What is depression?
It is normal for everyone to feel sad from time to time. Sadness is an understandable emotion, because life is stressful and things happen that make us sad. Most of the time, we find a way to cope and/or accept our situation, and then we move on from our sadness.

Depression is different from normal sadness however. Depression is when stresses and/or feelings of sadness become overwhelming and do not go away on their own. It’s a sadness so severe that it interferes with daily activities, preventing a child or youth from living their best life.

Brain imaging studies even show physical changes in people’s brain chemistry when they are depressed. Depression is a physical condition, and not “in your head.” This explains why people who are depressed can’t “snap out of it” — if they could, they would have.

Symptoms of depression (also called clinical depression, or major depressive disorder) include:
• feeling sad, worried, irritable or angry
• lacking enjoyment in life or having trouble enjoying anything
• feeling hopeless and worthless
• having troubles coping with everyday activities at home, school, or work
• having difficulty with sleep, energy, appetite and concentration
• hearing voices or having thoughts of harming themselves or others

By definition, clinical depression is when these symptoms last for at least two weeks.

How common is depression?
Depression is common. It is estimated that 5-8% of adolescents have depression. Most adults who have depression report that their depression started when they were in childhood. This is why it is so important to support and treat young people with depression before they become adults.

What causes depression?
To understand what causes depression, it is important first understand what we need for mental wellness. For mental wellness, people need the following:
• basic needs, such as food, shelter, clothing, medical care, etc.
- sense of belonging, e.g. feeling connected with family, friends and community — the deepest sense of belonging, which is feeling loved no matter what, usually comes mainly from family
- sense of purpose, e.g. having things which keep us occupied, whether it is school, work, family responsibilities, or other activities
- sense of meaning, e.g. believing that your life is about something such as helping others, helping the planet, making the world more beautiful through art, etc.
- hope, e.g. knowing that there is hope for the future, that even things are bad now, that they will get better in the future

Unfortunately, modern society tends to disconnect us from that which we need for mental wellness, in many ways.

**Stresses and ways of disconnection include:**
- Going through neglect, abuse or trauma as a child. When people have minor stresses in life, they usually have the strength to get over those stresses and move on. With trauma, the stress is so severe (e.g. experiencing abuse, neglect, violence, etc.), that people do not simply get over it on their own, and may require additional supports from others including professional and community.
- conflicts, tension or stress in the relationship with parents or family members
- having parents who are overwhelmed due to mental health, medical or other issues, which in some cases, has been passed from generation to generation
- being overly connected to peers (who cannot offer unconditional love) as opposed to healthy adults
- peer conflicts
- bullying
- school stresses such as troubles with learning, poor grades or having pressure to do well
- spending too much on technology (or other activities), which takes time away from doing the things we need, e.g. getting enough sleep, face-to-face time with others, time in nature, etc.
- cultural factors such as being indigenous and experiencing racism, and lasting effects from colonization

Every person has a “stress bucket” where they store stressful situations. When someone's bucket fills up with more stress than they can handle, the more likely they are to become depressed.

**What should I do if I think my child or youth is depressed?**
- Talk to your child's primary care provider and describe the changes that you've noticed in your child. Your child’s doctor can check to see if there might be medical explanations for your child’s issues, and can suggest possible places to find help for depression.
- Contact your local children’s mental health agency, a mental health professional (such as psychologist, social worker, counselor/therapist), or employee assistance program (EAP).

**Self-help strategies: helping your depressed child or youth**
If you see a health professional, they may start by recommending some of the following strategies.
Connection strategies
We are a social species, and one of our most basic needs is to feel connected and accepted by others. When your child is depressed, they need to feel that you love and accept them no matter what. Although peers and friends are important, they cannot provide unconditional love the way parents and guardians can.

