

Teen Depression



Presented by
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Depression Awareness



Webinar Agenda


- Depression
- Treatment
- Getting Help
- Communication
- Families for Depression Awareness

Depression

Depression is common

By the end of their teen years, 20% will have had depression*



* Williams et al., "Screening for Child and Adolescent Depression in Primary Care Settings: A Systematic Evidence Review for the U.S. Preventive Services Task Force," Agency for Healthcare Research and Quality, 2009.



Depression begins in adolescence

Average depression onset age:
14 years old*



* National Comorbidity Survey Replication study, Kessler, 2007

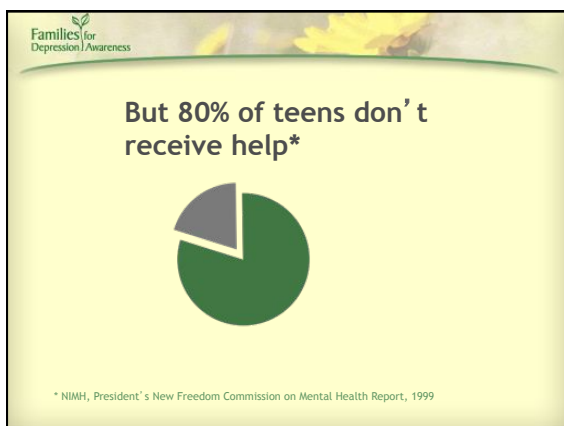


Depression is treatable

More than 70% of teens improve with a combination of medication and therapy*



* Treatment for Adolescents with Depression Study (TADS), 2004



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Untreated depression can lead to:

- Substance abuse (24% to 50%)*
- Academic failure
- Bullying**
 - 30% for those bullied
 - 19% for those doing bullying
- Eating disorders
- Suicide
 - 90% of suicides are result of mental illness***

* Bukstein OG, Gidycz LJ, Kaminer Y. Patterns of affective comorbidity in a clinical population of dually diagnosed adolescent substance abusers. J Am Acad Child Adolesc Psychiatry. 1992.
**Journal of American Academy of Child and Adolescent Psychiatry, 2007
***Cornwell Y, Brent D. Suicide and aging: patterns of psychiatric diagnosis. International Psychogeriatrics, 1995

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5 Leading Causes of Death

Ages 15-24 years old, 2011

1. Accidents	12,032
2. Suicide	4,688
3. Homicide	4,508
4. Cancer	1,609
5. Heart Disease	948

Preliminary Data for 2011
 Source: National Vital Statistics Reports (Oct, 2012),
 Centers for Disease Control and Prevention, www.cdc.gov

Families for Depression Awareness

Depression is not normal teen moodiness

Depression is

- a medical condition
- lasts longer
- interferes with teen's life (school, family, friends)
- a change for that teen

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Watch Signs of Depression video clip

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Critical Signs of Depression

Seek Immediate Help!

Signs	What Adults Might Notice
Cutting or other forms of self-injury*	Indicators may include scars, fresh cuts, bruises, or other wounds; keeping sharp objects on hand; wearing long sleeves or long pants, even in hot weather; claiming to have frequent accidents or mishaps
Recurrent suicidal thoughts or behavior**	Writing about death; giving away favorite toys or belongings; "You'd be better off without me."

* Mayo Clinic
** If your child is talking about suicide, get immediate medical help. Page your child's doctor for an immediate in-person appointment, or take her or him to the local emergency room or call 9-1-1.

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Self-injury

- Deliberately harming oneself without lethal intent
- Cutting is most well-known, though more than 20 distinct types of self-injury occur (e.g., skin burning, head banging, biting, deliberate overdose*)
- 15-20% of adolescents self-injure at some point in their life**
- Happens with girls and boys, affects all ethnicities

*Favazza, 2012
**S.A.F.E. Alternatives

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Why do people self-injure?

To change their internal state - emotional regulation

"I feel numb, I self-harm to feel something."

"I feel sad/angry/upset, I self-harm to stop feeling this way."

To change their external or social state

"I want someone to know I'm in pain, I self-harm to get their attention."

"I self-injure so I don't have to participate in gym class."

