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Battling the Blues

**The Handbook for Helping
Children and Teens with Depression**

Grades 3-8

Kim "Tip" Frank, Ed.S., LPC

*Battling
the
Blues*

SECTION 1

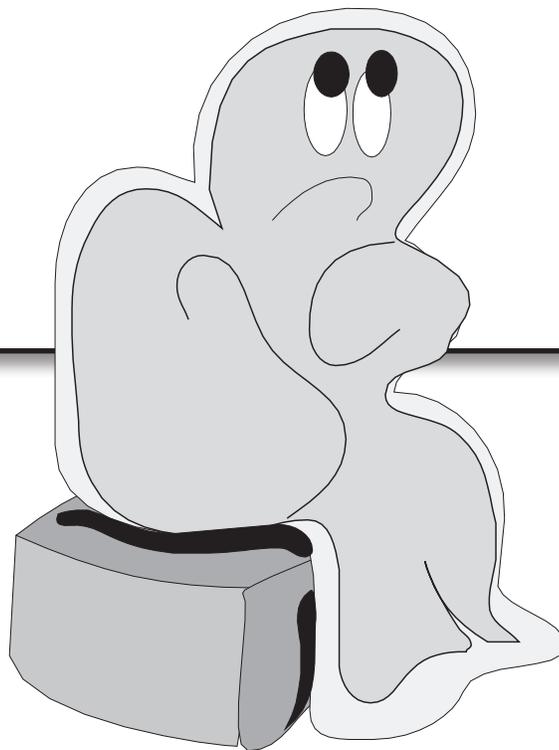
**For
Concerned
Adults**

DEFINITION:

What Exactly Is Depression?

Childhood depression goes beyond the normal “blues” that we all encounter. All children, teens, and adults have “down” feelings from time to time.

Real depression, however, is a persistent condition that interferes with normal functioning.



No one thing causes depression...

But, it can be related to any combination of the following.

- ✱ Family history (depression tends to run in families)
- ✱ Physical health issues
- ✱ Life events (changes and losses)
- ✱ Negative environment
- ✱ Chemical imbalance in the brain

Symptoms of child and adolescent depression vary in severity and duration. These symptoms may be different from what depressed adults experience. The National Mental Health Association advises parents to note the following signs of depression in young people.

- ✱ Missed school or poor school performance
- ✱ Changes in eating and sleeping habits
- ✱ Withdrawal from friends and activities once enjoyed
- ✱ Persistent sadness and hopelessness
- ✱ Problems with authority
- ✱ Indecision, lack of concentration or forgetfulness
- ✱ Poor self-esteem or guilt
- ✱ Overreaction to criticism
- ✱ Frequent physical complaints, such as headaches and stomachaches
- ✱ Anger and rage
- ✱ Lack of enthusiasm, low energy or motivation
- ✱ Drug and/or alcohol abuse
- ✱ Thoughts of death or suicide
- ✱ Self-mutilation (cutting)

The Two-Week Rule of Thumb

If your child or one you know has been struggling with any combination of these symptoms for more than two weeks, action needs to take place. A physician and/or mental health professional need(s) to be contacted.

Comorbidity

Depression in children and adolescents often occurs in concert with other mental and physical problems. These may include anxiety disorders, oppositional defiant disorder, ADHD, sleep disorders, substance abuse disorders, etc. A dual diagnosis involving depression and another disorder is not uncommon.

Watch for Relapse

Once a young person has been treated for an extended bout with depression, he or she is at an increased risk for having another episode within the next five years. According to the National Mental Health Association, those who experience childhood depression are five times more likely to have depression as an adult. It is wise to continually monitor for signs of depression in the years that follow the original bout of depression.

A Caution About Teens and Substances

In an attempt to numb or manage pain, adolescents often “self-medicate.” Any child or teen that abuses alcohol or other drugs needs to be evaluated for depression. If an addiction has occurred, it is often necessary to treat both the mental health issues and the substance abuse problem.

