

## What is Depression?

All children experience ups and downs while growing up, but for some, the downs aren't commonplace—they are symptoms of depression. Children and teens at higher risk for depression include those who have attention deficit/hyperactivity disorder, learning or anxiety disorders and oppositional defiance disorder. A young person who has experienced considerable stress or trauma, faced a significant loss or has a family history of mood disorders is at increased risk for depression.

Children with depression are more likely to complain of aches and pains than to say they are depressed. Teens with depression may become aggressive, engage in risky behavior, abuse drugs or alcohol, do poorly in school or run away. When experiencing an episode, teens have an increased risk for suicide. In fact, suicide is the third-leading cause of death among children aged 15-19. **If you believe you (or your student) is in danger of hurting him/herself or someone else, take it seriously and get them help immediately by calling 911 or taking them to the ER.**

### Symptoms:

- **Changes in sleep.** Many people have trouble falling asleep, staying asleep or sleeping much longer than they used to. Waking up early in the morning is common for people with major depression.
- **Changes in appetite.** Depression can lead to serious weight loss or gain when a person stops eating or uses food as a coping mechanism.
- **Lack of concentration.** A person may be unable to focus during severe depression. Even reading the newspaper or following the plot of a TV show can be difficult. It becomes harder to make decisions, big or small.
- **Loss of energy.** People with depression may feel profound fatigue, think slowly or be unable to perform normal daily routines.
- **Lack of interest.** People may lose interest in their usual activities or lose the capacity to experience pleasure.
- **Low self esteem.** During periods of depression, people dwell on losses or failures and feel excessive guilt and helplessness. Thoughts like “I am a loser” or “the world is a terrible place” or “I don't want to be alive” can take over.
- **Hopelessness.** Depression can make a person feel that nothing good will ever happen. Suicidal thoughts often follow these kinds of negative thoughts—and need to be taken seriously.
- **Changes in movement.** People with depression may look physically depleted or they may be agitated. For example, a person may wake early in the morning and pace the floor for hours.
- **Physical aches and pains.** Instead of talking about their emotions or sadness, some people may complain about a headache or an upset stomach.

## Causes:

- **Trauma.** When people experience trauma at an early age, it can cause long-term changes in how their brains respond to fear and stress. These brain changes may explain why people who have a history of childhood trauma are more likely to experience depression.
- **Genetics.** Mood disorders and risk of suicide tend to run in families, but genetic inheritance is only one factor. Identical twins share 100% of the same genes, but will both develop depression only about 30% of the time. People who have a genetic tendency to develop depression are more likely to show signs at a younger age. While a person may have a genetic tendency, life factors and events seem to influence whether he or she will ever actually experience an episode.
- **Life circumstances.** Marital status, financial standing and where a person lives have an effect on whether a person develops depression, but it can be a case of “the chicken or the egg.” For example, depression is more common in people who are homeless, but the depression itself may be the reason a person becomes homeless.
- **Brain structure.** Imaging studies have shown that the frontal lobe of the brain becomes less active when a person is depressed. Brain patterns during sleep change in a characteristic way. Depression is also associated with changes in how the pituitary gland and hypothalamus respond to hormone stimulation.
- **Other medical conditions.** People who have a history of sleep disturbances, medical illness, chronic pain, anxiety, and attention-deficit hyperactivity disorder (ADHD) are more likely to develop depression.
- **Drug and alcohol abuse.** Approximately 30% of people with substance abuse problems also have depression.

## Treatment:

- **Medications** including antidepressants, mood stabilizers, and antipsychotic medications
- **Psychotherapy** including cognitive behavioral therapy, family-focused therapy and interpersonal therapy
- **Brain stimulation therapies** including electroconvulsive therapy (ECT) or repetitive transcranial magnetic stimulation (rTMS)
- **Light therapy**, which uses a light box to expose a person to full spectrum light and regulate the hormone melatonin
- **Exercise**
- **Alternative therapies** including acupuncture, meditation, and nutrition
- **Self-management strategies and education**
- **Mind/body/spirit approaches** such as meditation, faith, and prayer

Source: National Alliance on Mental Health