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What to do if you suspect someone is self-injuring

- Respond with **calm** concern;
 - "I notice that you have wounds or scars on your arms and know that this can be a sign of self-injury/ cutting. Are you injuring yourself?"
- Ask "respectfully curious" questions
 - "Where on your body do you tend to hurt yourself?"
 - "Do you find yourself in certain moods when you injure yourself?"
- Assess immediate danger; severity of the injury
- Engage the young person in identifying next steps
 - "I'm concerned about you continuing to hurt yourself. Let's talk to someone about how we can identify better ways to cope"
 - "When you feel like hurting yourself, what else could you try doing instead?"
- Find a provider

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Asking about suicidal feelings

- **ASK:** Need to ask if someone is suicidal, are they thinking of killing themselves or hurting themselves
- **LISTEN/LOOK:** Are they talking about hurting themselves, or about ways they might hurt themselves (e.g., pills, weapons), or are they obtaining weapons, pills, or other lethal means
- **ACT:** If they are suicidal, do not leave them alone! Call their clinician or take them to the local hospital emergency room.

**NATIONAL
SUICIDE
PREVENTION
LIFELINE**
1-800-273-TALK (8255)
suicidpreventionlifeline.org

For information visit
www.suicidpreventionlifeline.org

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Other Key Signs of Depression

Signs	What Adults Might Notice
Depressed, irritable, sad, or empty mood for at least 2 weeks	Irritable or cranky mood, sadness and hopelessness, preoccupation that life is meaningless
Decreased interest or enjoyment in once-favorite activities and people	Loss of interest in sports or other activities, withdrawal from friends and family, relationship problems

You may also see changes in

- sleep patterns or eating habits (too much or too little)
- energy levels and activity (agitation or fatigue)
- sense of self-worth (or feeling guilty)
- ability to concentrate or make decisions
- physical health, such as unexplained or nonspecific aches and pains

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Depression and Bullying: Addressing the Situation

Safety first!

- Engage the school and other resources to stop the bullying – advocate for your child (information at www.StopBullying.gov)
- Address safety issues at home (suicide and self-harm prevention, child protection, social media)

For those who engage in bullying, there are consequences to their behavior, and they also need help



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Depression and Bullying: Addressing the Depression

Be alert for signs of depression!
Seek treatment, which may include cognitive behavioral therapy

For those who carry out bullying, help them

- develop empathy and be less judgmental
- find appropriate ways to deal with negative emotions and their need for control

For those who are bullied, help them

- understand that things will change
- build on their strengths and coping resources



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Who has depression or bipolar disorder?

- Many competent, caring people!
- Famous people - actors, politicians, CEOs, writers, athletes, musicians, and more


Anne Hathaway (actress)
Pete Wentz (musician)
Tim Gunn (fashion consultant)

Zach Braff (actor)
Alexa Joel Ray (singer)
Halle Berry (actress)



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Types of depression



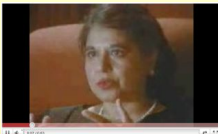

- Major Depression
- Bipolar Disorder

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Causes of depression

Runs in Families
Problems with chemical systems in the brain (serotonin, norepinephrine, dopamine)

Suggested resource for further education:
"Day For Night: Recognizing Teenage Depression (biochemistry)" available on YouTube.com

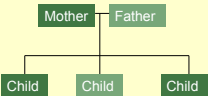
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Causes of depression

Biological
20 to 50 percent of depressed children and adolescents have a family history of depression (relative with depression)*

Abuse (Sexual or Physical)

Stressful life events such as illness or loss of family member



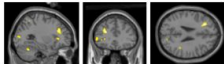
*Puig-Antich et al., 1989; Todd et al., 1993; Williamson et al., 1995; Kovacs, 1997

Families for Depression Awareness

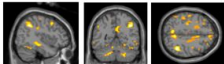
Biological changes with depression

fMRI of healthy vs. depressed adolescent brains show activation in medial and L prefrontal regions

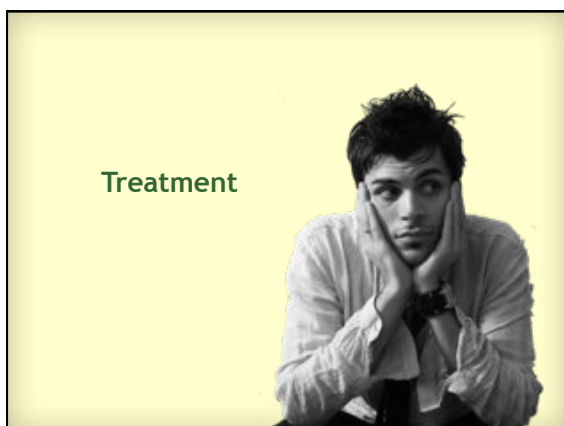
Healthy Brain



Depressed Brain



Courtesy of Carol Glod, PhD and Deborah Yurgelun-Todd, PhD



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How is depression treated?