Don't Play with Fire: Be Proactive

Suicide is the third leading cause of death among people from 10 to 24 years of age. The U.S. Surgeon General estimates that more than 90 percent of children and adolescents who take their lives have the disorder of depression. Each year, almost 5,000 young people, ages 15 to 24, kill themselves (“Depression in Teens,” 2007). The rate of suicide among young people has nearly tripled since 1960. The Center for Disease Control and Prevention estimates that 125,000 attempted suicide in 2002 (“Facts About,” 2006).

The problem of suicide is pervasive. Please note the following warning signs of suicidal behavior.

- ✱ Talk of suicide or wanting to die
- ✱ Feeling hopeless or helpless
- ✱ Withdrawal from others
- ✱ Focus on morbid themes
- ✱ Giving away possessions
- ✱ Talk about death and dying
- ✱ Increased risk-taking behaviors
- ✱ Promiscuous behavior (sexual acting out)

- ✱ Increased behavior problems
- ✱ Frequent accidents
- ✱ Substance abuse
- ✱ Excessive crying or extreme flat affect (little or no expression of feelings)

Young people displaying these warning signs need to be evaluated immediately by a physician or mental health professional. It is especially important to determine if a person has a plan to commit suicide. A person having a plan often will require hospitalization. Even in cases where a person has suicidal ideation but does not have a suicide plan, constant adult supervision is needed. A safety plan needs to be maintained until the threat of suicide has clearly passed.

A Big Caution Regarding Suicidal Recovery

Suicide attempts tend to increase as the person with depression appears to be getting better emotionally. It is theorized that a very depressed person does not have the energy to act on suicidal thoughts and plans. As energy increases, so does the ability to attempt harming oneself. Once again, supervision of the depressed young person for an extended period of time is necessary. This safety net may need to involve family, friends, and school personnel, as well as frequent monitoring by mental health professionals and physicians.

What About Young Children and Suicide?

Although relatively rare in youths under 10, kids do attempt suicide. Typically, if attempted, it is done in an impulsive moment of anger or upset feelings. Girls are more likely to attempt suicide, but boys are more likely to actually kill themselves when a suicide attempt is made. Children that are particularly at risk for suicide include those affected by physical and sexual abuse, family alcoholism, and domestic violence.

How Big is the Scope of Depression?

The myth that children “don’t have anything to be depressed about” is quickly dispelled by simply looking at the numbers. According to the National Mental Health Association, up to 2.5% of children and up to 8.3% of adolescents in the U.S. suffer from depression. That is 1 in 33 children and 1 in 8 teens that are depressed at any one time. The rate of depression among adolescents is similar to adults. One sobering estimate is that two-thirds of youth with mental disorders do not get the help they need (“National Mental Health,” 2006).

Depression is significantly greater in boys under the age of ten. However, by age sixteen, girls have a higher incidence of depression. Children under chronic stress who have experienced major losses or who have attention, learning, or behavior disorders are at higher risks for depression.

Battling *the* Blues

SECTION 2

For Kids and Teens

What You Should Know About Depression

Helping children and teens to understand depression in simple and concrete terms is vital. Kids need words for what is happening to them. Beyond this, coping strategies and skills empower children and teens to courageously move forward in combating depression. This section is dedicated to these purposes. Please teach the following practical ideas to children and teens you know who need encouragement to overcome depressed feelings.

The Signs of Depression for Children Through Age 12

Place a check by any of the following that describe you.

- _____ My grades are lower than they should be.
- _____ I am often absent from school.
- _____ I am spending more time alone and less time with friends.
- _____ I don't enjoy doing things I normally like to do.
- _____ I often have sad or hopeless feelings.
- _____ I often forget things.
- _____ I have trouble focusing and getting things done.
- _____ I feel down on myself.
- _____ I blame myself often for problems.
- _____ I get easily upset with others.
- _____ I have headaches and stomachaches more than normal.
- _____ I have a short temper or am often mad.
- _____ I often feel tired—not wanting to do things.
- _____ I am not keeping up with my school work and chores.
- _____ I don't take care of myself as well as I should (bathing, brushing teeth, eating right, exercising, etc.).

