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THE TRIPARTITE MODEL AND DIMENSIONS OF ANXIETY AND DEPRESSION IN CHILDREN AND ADOLESCENTS: PRELIMINARY DATA FROM SERBIA D. Stevanovic¹, A. Lakic²

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Introduction and objectives: The tripartite model of emotions (TME) specifies a general factor, negative affect (NA), which represents a shared influence on anxiety and depression, and two specific factors, physiological hyperarousal (PH) common to anxiety, and (low) positive affect (PA) common to depression (Clark & Watson, 1991).

Aims: To examine the relationships between TME and anxiety and depressive symptoms in children and adolescents.

Methods: In the study participated 126 non-referred children and adolescents, aged 10-18 years. TME was assessed by the Affect and Arousal Scale (AFARS). Anxiety symptoms were identified using the Screen for Child Anxiety Related Emotional Disorders questionnaire (SCARED). This questionnaire reports five types of anxiety disorders: panic/somatic, generalized, separation, social, and school phobia. Finally, depressive

symptoms were identified using the Short Mood and Feeling Questionnaire (SMFQ). Zeroorder correlations between all measures were presented.

Results: PA negatively correlated with the depression scale only, -0.2 (p = 0.012), while NA significantly correlated with the depression and all anxiety scale, except the separation anxiety scale (p < 0.05). PH significantly correlated with the depression, panic-somatic and separation anxiety and school avoidance scale. The highest correlations were between the depression (0.39) and panic scale (0.33).

Conclusions: The results indicate that the relationships between TME and symptoms of anxiety and depression in children and adolescents could be partially supported. However, they are consistent with the previous findings that reported that low PA correlate with depression and PH with panic disorder (Chorpita, 2000; Jacques & Mash, 2004; De Bolle, 2010).