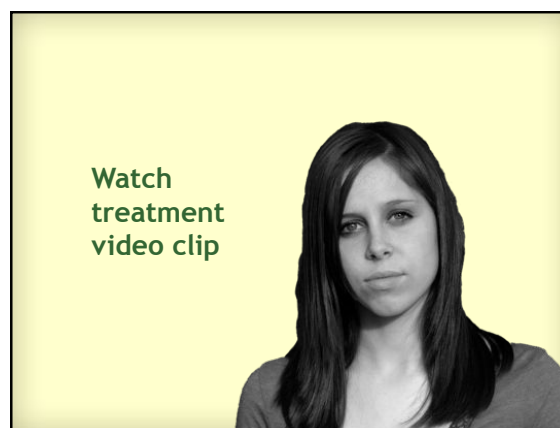
- Talk therapy (cognitive behavioral therapy)
- Medication
- Other interventions

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Antidepressants

Improves mood and functioning

- May take time to find the right medication or dosage
- Need to be monitored
- Alcohol and drugs interfere with their ability to work

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Treatment should also include education and support

Education
Families for Depression Awareness web site -- podcasts, guides, etc.

Support

- Support groups listed on www.familyaware.org
- Churches, temples, social groups
- Youth centers and clubs

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Bipolar Disorder in Brief

- Characterized by combination of manias and depression
- More time is spent in depressed state than manic
- Recommended medications include atypical antipsychotic or mood stabilizer, not antidepressant
- Talk therapy complements medication



Getting Help



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When to get help

- Any suicidal thoughts, behavior, talk
- When other signs last for 2 weeks or more
- When mood or behavior interfere with teen's ability to function



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Where to get help

Our mental health care system is overburdened!

There are only 7,000 child psychiatrists in U.S.

Get an evaluation early, preferably by a mental health care clinician

- Child psychiatrist
- Psychiatric nurse practitioners
- Psychologist
- Social worker
- Mental health counselor



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Referral Sources

- Pediatrician/family physician
- Pediatric nurse practitioner
- School psychologist, school nurse, guidance counselor
- Neighbors, friends
- Religious leaders
- Local mental health clinics
- Hospitals with child psychiatry departments
- Families for Depression Awareness, Get Help page at www.familyaware.org and Care Consultations for families in Massachusetts

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Evaluation

Good treatment depends on accurate diagnosis

Rule out other factors such as thyroid problems, learning disability, etc.

Typically involves:

- Family history
- Child development
- Performance in school
- Relationships with friends/family
- Life stressors
- Medical history




Communication



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When You're Not the Parent

- Your role is to encourage them to get help
- You are concerned, you see signs of depression
- You are not a clinician, you believe they should get a professional evaluation
- Keep a list of mental health clinicians to refer them to
- If you are a teacher, check in with other teachers about their observations of the teen; take concerns to student support team or guidance department




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Parent Concerns

- I'll wait till they outgrow this phase
- I don't want to label my child
- My teen refuses to see someone
- My teen will be mad at me
- I don't know where to go
- I don't want my child to take medication, I heard it is dangerous, has side effects, and hasn't been tested

Watch parent concerns video clip



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Talk to your Teen

- Be supportive
- Tell them you love them
- Talk about their good qualities and strengths
- This is not your fault
- My job as a parent
 - Keep you healthy
 - Keep you safe



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When a Teen Refuses

- I can handle this myself
- I'm not crazy (stigma)
- I don't want to be locked up in a hospital
- I don't want to take meds
- This will go away
- I don't want to talk about it



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Take Action

Signs	What to Do
Suicidal thoughts or behaviors OR Self-injury, such as cutting	Call your clinician immediately or go to your local hospital emergency room
Signs of depression: • 2 weeks or more; OR • Mood or behavior interferes with functioning	Contact mental health clinician for an evaluation

About Us



Families for
Depression/Awareness

Our Mission

We help families recognize and cope with depression and bipolar disorder to get people well and prevent suicides.

We are a national nonprofit organization providing education, training, and support.



Families for
Depression/Awareness

Depression and bipolar disorder affect the whole family



Families for
Depression/Awareness

Bringing depression into the light

Families for Depression Awareness is a national nonprofit organization helping families recognize and cope with depression and bipolar disorder to get people well and prevent suicides.



Family Stories

Join Us

Become involved today and help us continue our mission!



