

YOUNG PEOPLE

ParentLink guides use 'he' and 'she' in turn. Change to suit your child's sex.

Young people go through many different feelings and moods as they're growing up and parents are often unsure about whether this is normal or whether they should do something.

Young people can feel depressed for all sorts of reasons and their depression can vary from having moods and feeling a bit 'down' or 'blue' for a little while, to feeling overwhelming sadness and hopelessness. Some will even feel suicidal.

Most young people have mood swings and times when they feel very unhappy in adolescence, but it is important to be aware that up to 24 per cent of young people suffer a major depressive illness at some time.

Being 'down' most of the time is not 'normal'. Depression in young people is often not recognised. The type of help and support young people receive can make a real difference.

Although it is often difficult to communicate with someone who is feeling very low and words may not come easily, it is important that you don't ignore your child's feelings or leave them to deal with their situation alone. Knowing that friends and family really care and are willing to give support can be the first vital step in getting better.

Types of depression

There are three different types of depression:

Depressed mood

- A depressed mood doesn't usually interfere with daily activities.
- This is when a person is feeling sad or 'blue' and is an emotion common to people of all ages.
- The feeling usually results from minor problems or a loss, for example, a broken date or criticism etc.
- People usually feel better after talking about the problem with someone close to them or after doing something they enjoy.

Dysthymia

Dysthymia is a milder type of depression that can last for over a year in young people.

A person with dysthymia may:

- gradually lose interest in things they have enjoyed doing and appear to be more 'down' most of the time
- have less energy and find it difficult to concentrate
- have trouble with eating and sleeping patterns
- the most common factor is feeling bad about themselves and having less confidence and enjoyment in their lives.

Dysthymia is more serious than just a depressed mood alone and may need professional assessment and help if you are concerned.

Major depression

Major depression is an illness in which a person has a severely depressed mood and no longer enjoys life. It usually occurs more rapidly and may be triggered by a major stressful event such as a death or a broken relationship. However, major depression may begin with no obvious cause.

A teenager with a major depression may show some of the following signs:

- loss of interest or enjoyment in his usual activities
- changed eating patterns with weight gain or weight loss
- severe sleeping problems
- low energy levels
- poor concentration with school work or other things
- loss of interest in friends
- not wanting to go out
- feeling hopeless or worthless
- being sad or tearful
- being angry or irritable a lot of the time
- feeling guilty and to blame for things going wrong
- increasing drug and alcohol use
- not taking care of how he looks or of hygiene
- excessive worry about physical health
- complaints about constant headaches, stomach aches and other physical pains



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Types of depression *continued*

- carelessness about physical safety
- behaviour problems and delinquency
- having thoughts about being better off dead or that life is not worth living (see signs listed under suicide risk factors)
- preoccupation with death and suicide.

Young people at risk

Depression can affect anyone, but some young people are more likely to become depressed if:

- they have a close relative who has suffered from depression
- they have had a major life stress or several stresses.

A major life stress can be a family break-up, school failure, child abuse, loss of a parent, accident, broken relationship or moving to another area.

Suicide risk factors

Suicide stressors

Stresses that sound small to adults may be very important to young people and should be taken seriously. Telling a person who is upset that their worry is 'about nothing' only makes things worse. They feel that no one understands and this increases their sense of being alone in the world.

Suicide attempts in young people are often triggered by recent stress. It is not just the new stress but a combination of feelings and events that usually leads them to take action.

The following things may mean that a young person is seriously thinking about taking his life:

- talk or threats of suicide
- hints such as 'I won't be a problem for you much longer'
- previous attempts—especially if the person was alone at the time
- careless risk taking behaviour
- self-destructive behaviour
- sad or angry mood that does not go away
- giving away personal possessions
- suddenly clearing out belongings and getting them in order
- becoming suddenly cheerful without reason after being depressed.

If you notice these things happening you need to take action to keep your child safe. See your doctor to discuss your concerns or contact any of the agencies listed under Want more information?

Myths about suicide

There are a number of common sayings that are incorrect about suicide, such as:

Myth: People who talk about suicide won't do it.

Truth: Almost everyone who commits suicide gives some clue or warning.

Myth: Anyone who tries to commit suicide must be crazy.

