

Depression In Teenagers & Children

This article will cover the following: teenager and children depression statistics; teenager and children - specific depression symptoms, and, what you, as the parent and/or gaurdian, can do if you recognize the symptoms in one of yours.

DEPRESSION in Teenagers and Children



A while ago I did a blog about Adult depression. While doing the research on Adult depression, I learned quite a bit of information about depression in general, in addition to what I already knew because I suffer from this condition myself. What I didn't know, however, is just how prevelant this condition is in the population at large, and in children and teens in specific. One source said that depression is close to the top psychological condition in the western world (more about what this means in a later blog; it'll take a whold blog to talk about what this means).

This article will cover the following: teenager and children depression statistics; teenager and children - specific depression symptoms (for "general" symptoms, check out the Adult blog), and, what you, as the parent and/or gaurdian, can do if you recognize the symptoms in one of yours. (Remember, the following information comes from many Internet sources.)

TEENAGER AND CHILDREN DEPRESSION STATISTICS

As many as 8.3 of teenagers in the U.S. suffer from depression.

Suicide is the third leading cause of death in teenagers.

As many as one in every 33 children and approximately one in 8 adolescents may have depression. (Center for Mental Health Services, 1996; these data have increased over the past 9 years).

Treatment of major depression is as effective for children as it is for adults. (Dr. Graham Emslie, American Medical Association, Archives of General Psychiatry, November 15, 1997).

Twenty years ago depression in children was almost unknown. Now the fastest rate of increase in depression is among young people. (I don't know about you, but this statistic scares me the most!)

The statistics on teen depression are sobering. Studies indicate that one in five (1 in 5) children have some sort of mental, behavioral, or emotional problem, and that one in ten (1 in 10) may have a serious emotional problem.

What is even more chilling is that of all these children and teens struggling with emotional and behavioral problems, a mere 30 receive any sort of intervention or treatment. The other 70 simply struggle through the pain of mental illness or emotional turmoil, doing their best to make it to adulthood. Many theorize that this is why the suicide rate in teens is so high. Suicide is the third (3rd) leading cause of death among young people ages 15 to 24. Even more troubling, it is the sixth (6th) leading cause of death among children ages 5-14.

The consequences of untreated depression can be:

- increased incidence of depression in adulthood;
- involvement in the criminal justice system;
- or in some cases, suicide.

WHAT ARE THE TEEN/CHILDREN DEPRESSION SYMPTOMS?

As we see above, treatment (i.e., counseling, therapy, or even medical intervention, if needed) for depression is as effective for teens/children as it is for Adults. Let me state that again; research from a variety of sources indicates that appropriate treatment for depression in a teen and/or a child is as effective as it is for Adults. So, what, as a parent or guardian, should we look for? What are the symptoms of real depression, and not just a "bad mood"?

"Real Depression" - the type that needs immediate and appropriate attention - in teenagers and in children is defined as: when the feelings of depression persist and interfere with the teen's/child's ability to function in his/her normal daily activities. This doesn't mean that one should ignore a teen's/child's bad mood if it lasts for a few days or a few weeks. What it does mean is that, at a minimum, you, the parent/guardian must know enough about your teen's/child's normal daily activities so that you can know when there are changes. OK, what covers "normal daily activities" for a teen/child? (And, in this, we are sticking to American generic teens/children, because that's what I am most familiar with. If anyone can add to this list, please do so.)

As you read through this list, remember that your teen/child has to have "a significant" number of these symptoms; they have to be ongoing, out of character; and impair the teen's/child's normal daily activities (sound familiar?)

- 1) Snapping at people for no apparent reason - being irritable at everyone.
- 2) Physically or verbally aggressive at everyone.
- 3) Abandoning favorite hobbies or sports or other routine, daily activities.
- 4) Increased passive TV watching (where the teen/child has that "thousand yard stare" and is not interacting with the programs).
- 5) Increased risk-taking; e.g., dangerous driving; climbing too high in a tree and jumping, breaking something; other repeated unusually dangerous activities.
- 6) Misuse of drugs and alcohol. Particularly teens, who use drugs and alcohol to "escape". (1)
- 7) Changes in school behaviors (including training courses and work settings) for teens; changes in interpersonal behaviors and activities in a pre-school setting (i.e., used to like to color and play with clay; now just sits in a corner, holding a stuffed toy and sucking a thumb).
- 8) Frequent absences from school; poorer grades than formerly attained; increase in skipping classes; etc. For a child, reversion in activities (i.e., used to color within the lines, now just scribbling on paper; intentionally breaking things, etc.)
- 9) Complains of being bored (teen); a child whose attention waivers when it didn't before. A child who, during a group reading, who used to sit and listen, now gets up and wanders around.
- 10) Becomes disruptive in class (both teens and children).
- 11) Finds it harder to stay on task. Loses concentration easily; is mentally confused. Finds decisions difficult to make. In a child this might look like the following: unable to match blocks by color when s/he could before; unable to choose between playing ball and jumping rope when the child ALWAYS choose playing ball before. You can think of your own examples, I'm sure.
- 12) Cannot remember commitments - doesn't keep appointments (teen). As a child, forgets to bring papers home when s/he ALWAYS used to do so; forgets home address/telephone number when s/he has known them for months/years; etc.
- 13) Has difficulty staying still or conversely, is lethargic (sluggish). This would apply to both a teen and a child. You can picture, in your mind, the teen or child in constant motion; twitching, shaking a foot, or both feet; handling things; etc. OR, the teen or child who sits or lays with that thousand yard stare again. AND, again, this is unusual behavior for your teen or child.

- 14) Changes in relationships with family and friends. Usually, this change manifests itself in hostility, or in passivity. Arguing when s/he didn't before; or, using the "whatever" answer, when s/he used to talk to you. (Again, don't single this one symptom out; it must be one of many symptoms that your teen or child has.)
- 15) Stops going out with friends; shows no interest in group outings.
- 16) Increase or decrease in sexual activity (hopefully, an OLDER TEEN).
- 17) May start associating with a different peer group (that "bad influence" group as a teen; the "rowdy" kids as a child).
- 18) Loses interest in activities which once were fun.
- 19) More conflicts with parents and siblings than usual.
- 20) Changes in eating and sleeping habits.
- 21) Expresses inappropriate guilt, feelings of not being good enough, worthlessness, failure. (I can see this in a teen; not sure how this would look in a child. If you can, please let us know.)
- 22) Expresses hopelessness and having nothing to look forward to.
- 23) Speaks in a monotonous or monosyllabic manner.
- 24) Has a preoccupation with self; is withdrawn.
- 25) Cries easily, looks sad, feels alone or isolated.
- 26) Has fears about having to be perfect.
- 27) Fearful of doing something bad. This, in a child, could manifest itself as bedwetting after YEARS of not bedwetting; fear of darkness or "things that go bump in the night" after YEARS of no fear, etc.
- 28) Incidents of self-injury. Ideas of killing self. (I have no idea of how this would look for a child, and hope never to have such an idea!)

WHAT A PARENT/GUARDIAN CAN DO

The two most important things a parent can do for your child/teen is to first, KNOW YOUR TEEN/CHILD'S ROUTINE, AND NORMAL DAILY ACTIVITIES so that you can identify any changes; and, LISTEN:

- 1) listen when your children talk;
- 2) listen to their music;
- 3) spend more time with them and be involved in their activities;
- 4) take them to movies and concerts, and discuss them afterward;
- 5) know their friends, and listen to them, as well;
- 6) do not lecture or offer unsolicited advice, or ultimatums; and,
- 7) do not try to talk them out of their feelings; instead, ask them if they can describe their feelings.

It goes without saying, but I'll say it anyway, learn the above symptoms and know your teen/child. Here are some more things that you, the parent or guardian can do.

- 8) If a child, go to their day care periodically, and learn their routine; ask the teachers to alert you if their routine changes.

9) If a teen, go to ALL of your teen's teacher conferences to learn the patterns of the normal school day, and ask to be alerted immediately to changes.

10) For both teens and children, know their friends; see if your home can become the "gathering place"; get to know the parents of your child's or teen's friends and agree to let each other know if you see any changes in behavior.

11) In all cases, keep a diary of any changes that you see, so that you will be able to discuss the situation with great clarity and specificity with professionals, should the need arise.

12) Respond with love, kindness, and support if you think that your child/teen is experiencing problems that can lead to depression.

13) Let your child or teen know that you are there, whenever she or he needs you, and do so often and in age-specific (as Dr. Phil would say) ways.

14) Keep trying, but gently, if your teen shuts you out (depressed teenagers do not want to feel patronized or crowded).

15) Do not criticize or pass judgment, once the child or teen begins to talk (the important thing is that he or she is talking and communicating feelings). REMEMBER, NEVER CRITICIZE FEELINGS; everyone has the right to their feelings, even if you think that they are "wrong". Let them be voiced; if inappropriate, seek professional assistance.

16) Encourage activity and praise efforts.

17) Seek help from a doctor or mental health professional, if the teen's or child's depressed feeling doesn't pass with time (be prepared to list behaviors, note how long and how often they have been occurring, and how severe they seem - hence, the diary mentioned above).

18) Do not wait and hope that symptoms will go away on their own. Better to seek assistance and be told that your teen/child is fine than to let your teen/child become one of the 70 who never receive help.

19) When depression is severe - if teens or children are thinking about hurting themselves or about suicide - seek professional help as soon as possible.

20) Parents of depressed adolescents may themselves need support. Seek out groups of parents who have experience with teen depression

Footnote (1): What some of my friends and I did with alcohol when we had teenagers; we kept a "mark" (usually hidden so the teens couldn't see it on the bottle) that changed each time we used the bottle. In this way, we could know immediately if the teens were drinking, and could deal with the situation.

Short note about the author

Carolyn Magura

Disabilitykey.com is a website designed to assist each person in his/her own unique quest to navigate through the difficult and often conflicting and misleading information about coping with disabilities.

Author: Carolyn Magura

Article downloaded from page eioba.com