Introduction

What is depression?

Most people, children as well as adults, feel low or ‘blue’ occasionally. Feeling sad is a normal reaction to experiences that are stressful or upsetting.

When these feelings go on and on, or dominate and interfere with your whole life, it can become an illness. This illness is called ‘depression’. Depression probably affects one in every 200 children under 12 years old and two to three in every 100 teenagers.

What are the signs of depression?

- Being moody and irritable – easily upset, ‘ratty’ or tearful
- Becoming withdrawn – avoiding friends, family and regular activities
- Feeling guilty or bad, being self-critical and self-blaming – hating yourself
- Feeling unhappy, miserable and lonely a lot of the time
- Feeling hopeless and wanting to die
- Finding it difficult to concentrate
- Not looking after your personal appearance
- Changes in sleep pattern: sleeping too little or too much
- Tiredness and lack of energy
- Changes in appetite
- Frequent minor health problems, such as headaches or stomach-aches
- Some people believe they are ugly, guilty and have done terrible things.

If you have all or most of these signs and have had them over a long period of time, it may mean that you are depressed. You may find it very difficult to talk about how you are feeling.

What causes depression?

Depression is usually caused by a mixture of things, rather than any one thing alone.

Events or personal experiences can be a trigger. These include family breakdown, the death or loss of a loved one, neglect, abuse, bullying and physical illness. Depression can also be triggered if too many changes happen in your life too quickly.

Risk factors People are more at risk of becoming depressed if they are under a lot of stress, have no one to share their worries with, and lack practical support.

Biological factors Depression may run in families due to genetic factors. It is also more common in girls and women compared to boys.

Depression seems to be linked with chemical changes in the part of brain that controls mood. These changes prevent normal functioning of the brain and cause many of the symptoms of depression.

Where can I get help?

There are a lot of things that can be done to help people who suffer from depression.

Helping yourself Simply talking to someone you trust, and who you feel understands, can lighten the burden. It can also make it easier to work out practical solutions to problems. For example, if you are stressed out by exams, you should talk to your teacher or school counsellor.
If you are worried about being pregnant, you should go and see your general practitioner or family planning clinic. Here are some things to remember:

- talk to someone who can help
- keep as active and occupied as possible, but don't overstress yourself
- you are not alone – depression is a common problem and can be overcome.

**How parents and teachers can help**

It can be very hard for young people to put their feelings into words. You can help by asking sympathetically how they are feeling, and listening to them.

**When specialist help is needed**

If the depression is dragging on and causing serious difficulties, it’s important to seek treatment. Your general practitioner will be able to advise you about what help is available and to arrange a referral to the local child and adolescent mental health service.

Many young people will get better on their own with support and understanding. For those whose symptoms are severe and persistent, the National Institute of Clinical Excellence (NICE; www.nice.org.uk) recommends that the young person is treated initially with a psychological therapy, such as cognitive-behavioural therapy (CBT) for 3 months. CBT is a type of talking treatment that helps someone understand their thoughts, feelings and behaviour (see Royal College of Psychiatrists Factsheet on CBT; www.rcpsych.ac.uk/info/factsheets/pfaccog.asp).

**Antidepressant medication** should only be used with a psychological therapy such as CBT. Antidepressant medication needs to be taken for 6 months after the young person feels better. Mild depression should not be treated with antidepressants, but instead with general help and support (see Royal College of Psychiatrists’ Factsheet on antidepressants; www.rcpsych.ac.uk).

There is evidence that some antidepressants called SSRIs (selective serotonin reuptake inhibitors) can increase thoughts of suicide. For this age group, fluoxetine, which is an SSRI antidepressant, can be used and research has shown that the benefits outweigh the risks. None of the antidepressants are licensed for use in young people under the age of 18 and should only be used by child and adolescent psychiatrists, after a careful assessment. Weekly monitoring of how the young person is feeling will happen in the first 4 weeks, and then regularly after that.

**Sources of further information**

- ‘Changing Minds: Mental Health: What it is, What to do, Where to go?’ A multi-media CD-ROM on mental health that looks at depression. www.changingminds.co.uk.
- Childline provides a free and confidential telephone service for children. Helpline: 0800 1111; www.childline.org.uk.
- The Samaritans provide a 24-hour service offering confidential emotional support to anyone who is in crisis. Helplines 08457 909090 (UK); 1850 609090 (ROI); e-mail: jo@samaritans.org; www.samaritans.org.uk.
- YoungMinds provides information and advice on child mental health issues. 102–108 Clerkenwell Road, London EC1M 5SA; Parents’ Information 0800 018 2138; www.youngminds.org.uk.

**Or you may want to look at these websites:**

www.depressionalliance.org
www.thecalmzone.net
www.thesite.org/info/health/depression

- The Mental Health and Growing Up series contains 36 factsheets on a range of common mental health problems. To order the pack, contact Book Sales at the Royal College of Psychiatrists, 17 Belgrave Square, London SW1X 8PG; tel. 020 7235 2351, ext. 146; fax 020 7245 1231; e-mail: booksales@rcpsych.ac.uk, or you can download them from www.rcpsych.ac.uk.

**References**

