input type="checkbox"/>
69	Ձգում եմ, որ իմ կյանքը այնքան էլ օգտակար չէ:	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>	6. <input type="checkbox"/>
70	Ես ավելի հեշտ եմ ընկերանում աղջիկների հետ:	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>	6. <input type="checkbox"/>
71	Ես լավ տեսք ունեմ:	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>	6. <input type="checkbox"/>
72	Իմ ծնողները հասկանում են ինձ:	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>	6. <input type="checkbox"/>
73	Ես դժվարությամբ եմ հաղթահարում դպրոցական առարկաների մեծ մասը:	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>	6. <input type="checkbox"/>
74	Կարծես ամեն ինչ, որ ես անում եմ ճիշտ չի լինում:	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>	6. <input type="checkbox"/>
75	Ընդհանուր առմամբ ես հպարտանալու շատ բան ունեմ:	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>	6. <input type="checkbox"/>
76	Ես ունեմ լավ ընկերներ, ովքեր իմ սեռին են պատկանում:	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>	6. <input type="checkbox"/>
77	Շատ բաներ ինչ-որ ես անում եմ՝ լավ եմ անում:	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>	6. <input type="checkbox"/>

78. Ինչպե՞ս կգնահատեք Ձեր ընտանիքի նյութական վիճակը ներկայում:

1. Միջինից բավականին ցածր
2. Միջինից մի փոքր ցածր
3. Միջին
4. Միջինից մի փոքր բարձր
5. Միջինից բավականին բարձր

79. Ինչքանո՞վ եք գոհ Ձեր տան (բնակարանի) պայմաններից:

1. Շատ դժգոհ եմ
2. Դժգոհ եմ

- 3. Ոչ դժգոհ եմ, ոչ էլ՝ գոհ
- 4. Գոհ եմ
- 5. Շատ գոհ եմ

80. Արդյոք Դուք երբևէ մտածե՞լ եք կամ փորձել եք ինքնասպանության փորձ կատարել Ձեր ողջ կյանքի ընթացքում:

- 1. Ոչ (Անցնել հարց 84-ին)
- 2. Դա պարզապես անցողիկ միտք էր
- 3. Ես համառոտ մտածել եմ, բայց ոչ լրջորեն
- 4. Ես մտածել եմ դրա մասին և դա ինչ որ չափով լուրջ էր
- 5. Ես պլանավորել էի դա, ինչը ես կարծում էի որ կաշխատի և ես լուրջ մտածել եմ դրա մասին
- 6. Ես ինքնասպանության փորձ եմ կատարել, բայց չեմ կարծում որ ես իսկապես ուզում էի մեռնել
- 7. Ես ինքնասպանության փորձ եմ կատարել, և ես կարծում եմ, որ ես իսկապես ուզում էի մեռնել

81. Որքա՞ն հաճախ եք Դուք մտածել ինքնասպան լինելու մասին:

- 1. Երբեք
- 2. Հազվադեպ
- 3. Երբեմն
- 4. Հաճախ
- 5. Շատ հաճախ

82. Ին՞չ հավանականություն կա, ինչքան էլ որ հեռու լինի այդ միտքը Ձեզնից, որ Դուք կմտածեք ինքնասպան լինելու մասին:

- 1. Ոչ մի հավանականություն
- 2. Մի քիչ հավանականություն
- 3. Որոշ հավանականություն
- 4. Հավանական է
- 5. Շատ հավանական է

83. Ին՞չ հավանականություն կա, որ Դուք կարող եք ինքնասպանության փորձ կատարել:

- 1. Ոչ մի հավանականություն
- 2. Մի քիչ հավանականություն
- 3. Որոշ հավանականություն
- 4. Հավանական է
- 5. Շատ հավանական է

84. Ին՞չ մահվան դեպքեր են տեղի ունեցել Ձեր ընտանիքում Ձեր ողջ կյանքի ընթացքում:

	Ազգակցական կապը Ձեզ հետ	Մահվան տարին
1		
2		
3		
4		

Շնորհակալություն մասնակցության համար

APPENDIX 2: Adolescent Assent Form in English and Armenian

Hello. My name is Armine Vardanyan. I am a graduate student of the Master of the Public Health Program of the College of Health Sciences in the American University of Armenia. The AUA College of Health Sciences is conducting a study to assess how common are mental health problems and mood disorders among adolescents in Armenia and what factors contribute to their development. The research project is being conducting among 15-17 year old students of high schools of Yerevan. The study protocol includes the process of filling a self-administered questionnaire. The interview will take place in your classroom. The interview will last about 15-20 minutes. We appreciate your participation in this study. The information given by you will be useful and valuable for this research.