Everyone has depressed feelings from time to time. There is, however, a huge difference between depressed feelings and depression. True depression involves long-lasting periods of down feelings. These unhappy periods of time get in the way of normal living. Keep in mind that these signs of depression are only a big problem if they last for weeks or months.

If you are struggling with any one or a combination of these signs of depression, please ask for and get the help you deserve. There are adults that can be trusted. You may want to talk to a teacher, coach, counselor, or family member for starters. Once you've "broken the ice" by telling someone you trust about the things you are experiencing, professional help can be arranged. Trained mental health counselors and doctors can help you to feel and function better. ***Depression is not something to take lightly.*** Talk to someone you trust and get help. The people you know and trust make up your own personal support system. These are people who will love you no matter what and will help you in any way possible.

List Your Personal Support System

1. _____
2. _____
3. _____
4. _____
5. _____

The Signs of Depression for Teens Ages 13-18

Place a check by any of the following that describe you.

- _____ My school performance is not up to par.
- _____ I am missing too many days of school.
- _____ I am withdrawing from friends.
- _____ I refrain from doing enjoyable activities.
- _____ I often feel hopeless or sad.
- _____ I have trouble making decisions.
- _____ I forget things too often.
- _____ I have trouble concentrating and getting things done.
- _____ I have negative thoughts about myself.
- _____ I often feel guilty.
- _____ I overreact toward others.
- _____ I regularly complain of not feeling well (headaches, etc.)
- _____ I tend to feel angry and go into rages.
- _____ I have little energy much of the time.
- _____ I neglect to take care of myself (personal hygiene, eating right, exercise, etc.).
- _____ I am not keeping up with my school and home responsibilities.
- _____ I drink alcohol and/or take other drugs.
- _____ I have thoughts of wanting to hurt myself or of dying.
- _____ I am cutting or injuring myself in other ways.