Do's

- Let them know that you notice there is something wrong.  
  "I'm noticing that you seem a bit different these days."
- Express your concern.  
  "I'm worried about you."
- Listen and provide empathy. Listen to your child, without interrupting or jumping to give advice. This may seem like common sense because you seems like common sense, yet parents often struggle with just listening to their children. Empathy is when you accept that your child is feeling a certain way, e.g. feeling sad, and you simply accept it without jumping in to change it or give advice.  
  "I can understand why you must be feeling sad. Thank you for letting me know."
- Offer support. Older youth will have a sense of what they want from you and so you can ask. Younger children may not know. When in doubt, just listen and provide empathy.  
  "How can I support you? Do you need space? Or I can just sit with you quietly and give you a hug?"
- Help your child or youth uncover what might be causing stress, and then work through ways to handle those stresses. When your child is calm, you may be able to ask them about what is stressful. Or if they don't know, you might guess. Classic stresses are school (peers, teachers, schoolwork, bullying); home (siblings, parents).  
  "I have some ideas about handling the stress with _____ that may help. Would you be open to my ideas?"
- Ensure you have regular times where you spend 1:1 time with your child. During those times, it can be doing a fun or relaxing activity, e.g. going for a walk, going for a meal. One on one times are high yield, because it is during these times, that your child may start to open up about the issues or stresses happening.
- Practice self-care. In the event of an emergency on an airplane you need to put your oxygen mask on first so you can help your child. In the same way, it's important to take care of your own personal needs when helping your child with depression. It's also a really important model for your child – seeing your coping tools and how you practice self-care will reinforce any conversation you have with your child about doing the same, and may have an even greater impact. Reach out to your support network of friends, family and coworkers. If you're feeling burned out, contact your primary care provider. Sometimes the best way to help your child is to get help and support for yourself first.
Don'ts

- Don't try to correct or direct without first connecting with your child. In other words, when your child is telling you that they are sad, don't start by giving them advice. Most of the time, they just want you to listen and validate their feelings.

- Don't blame your child. Blaming or making your child or youth feel guilty for the depression won't help. It can make them feel even more overwhelmed or make them less willing to talk with you. With clinical depression, your child can't “snap out” of depression any more than someone could “snap out” of asthma or diabetes.

- Don't blame yourself or others. It is normal for many people to feel guilty or wonder what you should have done differently, and – it's not your fault. Depression happens for a variety of reasons. Save your energy from blame and focus instead on moving forward.

- Don't get into power struggles with your child. Try to give your child or youth a sense of control by giving choices whenever possible. For example, you may insist that they need to see a counselor, but you can give a choice over which day or which counselor they see.

Healthy lifestyle tips

A healthy body supports a healthy mind.

- Help your child get enough sleep. Children aged 3-6 need 10-12 hours, 7-12-year-olds need 10-11 hours and teenagers age 12-18 need at least eight or nine hours. Poor sleep can cause or be a result of depression and low energy. Have a screen curfew. Stop using electronic devices at least 1-2 hours before bedtime.

- Eat healthy meals and snacks, with plenty of whole grains, fruits and vegetables. Try to limit processed foods, especially those high in sugar.

- Ensure your child spends time outside every day, ideally at least one hour. Human brains need both nature and physical activity, and being outside allows us to do both.

- Limit recreational screen time. Studies show that excessive recreational screen time (such as video games, social media, cellphones) is linked to depression. If your child is having depression, try to limit your child’s screen time, to a maximum of 1-2 hours a day. Excessive screen time takes time away from healthier activities, such as sleep, face-to-face human contact, nature time and physical activity.

- Keep your child away from illegally consuming alcohol and recreational drugs, such as cannabis.

- Spend regular time outside with your child. Studies show nature has antidepressant effects. During those times with your child, listen, validate and empathize with your child’s feelings, worries and concerns.

Work with the school

Consider communicating with the school. Ask them if they have any concerns about your child. Let them know what you are seeing, and ask what they think. If your child
HELPING YOUR CHILD OR YOUTH WITH DEPRESSION

does not yet have a diagnosis, you can just explain that your child appears to be struggling with ___.

If you have an actual diagnosis, you can ask the health-care provider to write a letter or speak with the school. If you don’t feel comfortable telling them your child or youth is depressed, you could simply let them know that your child is going through a stressful time. Ask the school if they can meet with you. You can ask them about ways they can support your child, which includes accommodations and modifications for students with depression. For example, the school can focus on having a few key people to check in regularly on your child, along with ensuring they have a plan for times when your child might be overwhelmed at school.

**Work with the community**
It takes a village. Many times, there may be extended family members, community members and elders (especially in the case of indigenous children/youth) that may be helpful in supporting a child. Connection to cultural, community events and traditional cultural healing practices may be helpful.

**Self-care**
Last but not least, practice self-care. In the event of an emergency on an airplane you need to put your oxygen mask on first before helping another person. Reach out to your support network of friends, family and coworkers. If you’re feeling burned out, contact your primary care provider. Sometimes the best way to help your child is to get help and support for your own mental health needs first.

**What types of treatment are available for depression?**

1. **Talk therapy (aka psychotherapy or counseling/therapy)** involves talking with a professional to find ways to cope with the depression.

There are different types of talk therapies:

- **Cognitive behaviour therapy (CBT)** helps children and youth replace the negative, depressive thoughts and behaviours that contribute to depression with more helpful thoughts and behaviours.

- **Solution-focused therapy** focuses on strengths. It helps children and youth to think about their ideal future, and what they can do to get there.

- **Interpersonal psychotherapy (IPT)** helps depression by resolving tension and conflict in relationships that can contribute to depression.

- **Dialectical behaviour therapy (DBT)** teaches specific skills such as mindfulness, tolerating difficult emotions and coping with stresses and social situations.

- **Family therapy** can be particularly helpful if there are relationship troubles between the young person and other family members.

**Pros:** unlike medications, there are no physical side effects. “Skills not pills” is the concept that learning skills to deal with depression is more important than simply taking pills.

**Cons:** not everyone is able to talk about their problems, especially if they have more severe depression.
2. “Non-talking” or “less talking” treatments
Talking therapies do not work for everyone. Other treatments include art therapy; music therapy; animal-assisted therapy such as equine-assisted (i.e. therapeutic horse back riding).

**Pros:** Can be helpful for people who didn’t respond to standard counseling/therapy.  
**Cons:** Less evidence for many non-talking strategies — do your research and ask a health provider about non-talking strategies for your specific situation.

3. Medications (antidepressants)
When non-medication strategies (such as talk therapy and lifestyle strategies) have not been successful, medications can be helpful. Medications can adjust a person’s brain chemicals to improve their mood, and make it easier to participate in talk therapy. Like prescription eyeglasses, medications must be chosen and adjusted for each individual. Medications can be very helpful in some cases, and usually are used in addition to talking or other non-medication therapies.

**Pros:** can be helpful for more severe cases of depression when other treatments haven’t worked.

**Cons:** medications can have physical side effects. The good news is that there are things that can be done to minimize side effects.

**Are antidepressants safe?**
There have been concerns about the safety of antidepressants for children and youth. Research shows that, when prescribed appropriately by a doctor and monitored, antidepressants are safe and effective. If a treatment isn’t working (after giving it a good try, of course), the health-care professional may talk with you and your child or youth about trying something else.

**Preventing depression**
Life is stressful, and depression cannot always be prevented. However, you can help reduce the risk of depression and help your child be resilient by:

- ensuring that their basic needs are met, such as food, shelter, clothing and medical care
- ensuring that your child has a feeling of belonging, and that they loved no matter what — they they are loved for who they are, and not for their marks, or accomplishments, or achievements
- ensuring that your child has a sense of purpose, meaning and hope, e.g. ensuring your child’s life has meaningful, purposeful activities to keep them occupied and contributing

**Need more information?**
Cheo.on.ca is the best place to find information on CHEO’s programs and services and learn about a variety of health topics for children and youth. Visit our online resource section to access CHEO-recommended websites, books, apps, videos and more!