



## **“DEPRESSION”**

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Peer interactions and social dynamics can have a crucial impact on your child’s emotional esteem. Concerns for performance, social status, risk for injury or overtraining, and parental/coach pressures can trigger or exacerbate predispositions or formulations for depressive symptoms.

In general, depression in children may occur differently than in adults. A parent or caregiver should look for signs that fit their youth’s developmental age as opposed to general signs of depression. The most common indication of some form of a depressive mood can include significant changes in behavior or a detachment or lack of interest in normal activities and behaviors. For example, a sudden lapse in desire to maintain peer interactions, poor academic performance, or changes in levels of expression can indicate a youth is experiencing emotional turmoil.

Depression can occur in children as more persistent than a general sadness and tends to interfere with normal functioning in social, academic, and family life. Most children with significant depression will have a noticeable change in social activities, academic difficulties, or changes in appearance. Recognizing emotional and psychological shifts in presentations may be the earliest identifier that a child or adolescent is experiencing a depressed mood. Acting out behaviorally, particularly in younger children, can often be an indicator of emotional distress. There is considerable difficulty for children to

articulate their feelings or to understand what is happening within them. Therefore, noticing changes in behavior that appear to promote isolation, despair, and/or changes in mood should be taken seriously.

***Depression Signs - what to Watch for:***

Symptoms of depression in children and adolescents can vary. Depression in children can be caused by any combination of life factors related to physical health, life events, environment, family history, genetic vulnerabilities, and biochemical responses. Family history of depression, poor family environments, exposure to substances may increase risks for depression. Symptoms for more than a period of two weeks should be taken seriously. Consultation with a mental health care professional with experience working with children is recommended.

***Symptoms of depression can include the following:***

- Continuous feelings of sadness or hopelessness
- Feelings of worthlessness or guilt
- Expressions of anger or crankiness
- Academic success deterioration
- Vocal outbursts or crying
- Sensitivity to rejection
- Social withdrawal
- Problems concentrating
- Impaired thinking
- Physical complaints that do not respond to treatment
- Fatigue lack of energy and motivation
- Lack of interest in activities at home, with friends, during school, extracurricular involvement, and other hobbies
- Changes in appetite, increased or decreased
- Changes in sleep (sleeplessness or excessive sleep)
- Thoughts of death or suicide

While there are numerous risk factors to depression in children and adolescents, the obvious parental response is to maintenance the developmental well-being of your youth. Early treatment and continual close monitoring are crucial to managing depressive symptoms early on and in mitigating effects later in life. It is essential that the parent is proactive in working to understand their child's symptoms and support their treatment. Knowing your child and formulating open communication within your relationship as well as offering a support network (coaches, teachers, mentors, family members, school counselors, etc.) that can collectively provide feedback are essential to mitigating depressive symptoms that can occur throughout a child's developmental experiences. It may also be essential to continue to educate yourself on the future effects depression may have on your child throughout adolescence and into adulthood.

***Parents should be particularly vigilant of signs of risks for suicide. These signs can include:***

If your child is displaying signs of depression or talking about wanting to die, have a conversation and be sensitive to their concerns. Ensure that you maintain open communication and be accepting of their expressions even if they do not appear to make sense or if you don't think their problem is a real concern. When a child is suffering emotionally, that last thing you want to do as a parent is act as if their problem is not a problem.

***What you don't want to do:***

- Criticize or minimize their feelings
- Act as if you are a mental health professional if you are not
- Being pushy or telling your child how they ought to feel
- Compare their depressive symptoms to those of an adult
- Leave their loneliness unattended
- Ignore them

***What you can do:***

- Contact your pediatrician for further guidance into resources
- Contact a local mental health service provider
- Contact reputable organizations for resources online (i.e., American Academy of Child and Adolescent Psychiatry)
- Coordinate support network to support youth's emotional well-being
- An evaluation for symptoms of depression as well as other problems such as anxiety or attention-deficit hyperactivity disorder should be assessed to determine the root of your child's problem.

Remember: When a child needs emotional support, the parent(s) and other family members need to be completely open and available to their emotional needs. Emotional support during this time can be a foundation for formulating trust within future social relationships. By encouraging open and honest conversations, listening attentively to concerns, acknowledging their inner struggles, and investing in quality time with your child, you may be better able to manage their emotional needs through awareness and positive attachments. Also, encourage a healthy lifestyle (regular sleep, exercise, and healthy meals) and assist your child in participating in social activities to combat isolation (i.e., family gatherings, social events, and school activities). Providing a supportive home environment and consistently modeling listening, talking, and encouraging behaviors are foundational to responding to depression.