Truth: It isn't as simple as this. Suicidal thinking isn't necessarily a sign of mental illness. In young people depression is almost always behind suicidal thinking. Often no one has realised that the young person was depressed.

Myth: If people really want to kill themselves nothing will stop them.

Truth: What they usually want is for the pain to stop. The feeling of wanting to end it all doesn't last forever. In fact, sometimes it doesn't last for long at all, particularly if things in the person's life change.

Myth: People who complete suicide don't seek help before their death.

Truth: More than half of the people who commit suicide have been to their doctor for help in the six months before their death, though they may not tell their doctor they are thinking of suicide.

Myth: Talking/asking about suicide may give someone the idea.

Truth: The opposite is true. Discussing suicide openly helps people talk about their feelings and to look for other ways to stop the pain.

Telling a person who is upset that their worry is 'about nothing' only makes things worse. They feel that no one understands and this increases their sense of being alone in the world.

What parents can do

All situations are different. When young people are suffering with depression they are not always able to ask for help and may even refuse your help at times. This can be difficult because you feel as if you're being rejected.

It is important that you:

- never treat depression as if it is simply teenage 'blues'—always take it seriously
- encourage your child to seek help by providing a list of contacts for her to choose from
- if your teenager won't go for help and you are really worried, go by yourself first and get some advice about how to best handle the situation
- show love and concern—this doesn't mean that you have to agree with everything your child does or wants to do, but young people need to know that you still love them no matter who they are or what they do
- take time to listen when your teenager wants to talk about her feelings
- show her that you are available without being 'pushy'
- encourage her to do things you know she enjoys
- notice the little things she does that you approve of
- make sure that you do not keep a gun in your home or shed. (Farmers need to be very careful about where they store guns because this is the method often used in youth suicides in country areas)
- take seriously any talk about suicide and actions such as giving away special things.

Do whatever is needed to protect your child's safety—even if it is against her wishes.

Taking care of yourself

Parenting a teenager who is under severe stress or suffering depression can be very stressful. At times it may seem as if your child is deliberately not trying or misbehaving.

When you find yourself feeling angry or frustrated:

- take a step back and think about what is happening before you react
- remember to hang in there, your child needs your love even if she seems to reject it
- think about your own views:
 - are you wondering 'Why should I have to put up with this terrible behaviour?' (This thinking will make the situation worse.)
 - are you thinking 'Something must be wrong for my child to be behaving like this'? (This thinking will lead to a search for the cause.)
- ask people close to you for support
- ask someone the young person is close to (for example, another relative) to help provide support—but make sure your child knows that you're not rejecting her
- make sure you do things for yourself—you need to take care of your own needs if you're to help your child
- get professional help if you feel you are struggling.

Where to get help

There is a range of different treatments for depression.

- Psychological therapy, or counselling, is usually used first for adolescent depression.
- There is good evidence for a form of therapy called Cognitive Behaviour Therapy (CBT).
- Antidepressants can be beneficial for resistant depression and are often used in combination with CBT.

The right treatment will depend on the individual needs and your child's situation.

It is important to persist until the right treatment is found as often young people are particular about who they will talk to.

The following organisations or people may be of some help in either providing treatment or referring you to where you can get help for your son or daughter.

There can be long waiting lists so, when making an appointment, explain briefly what the problem is, especially if you are very worried.

- Child and Adolescent Mental Health Service (CAMHS)
- your doctor
- community health centre
- psychiatrist
- psychologist
- counsellor specialising in depression.

There can be long waiting lists, so when making an appointment explain briefly what the problem is, especially if you are very worried.

Parents can sometimes be wary about bringing their concerns out in the open for fear of what others will think. It is important that you don't allow this fear to stop you from getting the best support you need to help your child.

Contacts

Child and Adolescent Mental Health Service (CAMHS)	24-hour	1800 629 354
Kids Help Line	24-hour	1800 55 1800
Parentline ACT	9am–9pm Monday–Friday, except public hols	6287 3833

Websites

www.beyondblue.org.au	National Depression Initiative (Australia)
www.bluepages.anu.edu.au	Information on treatments for depression based on the latest scientific evidence
www.depnet.com.au	Help for people and their families to understand depression and its treatment
www.parentlink.act.gov.au	Other parenting guides

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