

## **Understanding Childhood Depression**

When we think of a depressed child, we often envision a morose child who is consistently sad. However, sadness may not be the symptom that defines whether a child is depressed. It is estimated that five percent of all children suffer from serious depression that requires some form of treatment and intervention by physicians and other health care workers. The most important thing that we can do as parents and teachers is to learn to identify the signs and symptoms of this condition, so that proper action can be taken.

### **Art and play**

Children experience and manifest depressive symptoms in a unique set of ways, different from adults. Many children cannot identify their depression with the use of words, so it is vital to recognize other clues. Very young children, for instance, may show depressive signs in their play and drawings with the use of dark colors and sad themes. Depressed children may consistently paint trees without leaves, branches or fruit; they may draw broken down houses, and depict crying moons, suns and animals. They may even paint images of themselves and family members that seem lifeless, sad or morbid. These may be signs that their mood is being greatly affected. Such depressive themes in art and play may indicate the possibility of a primary genetic inheritance of depression, a reaction to family and school stressors, or both.

### **Behavioral problems**

Depressed children may develop new behavioral problems at home and school. They may be persistently irritable and edgy and may not know why. Often their tolerance of conflict and frustration is very low. Attention span is markedly limited, which means that children who are depressed may appear very distracted. The common reaction to this type of behavior is disciplinary action, and often the consideration of depression is overlooked.

### **School performance**

A key clue to depression that should not be ignored is a sudden change in school performance. If a child is falling into the "grade danger zone", or shows significant and sudden change in performance, this may be a clue that the child is depressed. Children who are becoming more seriously depressed often isolate themselves from friends and family in a way that is not characteristic of that child.

### **Lethargy**

Some children sleep for longer than usual periods during the day; they may appear to be slow, lethargic and lack interest in their usual activities.

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## **Physical complaints**

Many younger children suffering from depression are preoccupied by a wide variety of complaints such as headache, stomachache, or leg and arm pain. If such symptoms are occurring often, parents need to keep depression in mind. These complaints may be particularly significant if a child is consistently using them to avoid school, friends, and other family members. Children may also be so focused on their aching head, or may tantrum so severely about an abdominal pain, that getting ready for school becomes an ordeal. If persistent, these children may be dealing with depressive feelings that they cannot put into words.

Parents, teachers, and counselors need to be aware of such patterns of bodily complaints over time, along with the other symptoms of depression that may not necessarily be directly related to sadness.

## **Drugs and alcohol**

A turn to the "wrong crowd" or a sudden binge with drugs and alcohol could mean that your child is dealing with a serious depression. Instead of harsh confrontation, parents need to examine whether depression is a possible cause. Kids who use drugs may have a primary substance abuse problem but some children mask their depression through drugs and alcohol in an attempt to relieve their pain.

## **Suicide threats**

An attempt or threat of suicide is a cry for help. Direct intervention by health care practitioners is vital in order to discern what is really behind the threat, and whether the threat is in fact serious. In any case, a suicide threat is a clear indication that a child or teenager is in need of professional help.

Parents need to take seriously any themes of death and dying through the child's writings, drawings and conversation. Intervention starts with asking children directly about their feelings, and making them feel comfortable enough to reveal often awkward and difficult ones. School counselors are a valuable resource. The child's primary pediatrician will definitely lend a hand in helping to screen an indication of depression. A child and adolescent psychiatric physician will help families discern the diagnosis and help balance the treatment with outpatient therapy, medications and even hospitalization when needed.

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### **Become a Sherlock Holmes of kids' symptoms**

To identify and then understand the nature of a child's depression requires that parents, educators, and health practitioners become "symptom sleuths". A little investigation, research, and treatment could help spare children years of suffering, and may perhaps save lives.

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