There is no risk for your participation in this study. The information obtained from you is important for the study. The individual information provided by you will help to evaluate the current situation and risk factors for depression in adolescents in Yerevan, and develop preventive strategies.

The interview will be conducted anonymously without recording any identifying information such as your name, address, or telephone number. Your individual responses will only be checked by the College of Health Sciences of the American University of Armenia, your response will not see your teachers, parents, friends or other people. Your confidentiality and anonymity will always be protected.

Your participation in this study is voluntary. You have the right to stop providing information at any time you wish or skip any question you consider inappropriate without any negative consequences.

Բարև Ձեզ: Իմ անունն է Արմինե Վարդանյան: Ես սովորում եմ Հայաստանի ամերիկյան համալսարանի (ՀԱՀ) հանրային առողջապահության բաժնում, մագիստրոսի ծրագրի ավարտական կուրսում: Մեր բաժինն իրականացնում է մի հետազոտություն, որի նպատակն է գնահատել դեռահասների շրջանում հոգեկան առողջության և տրամադրության շեղումների տարածվածությունը և դրա զարգացմանը նպաստող գործոնները Երևանում: Հետազոտությանը մասնակցելու են Երևանի ավագ դպրոցների 15-17 տարեկան աշակերտները: Հետազոտությանը մասնակցելու դեպքում մենք Ձեզ կտանք հարցաթերթիկ ինքնուրույն լրացնելու նպատակով: Հարցաթերթիկի լրացումը տեղի կունենա Ձեր դասարանում և կտևի մոտ 15-20 րոպե: Ես երախտապարտ կլինեմ այս ուսումնասիրությանը Ձեր մասնակցության համար: Ձեր կողմից տրամադրված տեղեկությունները շատ օգտակար կլինեն և կունենան արժեքավոր նշանակություն այս հետազոտության համար:

Այս հետազոտությանը մասնակցելու դեպքում Դուք ոչ մի ռիսկի չեք դիմում: Ձեր կողմից տրամադրված տեղեկատվությունը շատ կարևոր է այս հետազոտության համար քանի որ այն կօգնի մեզ բացահայտել և գնահատել Երևանում դեռահասների հոգեկան առողջության և տրամադրության խնդիրների տարածվածությունը և դրա տարածմանը նպաստող գործոնները և մշակել կանխարգելիչ ռազմավարություն:

Ձեր անունը, հասցեն կամ հեռախոսահամարը չեն նշվի հարցաթերթիկի վրա: Ձեր պատասխանները հասանելի են միմիայն հարցումն անցկացնող խմբին, այն չեն տեսնի ո՛չ Ձեր ուսուցիչները, ո՛չ էլ ծնողները, ընկերները կամ այլ անձինք: Ձեր անձի գաղտնիությունը լիովին կպահապանվի:

Ձեր մասնակցությունն այս հետազոտությանը լիովին կամավոր է: Դուք կարող եք ցանկացած պահին հրաժարվել լրացնել հարցաթերթիկը կամ էլ խուսափել ցանկացած հարցի պատասխանելուց առանց որևէ բացասական հետևանքների:

APPENDIX 3: Contact information in case of questions in English and Armenian

If you need more information about the study, please do not hesitate to contact Dr. Varduhi Petrosyan, Associate Dean, College of Health Sciences: tel. (010) 51 25 92.

If you feel that you were not treated fairly or harmed due to this study please call Dr. Hripsime Martirosyan, The Human Research Administrator at AUA: tel. (010) 51 25 61.