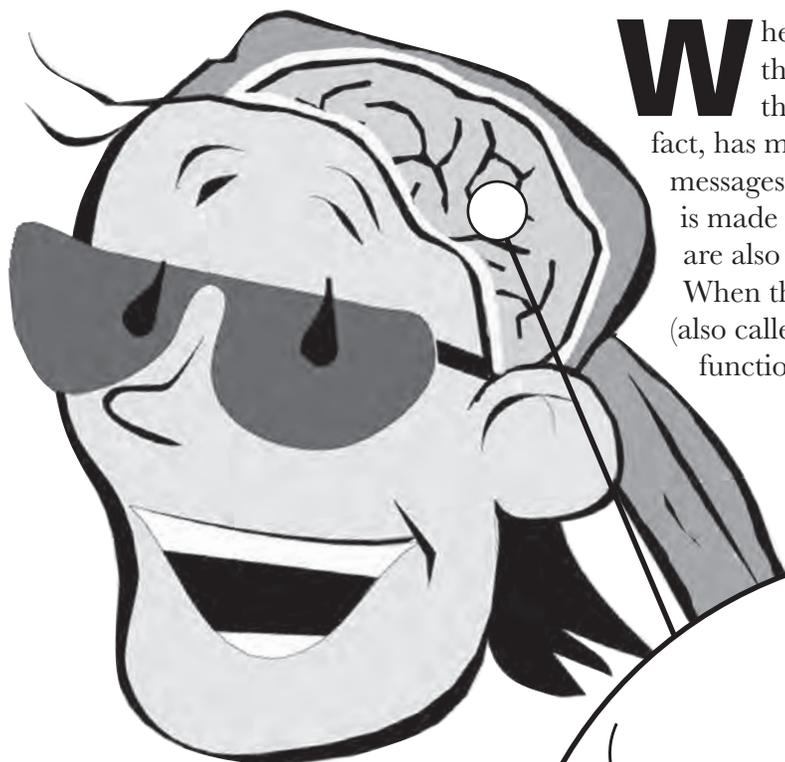
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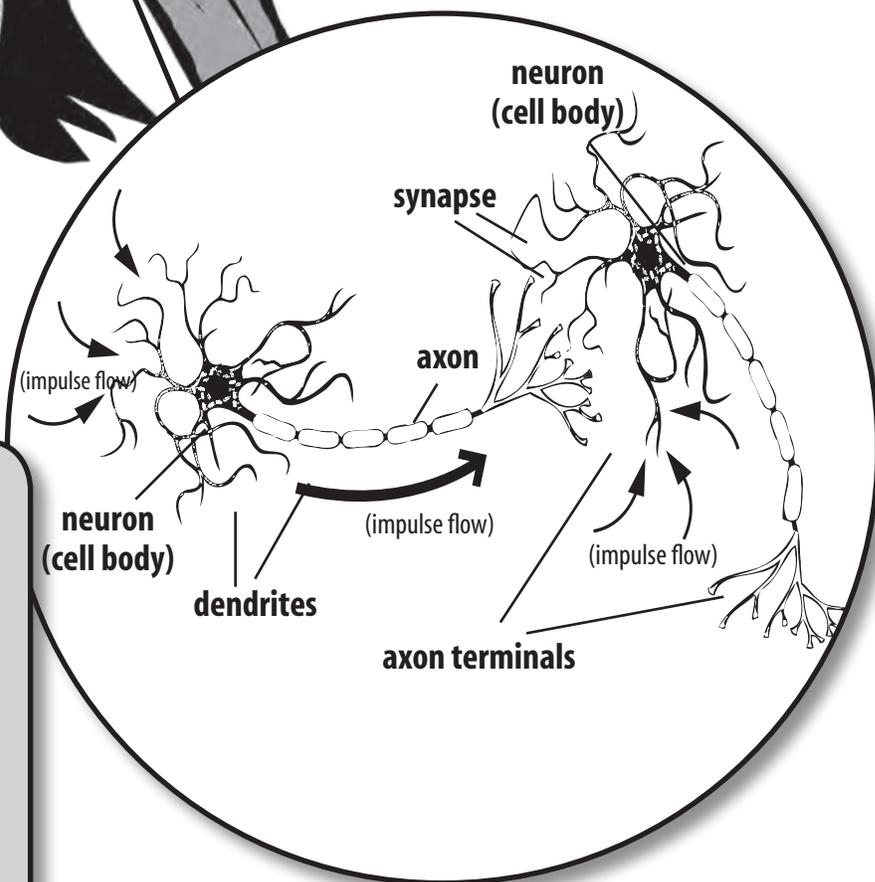
What Is This Thing Called Depression?



When depression occurs, scientists believe that the brain is low in certain chemical substances that need to be strengthened. The brain, in fact, has more than sixty chemicals that pass along messages from one nerve cell to another. The brain is made up of more than 10 billion nerve cells that are also called neurons (“Causes: Biology,” 2006). When there is a shortage of chemical messengers (also called neurotransmitters), the brain does not function as usual. As a result, depression can occur.

Did You Know?

Messages are passed from one nerve cell, also called a **neuron**, to the next. As pictured, there is a tiny space between each nerve cell called the **synapse**. Nerve cells relay messages across the synapse by chemical messengers called **neurotransmitters**.



The Nine-Point Depression Test

Place a check by any of these symptoms of depression that fit your situation and add up your points.

