

DEPRESSION FACT SHEET

- Depression is an illness that affects the whole body – thoughts, feelings, behavior and physical health.
- Depression affects 2% of children and 5-8% of adolescents.
- Depression affects all areas of a child’s life – home, work, school, and social life.

Clinical Symptoms

SYMPTOM	WHAT DOES A PARENT/CAREGIVER SEE?
Persistent sad or irritable mood	<ul style="list-style-type: none"> • Sadness • Hopelessness or irritability • Anger and aggression
Loss of interest in everyday activities	<ul style="list-style-type: none"> • Boredom • Dropping activities • Loss of interest in previously enjoyable activities
Significant change in appetite or weight	<ul style="list-style-type: none"> • Frequent unexplained physical complaints such as headaches, muscle aches and pains, and stomach aches • Significant increase or decrease in appetite or weight
Changes in energy level	<ul style="list-style-type: none"> • Difficulty sleeping or sleeping more than usual • Loss of energy – feeling sluggish • Restless – can’t sit still
Difficulty concentrating	<ul style="list-style-type: none"> • Unable to concentrate or stay focused • Unfinished tests or consistently forgetting homework

SYMPTOM	WHAT DOES A PARENT/CAREGIVER SEE?
Changes in behavior or activities	<ul style="list-style-type: none"> • Frequent absences from school • Poor performance in school or other activities
Feeling worthless or guilty	<ul style="list-style-type: none"> • Low self-esteem • Talks about running away • Overreacts to disappointment or failure
Ongoing thoughts of death or suicide	<ul style="list-style-type: none"> • Fear or preoccupation with dying • Talking about people who have died

Evidence-Based Practices

Evidence-based practices are treatments that have been shown through clinical research to produce positive outcomes for children and their families.

Treatment Approaches

The following are the best-supported treatment approaches for treating depression in children and adolescents:

- Cognitive Behavior Therapy
- Client Centered Therapy
- Cognitive Behavior Therapy and Medication
- Cognitive Behavior Therapy with Parents
- Family Therapy

Treatment Practices

The following are the best-supported treatment practices for treating depression in children and adolescents:

- **Cognitive Processing:** Cognitive processing is used to teach children about how the way they think about things can affect how they feel, and how they feel can affect how they behave. Cognitive methods might be used to help children understand how their thoughts are related to their moods and behaviors. They are taught strategies to help them check the accuracy of their thoughts and replace negative or unhelpful thoughts with more positive or helpful thoughts.
- **Activity Selection:** Activity selection is utilized to teach children the link between positive activities and feeling good. This strategy helps them to identify activities that they may have found enjoyable in the past and schedule regular times to participate in those activities outside of therapy. Children and

caregivers learn over time that if they include a number of these activities in their daily schedules, they tend to feel better overall.

- **Psychoeducation:** Psychoeducation is teaching children and their caretakers about their mental illness. The purpose is to help children and their families understand how the illness affects them, what kind of activities or treatment might help, and that there are others who have similar problems. This type of education helps them understand what will happen in the treatment sessions and how long the treatment might take. They will also learn what role the parent, the therapist, and the child will play in the treatment, and that they will be a team that will work on problems together.
- **Maintenance/Relapse Prevention:** Maintenance/relapse prevention includes exercises and training designed to consolidate skills the child has already developed and to anticipate future challenges that might arise after the termination or reduction of therapeutic services. The overall goal of maintenance/relapse prevention is to minimize the chance that gains made during the course of treatment will be lost in the future.
- **Problem Solving:** Children with mental illnesses often think their problems are too big to handle. Problem solving is a strategy that teaches a child how to clearly identify a problem, look at all possible solutions, and choose a solution. They also learn to evaluate their choices, and if necessary, come up with different solutions. This strategy teaches children how to use problem solving in their day-to-day activities.
- **Goal Setting:** Goal setting involves the treatment team (child, therapist, and caretakers) working together to select a therapeutic goal. Once a goal is selected, plans are developed to achieve that goal. Goal setting often involves repeated assessment of how successfully treatment is progressing to achieve the goal.
- **Self-Monitoring:** Children with mental illness often need help identifying and labeling their feelings and emotions. Self-monitoring helps them to keep track of a specific feeling or behavior. They learn to develop a rating scale to measure these feelings. They might keep track of how sad or happy they are feeling, or they might keep track of how anxious or relaxed they are feeling. Learning to do this will help them understand what they can do to increase or decrease the ratings.
- **Self-Reward/Self-Praise:** Self-reward and self-praise involve techniques designed to encourage the youth to self-administer positive tangible or social consequences contingent on the performance of desired behaviors.
- **Social Skills Training:** Social skills training involves providing constructive information, training, and feedback to improve interpersonal verbal or non-verbal functioning, which may include direct rehearsal of the skills. This can include group feedback, the use of audio or videotape, or feedback from a therapist or peer.