Helping Children and Adolescents Deal with Depression

If parents or adults in a young person's life suspect depression, they should:

- Be aware of the behaviors that concern them and note how long the behaviors have been going on, how often and how severe the symptoms seem
- Take the child to a mental health professional or the child's doctor for evaluation and diagnosis
- Get accurate information from libraries, hotlines, Web sites and other sources
- Talk to other families in their community
- Find family network organizations
- Remain hopeful — your child will get better with effective treatment

Early diagnosis and treatment is essential for children with depression. Children and adolescents who exhibit symptoms of depression should be referred to, and further evaluated by, a child and adolescent psychiatrist, who can diagnose and treat depression in children and teenagers. The diagnostic evaluation may include psychological testing, laboratory tests and consultation with other medical specialists. The comprehensive treatment plan may include psychotherapy (talk therapy), ongoing evaluation and monitoring, and in some cases, psychiatric medication. Optimally, this plan is developed with the family, and whenever possible, the child or adolescent is involved in the decisions. When a depressed adolescent realizes the need for help (often with the assistance of a friend or trusted adult) and begins to look for it, he or she takes a major step toward recovery.

Depression Information

- More than 19 million Americans suffer each year from major depression
- A simple, online screening test can help uncover depression
- You cannot treat depression on your own; see your doctor or a qualified mental health professional

You can overcome depression.

Symptoms of Major Depression

See your doctor or mental health professional if you experience five or more of the following symptoms for more than two weeks:

- Persistent sad or anxious mood
- Sleeping too much or too little
- Changes in weight or appetite
- Loss of pleasure or interest in activities
- Feeling restless or irritable
- Persistent physical symptoms that don't respond to treatment
- Difficulty concentrating, remembering or making decisions
- Fatigue or loss of energy
- Feeling guilty, hopeless or worthless
- Thoughts of suicide or death*

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Up to 2.5 percent of children and up to 8.3 percent of adolescents suffer from depression. Major depression is one of the mental, emotional and behavioral disorders that can appear during childhood and adolescence. Depression in children can lead to school failure, alcohol or other drug use, and even suicide.

The good news is that there are effective treatments for depression. The key to successful treatment is early recognition and intervention.

**Learn to Recognize the Symptoms of Depression**

Symptoms of childhood and adolescent depression vary in severity and duration and may be different from those in adults. Young people with depression may have a hard time coping with everyday activities and responsibilities, may have difficulty in getting along with others or may suffer from low self-esteem. Mental health professionals advise parents and other important adults in a young person’s life to be aware of signs such as:

- Missed school or poor school performance
- Changes in eating and sleeping habits
- Withdrawal from friends and activities once enjoyed
- Persistent sadness or hopelessness
- Problems with authority
- Indecision, lack of concentration or forgetfulness
- Poor self-esteem or guilt
- Overreaction to criticism
- Anger and rage
- Frequent physical complaints, such as headaches and stomachaches
- Lack of enthusiasm, low energy or motivation
- Drug and/or alcohol abuse
- Thoughts of death and suicide*

**Helping the Depressed Child**

The first step in helping a depressed child is to recognize that he or she is, in fact, depressed. Identifying the symptoms of childhood depression can be difficult. While some children display the classic symptoms — sadness, anxiety, restlessness, eating and sleeping problems — others express their depression through various acts and pains that do not appear to have a physical cause. Some children hide their feelings of hopelessness and worthlessness under a cover of irritability, aggression, hyperactivity and misbehavior.

Complicating the recognition of depression are the developmental stages that children pass through on the way to adulthood. Becoming more clingy, negative or rebellious may be normal and temporary expressions of a particular stage. Children also go through short-lived periods of sadness, just as adults do.

Careful observation of a child for several weeks may be needed to detect if there is, in fact, a problem. Depressed young people who exhibit additional symptoms, such as insomnia, panic attacks and delusions or hallucinations, are at particular risk for suicide.

When symptoms seem severe or continue for more than a few weeks, an evaluation by a child’s pediatrician is advised. The pediatrician would then determine if a consultation with a mental health professional should be the next step.

**Helping Adolescents with Depression**

Depression may be even harder to recognize in an adolescent than in a younger child. Symptoms of depression, such as sadness, hopelessness, anxiety and low self-esteem, may be perceived as the normal stresses of growing up.

Some depressed adolescents act-out their distress, becoming angry or aggressive, running away or becoming delinquent. Behaviors that are too often dismissed as typical adolescent “storminess” may actually be signs of problems and possibly cries for help. For example, bipolar disorder (also called manic-depressive illness) often emerges during adolescence. It’s manifested by periods of impulsiveness, irritability and loss of control, sometimes alternating with episodes of withdrawal.

The clue to a depressive disorder in an adolescent is persistent signs of change or withdrawal. Has the young person’s behavior changed dramatically from his or her usual demeanor? Has the normally outgoing child become withdrawn or been moping around for weeks? Is the usually easy-going teenager inappropriately irritable? If the answer to any of these questions is “yes,” it’s time to ask more questions. If the youth is feeling unable to cope, demoralized, friendless, and possibly suicidal, it’s vital to get the youngster help.

**Be Aware of the Link Between Depression and Suicide**

- **Suicide** is the third leading cause of death for 15- to 24-year-olds and the sixth leading cause of death among children five to fourteen.
- **The risk of suicide among people with depression is higher than the general population.** Sixty percent of the people who commit suicide have a mood disorder.
- **Suicide** is particularly likely when a depressed adolescent episode begins to lift. The person may feel less demoralized, friendless, and possibly suicidal, it’s wise to seek a doctor’s advice on how to best help the depressed adolescent. Finding the right treatment is built on a complete psychiatric and physical diagnostic assessment.

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*Contact your physician or mental health professional immediately.

**Further Information**

**Help For Major Depression Is Available.**

National Mental Health Screening Project
For a free online depression screening, go to www.depressionscreening.org/

Mental Health Association in Michigan (MHAM)
For free information on depression (248) 647-1711
www.mbam.org

National Mental Health Association NAHMA Information Center
Free materials on a variety of mental health topics, and referrals to local resources. 1-800-969-NMHA

For free information on depression and suicide, call: 1-800-950-NAMI (6264)
www.nami.org

Michigan Psychological Association
Information and referrals to psychologists in your area (517) 333-0838
www.michpsych.org

Michigan Alliance for the Mentally Ill
Family support and self-help groups [517] 347-1885
www.mha-mi.org/

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Hopeline Network
Crisis person available 1-800-Suicide (784-2433)

BlueHealthConnection
Program educators members about their health.

For BCN members: 1-800-637-2972
www.bcbsm.com

For BCBS members: 1-800-775-2583
www.bcbsm.com

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