- Feeling tired often (1 point)
- Feeling hopeless or sad (1 point)
- Not eating as normal (eating too much, too little or not eating regularly) (1 point)
- Problems concentrating and finishing work (1 point)
- Losing interest or pleasure in doing things you have always enjoyed (1 point)
- Sleeping too much or having trouble sleeping (1 point)
- Having bad feelings about yourself (1 point)
- Moving and speaking slowly or being hyper and restless (1 point)
- Having thoughts that you would be better off dead or of wanting to hurt yourself (2 points)

_____ TOTAL POINTS

If you scored two or more points and have had these symptoms for two weeks or longer, you may have depression. As stated earlier, talk to adults you trust about your situation. When it is thought that a person has depression, counseling and/or medication may be needed. Counselors help people work through feelings and problems and can provide strategies to reduce stress (feelings of worry, upset, or sadness due to life's problems). Doctors sometimes prescribe medications called antidepressants to replace certain chemicals in the brain. These antidepressants help the brain's chemicals get back in balance.

You Are Not Alone

Lots of young people, as well as adults, battle depression. Sadly enough, two out of three young people with disorders like depression do not get the professional help needed ("National Mental," 2006). Good help is available. Ask until you get the care you need!



Great news! These treatments for depression usually work well, and most people move on with their lives in due time.

Blues Busters:

Coping Strategies for Battling the Blues

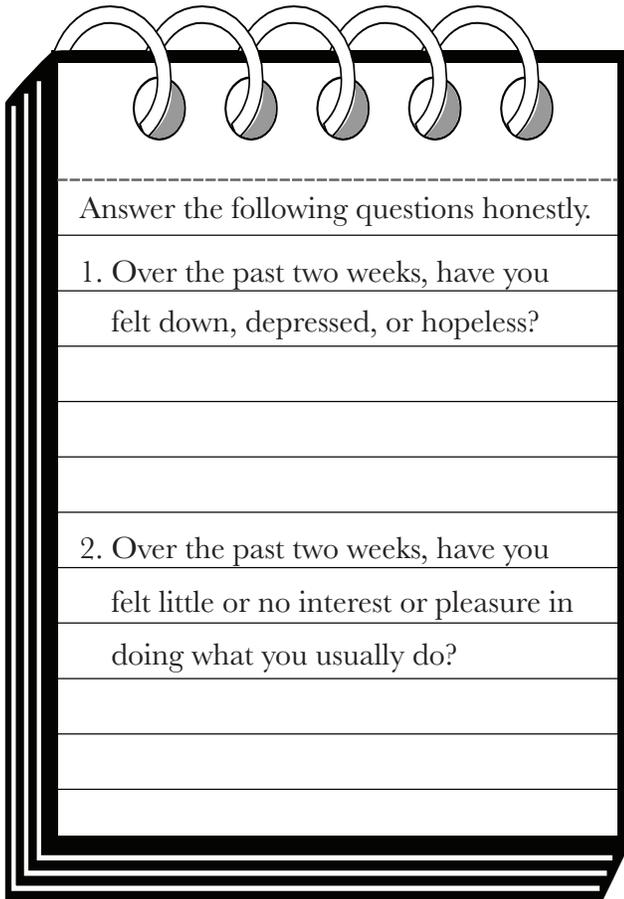
Many strategies are given in this book to help you “beat the blues.” **Regular practice** will help these strategies work well in your life. After reading all the strategies, choose the ones you feel will work best for you. Please take time to do the **activities** after each strategy. The activities will help you remember and put into practice these ideas which have proven helpful to many others. Please note that you are welcome to copy the activity pages to use again and again.

A note to clinicians and educators: These strategies are also designed to be taught in therapy or in classroom settings. Once again, the strategies work best when practiced regularly.



Strategy 1

Check It Out for Yourself Two Questions to Honestly Answer



Answer the following questions honestly.

1. Over the past two weeks, have you felt down, depressed, or hopeless?

2. Over the past two weeks, have you felt little or no interest or pleasure in doing what you usually do?

Don't Be Shy!