If you feel that you would need professional consultancy and support you may contact the staff of the Association of Child Psychologists and Psychiatrists, you can find their contact information in the <http://acpp-armenia.org/staff> website.

Եթե Դուք ավելի շատ տեղեկատվության կարիք ունեք այս հետազոտության վերաբերյալ, կարող եք դիմել հետազոտության համակարգողին՝ Հայաստանի ամերիկյան համալսարանի (ՀԱՀ) Հանրային առողջապահության բաժնի դասախոս Ծովինար Հարությունյանին (010) 51 25 92 հեռախոսահամարով:

Եթե կարծում եք որ այս հետազոտության ընթացքում Ձեզ հետ լավ չեն վերաբերվել և/կամ այս հետազոտությունը Ձեզ վնաս է հասցրել կարող եք զանգահարել Հայաստանի ամերիկյան համալսարանի գիտահետազոտական էթիկայի հարցերով պատասխանատու անձ՝ Հռիփսիմե Մարտիրոսյանին (010) 51 25 61 հեռախոսահամարով:

Եթե Դուք կարիք ունենաք մասնագիտական խորհրդատվության և օգնության, ապա կարող եք դիմել Մանկական հոգեբանների և հոգեբույժների ասոցացիայի մասնագետներին, որոնց մասին տեղեկություններ կարող եք գտնել հետևյալ էլեկտրոնային կայքից՝ <http://acpp-armenia.org/staff> :

APPENDIX 4: Informed letter to the head of the schools in English and Armenian

Dear director Mr./Mrs. _____

Master of the Public Health Program of the School of Public Health Sciences in the American University of Armenia is conducting a study to assess the prevalence and risk factors for adolescence depression in Yerevan. This study is part of master project of Armine Vardanyan, who is a graduate student of Master of the Public Health Program of the College of Health Sciences in the AUA. This study she conducts with two professors.

874 students will participate in this study from high schools of Yerevan. 10 schools were randomly selected from high schools of Yerevan including your school. From each selected high school one class will be selected from 10th, 11th, and 12th grades respectively. In order to do the study Armine Vardanyan needs your permission to conduct the study in your school. The study includes self administered interviews with selected 3 classes.

According to the decision of the AUA public health ethics Committee, all norms of ethics will be kept and the confidentiality of the data will be protected. Students' participation in this study is voluntary. When summarizing the results of this study yours, your institutions', and participants' names or other personal information will not be presented. Only summarized results will be presented in the final report. After conducting the study we can provide you final report.

Thank you in advance for your help

Հարգելի պարոն/տիկին _____

Հայաստանի ամերիկյան համալսարանի /ՀԱՀ/ Առողջապահական գիտությունների ֆակուլտետը հետազոտություն է իրականացնում, որի նպատակն է ուսումնասիրել դեռահասների շրջանում դեպրեսիայի տարածվածությունը և դրա զարգացմանը նպաստող գործոնները Երևանում: Այս աշխատանքը կհանդիսանում է ՀԱՀ հանրային առողջապահության մագիստրատուրայի ավարտական կուրսի ուսանող Արմինե Վարդանյանի դիպլոմային աշխատանքի մի մասը, որը նա իրականացնում է երկու դասախոսների հետ:

Հետազոտությանը մասնակցելու են 874 աշակերտներ Երևան քաղաքի ավագ դպրոցներից: Երևանում գործող ավագ դպրոցների ցանկից պատահականության սկզբունքով ընտրվել են տասը, ընտրվածների թվում է նաև Ձեր դպրոցը: Յուրաքանչյուր դպրոցից պատահականության սկզբունքով պետք է ընտրվի մեկական դասարան համապատասխանաբար 10-րդ, 11-րդ և 12-րդ դասարաններից: Հետազոտությունն իրականացնելու համար անհրաժեշտ է, որ Արմինե Վարդանյանը թույլտվություն ստանա հետազոտություն կատարել Ձեր դպրոցում: Հետազոտությունը ներառում է հարցազրույց ընտրված երեք դասարանների աշակերտների հետ հարցաթերթիկի լրացման միջոցով:

Համաձայն ՀԱՀ առողջապահական էթիկայի հանձնաժողովի որոշման՝ խստագույնս պահպանվելու են էթիկայի բոլոր նորմերը, ապահովվելու է տվյալների գաղտնիությունը: Աշակերտների մասնակցությունն այս հետազոտությանը կամավոր է և հետազոտության արդյունքներն ամփոփելիս Ձեր, Ձեր հաստատության և մասնակիցների անունները կամ անձնական այլ տվյալներ որևէ տեղ չեն հրապարակվելու և միայն ամփոփ տվյալներն են ներկայացվելու վերջնական զեկույցում: Ուսումնասիրության ավարտին Ձեզ կարող ենք տրամադրել արդյունքներն ամփոփող զեկույցը:

Կանխավ շնորհակալ ենք ցուցաբերած աջակցության համար:

APPENDIX 5: Consent form to the head of group/grade in English and Armenian

Dear teacher,

Master of the Public Health Program of the College of Health Sciences in the American University of Armenia is conducting a study to assess the prevalence and risk factors for adolescence depression in Yerevan. This study is part of master project of Armine Vardanyan, who is a graduate student of Master of the Public Health Program of the College of Health Sciences in the AUA. This study she conducts with two professors.

874 students will participate in this study from high schools of Yerevan. 10 schools were randomly selected from high schools of Yerevan. From each selected high school one class was selected from 10th, 11th, and 12th grades respectively including your class. In order to do the study Armine Vardanyan needs your permission and help to conduct the study in your class. The study includes self administered interviews with students of your class.

According to the decision of the AUA public health ethics Committee, all norms of ethics will be kept and the confidentiality of the data will be protected. Students' participation in this study is voluntary. When summarizing the results of this study yours, your institutions', and participants' names or other personal information will not be presented. Only summarized results will be presented in the final report.

If you agree can we continue?

Հարգելի դասադուր,

Հայաստանի ամերիկյան համալսարանի /ՀԱՀ/ Առողջապահական գիտությունների ֆակուլտետը իրականացնում է հետազոտություն, որի նպատակն է ուսումնասիրել դեռահասների շրջանում դեպրեսիայի տարածվածությունը և դրա զարգացմանը նպաստող գործոնները Երևանում: Այս աշխատանքը հանդիսանում է ՀԱՀ հանրային առողջապահության մագիստրատուրայի ավարտական կուրսի ուսանող Արմինե Վարդանյանի դիպլոմային աշխատանքի մի մասը, որը նա իրականացնում է երկու դասախոսների հետ:

Հետազոտությանը մասնակցելու են 874 աշակերտներ Երևան քաղաքի ավագ դպրոցներից: Երևանում գործող ավագ դպրոցների ցանկից պատահականության սկզբունքով ընտրվել են տասը: Յուրաքանչյուր դպրոցից պատահականության սկզբունքով ընտրվել է մեկական դասարան համապատասխանաբար 10-րդ, 11-րդ և 12-րդ դասարաններից, ընտրվածների թվում է նաև Ձեր դասարանը:

Հետազոտությունն իրականացնելու համար անհրաժեշտ է, որ Արմինե Վարդանյանը Ձեր թույլտվությունն ու աջակցությունը ստանա հետազոտություն կատարել Ձեր դասարանի աշակերտների հետ: Հետազոտությունը ներառում է հարցազրույց աշակերտների հետ ինքնուրույն լրացվող հարցաթերթիկի միջոցով:

Համաձայն ՀԱՀ առողջապահական էթիկայի հանձնաժողովի որոշման՝ խստագույնս պահպանվելու են էթիկայի բոլոր նորմերը, ապահովվելու է տվյալների գաղտնիությունը: Աշակերտների մասնակցությունն այս հետազոտությանը կամավոր է և հետազոտության արդյունքներն ամփոփելիս Ձեր, Ձեր հաստատության և աշակերտների անունները կամ անձնական այլ տվյալներ որևէ տեղ չեն հրապարակվելու և միայն ամփոփ տվյալներն են ներկայացվելու վերջնական զեկույցում:

Եթե համաձայն եք կարող եմք շարունակել: