



Educate, Advocate and Serve

2400 Reading Road, Suite 139 912 Scott St, PO Box 122604
Cincinnati, OH 45202 Covington, KY 41011
Office 513-721-2910 / 877-361-4518 / 859-431-1077
www.MHAnkyswoh.org / www.GuideToFeelingBetter.org



Depression and Children

All children "feel blue," from time to time, have a bad day, or are sad. However, when these feelings persist and begin to interfere with a child's ability to function in daily life, clinical depression could be the cause. Depression is not a personal weakness, a character flaw or a mood that one can "snap out of." It is a serious mental health problem that affects people of all ages, including children. In fact, depression affects as many as one in every 33 children and one in eight adolescents according to the federal Center for Mental Health Services.

No one thing causes depression. Children who develop depression may have a family history of the disorder. Family history, stressful life events such as losing a parent, divorce, or discrimination, and other physical or psychological problems are all factors that contribute to the onset of the disorder. Children who experience abuse, neglect, or other trauma or who have a chronic illness are at a higher risk for depression. Depression in children often occurs along with other mental health problems such as anxiety, bipolar or disruptive behavior disorders. Adolescents who become clinically depressed are also at a higher risk for substance abuse problems.

Depression can lead to academic underachievement, social isolation, and create difficult relationships with family and friends. Depression in children is also associated with an increased risk for suicide. In fact, the U.S. Surgeon General estimates that more than 90 percent of children and adolescents who take their lives have a mental health disorder such as depression. The rate of suicide among young people has nearly tripled since 1960.

Once a young person has experienced an episode of depression, he or she is at an increased risk for having another episode of depression within the next five years. Children who experience a depressive episode are five times more likely to have depression as an adult.

What Are the Signs and Symptoms?

The list below outlines possible signs of depression. If your child or one you know is struggling with any combination of these symptoms for more than two weeks, talk with a doctor or mental health professional.

- Frequent sadness, tearfulness or crying.
- Feelings of hopelessness.
- Withdrawal from friends and activities.
- Lack of enthusiasm or motivation.
- Decreased energy level.
- Major changes in eating or sleeping habits.
- Increased irritability, agitation, anger or hostility.
- Frequent physical complaints such as headaches and stomachaches.
- Indecision or inability to concentrate.
- Feelings of worthlessness or excessive guilt.
- Extreme sensitivity to rejection or failure.
- Pattern of dark images in drawings or paintings.
- Play that involves excessive aggression directed toward oneself or others, or involves persistently sad themes.
- Recurring thoughts or talk of death, suicide or self-destructive behavior.

Many teens with depression abuse alcohol and drugs as a way to numb or manage their pain. Any child or adolescent who abuses substances should be evaluated for depression. If an addiction develops, it is essential to treat both the mental health disorder and the substance abuse problem at the same time.

What Should Parents and Caregivers Do?

Depression is treatable. Early identification, diagnosis and treatment help children reach their full potential. Children who show signs of depression should be referred to and evaluated by a mental health professional that specializes in treating children. The evaluation may include consultation with a child psychiatrist, psychological testing and medical tests to rule out an underlying physical condition that might explain the child's symptoms. A comprehensive treatment plan should include psychotherapy and, in some cases, medication. This plan should be developed with the family, and, whenever possible, the child should be involved in making treatment decisions.

Information compiled by Mental Health America.