Many people feel embarrassed to bring up the possibility that they may be depressed. Others believe nothing will help. The truth is that even in the event that you are battling depression, the treatments now available really do help. Don't be afraid to confront your situation.

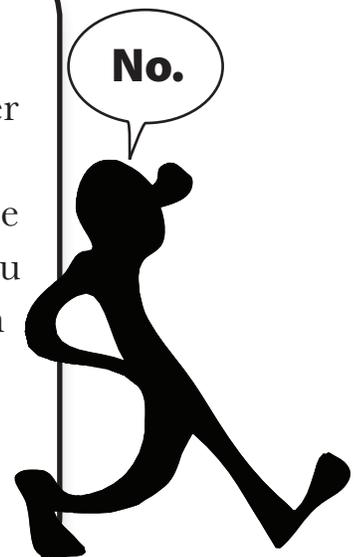


Yes.



Yes.

According to the *Harvard Mental Health Letter* (September, 2006), studies suggest that about 2 out of 3 people who answer yes to at least one of these questions do have some degree of depression. So, the first step is to face the possibility that you may be depressed and get an evaluation done for depression. Ask a family member or someone at your school to arrange a visit to see your doctor or a mental health counselor.

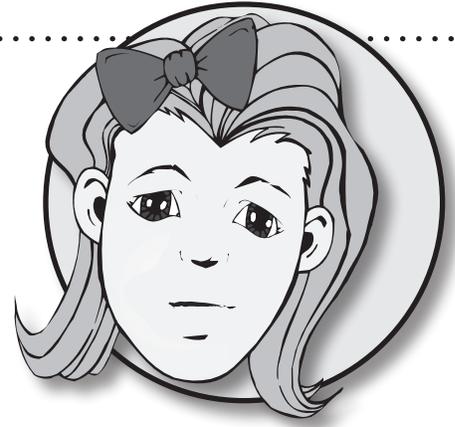


No.

Activity 1

How Are You Really Doing?

Feeling down or hopeless and just not enjoying life are two key signs of depression.



In the space below, write or draw what life is like for you now.

Write down the name of an adult family member or an adult you trust at school or in the community. ***The person I can talk to is*** _____.

Plan to talk to this person soon.

Real depression is not a mood that one can just “snap out of.”

It is a serious mental health problem that affects one in thirty-three children and one in eight adolescents. *Battling the Blues* explains in understandable terms what depression is and provides practical coping strategies so that children and teens can gain a greater sense of control in their lives. The good news is that depression is a treatable condition with proper medical and psychological interventions. The ideas in this book represent helpful tools that adults and children can readily employ in the treatment process.

Kim “Tip” Frank is a long-time educator and therapist. He has had the privilege of helping hundreds of kids formerly as a teacher and for the past many years as a counselor/therapist. He works in the public school setting and also maintains a private counseling practice. Tip has authored and coauthored a number of books on topics including ADHD, anxiety disorders, depression, social skills, and grief. He also has opportunities to lecture across the country. Most importantly, Tip is a devoted husband and a father of two teenagers.



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This book is divided into two sections.

SECTION ONE

Primarily written for concerned adults, this section is for parents and professional helpers who are trying to encourage and help children through the cloud of depression. Specific tips are provided in this first section that help adults set a healing environment for kids and teens. In addition, a deeper understanding of depression is developed along with resources that can be accessed to overcome depression.

SECTION TWO

Although mainly for kids and teens, parents and helping professionals can discuss and encourage the use of the strategies provided in this section. The strategies are mainly geared for grades three through eight. They can be easily adapted, however, for younger or older children. The strategies are kid friendly and perhaps a bit off the beaten path, but they have proven to be successful. With regular practice, these strategies and techniques can become automatic and effective. As a backdrop to these coping strategies, a clear explanation is given about depression and how it affects young people. Armed with a good understanding of depression, along with practical coping strategies, one's life can and will improve.