Donate Volunteer Order Publications

Announcements

Free Care Consultations
[Apply now \(limited availability\)](#)

Help a Teen
Register for our April 30 Teen Depression Webinar featuring Bev Cobain, R.N.

Learn to Manage Stress and Depression
Sign up for our May 14 Coping with Stress and Depression Webinar with Jesse Crosby, Ph.D.

Newsletter

Join our email list to learn about new family profiles, news, events, and how you can help!

Email

Go

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Depression in the Family

Audio Podcast Series

- Talking to your Teen About Depression
- Signs of Depressive Disorders
- Diagnosis and Treatment
- Helping a Family Member
- Caregiver Burnout
- Family Communication
- How to Find and Pay for Treatment
- Family History



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Mental Health Family Tree

Chart your family history of depression and bipolar disorder



Build Your Own Mental Health Family Tree

Mental Health Family Tree: Bipolar Disorder

*Please go to the bottom of the page for a full list of bipolar behaviors.



Families for Depression/Awareness

Education

Brochures and Wellness Guides

The image shows four brochures from Families for Depression/Awareness. From left to right: 'Coping After A Suicide' (green cover with a leaf), 'Coping with Stress' (blue cover with crumpled paper), 'Helping Someone Who is Depressed' (yellow cover with a flower), and 'Bipolar Disorder: Stories of Coping and Courage' (white cover with a collage of people).

Depression and Bipolar Wellness Guide

for parents of children and teens with depression or bipolar disorder

Get the Parent and Teen guides for FREE by filling out our webinar survey!

Families for Depression/Awareness

Depression and Bipolar Wellness Guide

Step 1: Define Wellness

Your Wellness Worksheet

Define what feeling "well", "ok", and "not well" means. Both you and your child should answer the questions below.

What is well?

Child: (e.g., I think clearly. I feel like making plans to do fun activities with my friends.)

Parent: (e.g., Alison does well in school. She enjoys playing with her brother.)

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Depression and Bipolar Wellness Guide

For people with depression, not bipolar disorder

Step 3: Record Daily — Depression

Month 1 Date June, 2007 Ask your child to answer the questions below every day. Discuss answers with you.

	Week 1							Week Total	Week 2							Week Total
	S	M	T	W	Th	F	S		S	M	T	W	Th	F	S	
Are you feeling down, depressed, or hopeless?	✓	✓	✓	✓	✓	✓	✓	6	✓	✓	✓	✓	✓	✓	6	
Do you have little interest and a lack of pleasure in doing things?	✓	✓	✓	✓	✓	✓	✓	6	✓	✓	✓	✓	✓	✓	6	

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Depression Wellness Analyzer

Computer-based tool to monitor treatment. Download at www.familyaware.org

The screenshot shows the 'DEPRESSION WELLNESS ANALYZER: RECORD DAILY' interface. It includes tabs for 'Wellness', 'Daily', 'Journal', 'Stats', and 'About'. The 'Daily' tab is active, showing a grid for recording symptoms over several weeks. Questions include: 'Are you feeling down, depressed, or hopeless?', 'Do you have little interest and a lack of pleasure in doing things?', 'Do you take your medication today?', 'List all drugs, prescription and nonprescription, you are taking.', 'What other signs would you like to track each day?', 'Hours sleep', 'What positive events or feelings happened this week?', and 'What is your overall wellness today? (As you described when you answered What is Well/Not Well in the Wellness Project...)'. The interface uses green and yellow circles to track responses.

Families for Depression/Awareness

Care Consultations (Massachusetts only)

If someone you love is showing signs of depression or bipolar disorder, a Care Consultation may be right for you.

- Meet with experienced therapist
- Discuss family concerns
- Get guidance on getting help
- Receive action plan with referrals
- Massachusetts only

Apply for a free care consultation at www.familyaware.org/care-consultations

Care for Your Mind

Bringing people with mood disorders and their families into a conversation about mental health care system and how to fix it

- Collaboration with Depression and Bipolar Support Alliance
- Experts from advocacy and mental health organizations, professional associations, & government agencies
- www.CareForYourMind.org



Resources

- American Academy of Child and Adolescent Psychiatry
- American Foundation for Suicide Prevention
- Depression and Bipolar Support Alliance
- National Federation of Families for Children's Mental Health
- National Alliance on Mental Illness
- National Mental Health Association

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**Contributions from
Individuals Like You!**

Thank you for attending!

Make a donation at
www.familyaware.org