Depression in young people

What is the issue?

Everyone feels sad and down from time to time. It is normal to be affected by difficult situations, such as a relationship break-up, losing someone you care about or things going wrong at school or work. However, feeling sad or down doesn’t automatically mean a person has depression, which is more extreme. It is not just a matter of someone needing to "snap out of it" or "pull themselves together". Depression is the most common mental health problem affecting children and young people in Australia. At any time, between two and five percent of young people are experiencing the sort of depression severe enough to require treatment. Around one in five will have experienced depression by the time they reach adulthood. It is more frequently reported by females than males, but boys often find it harder to talk about their feelings. Very few young people seek help, often due to their lack of understanding depression or being worried about what their friends and family might think. Ongoing depression can have a long-term impact on a young person’s ability to focus at school or work, maintain positive relationships or develop a healthy identity. Depression is often associated with a number of other conditions, including physical health problems, intellectual disability, learning disorders, anxiety, substance abuse, self-harm, psychosis and trauma.

What causes depression?

Like other kinds of mental illness there is a genetic component to depression, but this explains only 30-40 per cent of the risk of developing it. People often think that someone becomes depressed as a result of a stressful event. However, research shows that there is no single reason to account for the development of depression, as two people exposed to exactly the same event could cope with it in different ways. Depression is most commonly explained by the combination of a range of factors, which may include:

- Being in debt;
- Poor self-esteem;
- Anxiety as a child;
- Use of alcohol or drugs;
- A sense of disconnection from others;
- Family arguments, separation or divorce;
- Insufficient skills to start and maintain friendships;
- Few opportunities to develop skills in problem solving and realistic thinking; and
- Being exposed to emotional, sexual and/or physical abuse, including teasing, bullying and racism.

What are the signs of depression?

Depression includes a low or irritable mood, and/or a loss of enjoyment or pleasure, along with a range of other emotional, behavioural and physical symptoms. These vary for each person and may change over time. (In some cases, the symptoms of depression can be created by physical illness, such as an underactive thyroid gland. It is therefore important to have any physical causes investigated by a doctor to help clarify a diagnosis). When a person experiences this range of symptoms, it is referred to as a depressive episode. Signs of a depressive episode can include:

- Unusually sad or irritable mood that doesn't go away;
- Withdrawal from friends, family and from previously enjoyed activities;
- Difficulty concentrating or remembering things;
- Deterioration in school or work performance;
- Lack of energy, enthusiasm or motivation;
- Feeling slowed down;
- Restlessness or agitation;
- Changes in eating or sleeping patterns;
- Feelings of guilt or worthlessness; and
- Thinking of death or suicide.

To complete a questionnaire that gives a clearer indication of whether a young person is experiencing depression, access the following webpage: Depression-checklist (https://www.beyondblue.org.au/the-facts/anxiety-and-depression-checklist-k10)

There is some evidence young women are more likely to be sad and withdrawn when they are depressed, while depressed young men tend to act out in antisocial ways such as stealing or being aggressive. If young people have persistent thoughts about hurting themselves or wanting to die, they need urgent professional help from a family doctor or the nearest hospital. While not all suicidal people are depressed, depression is a significant risk factor for suicidal thinking and attempts, especially when combined with substance misuse.

What are the types of depression?

Different types of depression have slightly different types of symptoms, and may require different treatments. The main types of depression are...
Throughout treatment, it is important for the young person with depression to be actively involved in their recovery. Sometimes they may need to:

- use of antidepressants amongst young people, there is agreement on the following:
  - Medication may be used as part of the treatment of depression. While medical professionals have differed in their recommendations regarding the use of antidepressants amongst young people, there is agreement on the following:
    - Major depression - This is the depressive illness most people are familiar with. It tends to happen in episodes, in which a number of the symptoms listed above need have been present for at least two weeks for a diagnosis of a major depressive episode to be considered. When someone has experienced a number of episodes, they are described as having a major depression. An estimated three percent of young people experience major depression.
    - Dysthymia - Dysthymia might be considered a milder version of a major depressive episode but if often lasts for much longer, sometimes for months. It has fewer physical symptoms than major depression, but is often made up of more emotional symptoms such as dark or gloomy thoughts.
    - Psychotic depression - Psychotic symptoms can develop in very extreme cases of depression, in which a person's thoughts are characterised by profound despair, guilt and self-loathing that may represent a delusion (strongly-held false beliefs). They may also demonstrate agitation, hallucinations and severe social withdrawal. Bipolar disorder - Someone with bipolar disorder will have symptoms of depression and mania at different times (which is why it used to be known as manic depression). A manic episode is a period of elevated mood out of character for a person, and may include symptoms such as rapid speech, reduced need for sleep and excessive behaviours including gambling, promiscuity and shopping. Less than one percent of young people experience bipolar, which has its onset in adolescence.
    - Postnatal depression - This is the name given to the depression experienced by an estimated 16 percent of women following their birth of their baby. The risk of developing post-natal depression is higher if a women has previously experienced an episode/s of depression. In addition to the possible stresses of pregnancy, birth and caring for a baby, hormonal changes following childbirth may also contribute to the onset of postnatal depression.

Early Recognition

It is sometimes difficult to identify which type of depressive disorder a young person is experiencing as it can take time to develop an understanding of the pattern of their symptoms. However, this should not negate their need for support as early as possible. Sometimes a young person's distress might be minimised as a "phase" they are going through, or falsely attributed to the hormonal changes of puberty, when in fact they may be showing the warning signs of the serious illness of depression which is not a normal part of growing up. The impact of depression can be very traumatic for the young person and can disrupt their life at a critical developmental stage. The longer it takes to receive effective treatment, the longer it may take for the symptoms to go away. Delayed help also increases the risk of further episodes. It is therefore important to get help as soon as possible.

Treatment of Depression

In recent years, research has led to the development of improved treatment for conditions including depression. Selection of the right treatment options for each person will be determined by an assessment undertaken by a health professional. Having someone to talk to is an important part of treatment. Getting accurate information about what depression is and how to recover from it is also an important first step of recovery.

Ultimately, determining the best treatment will depend on factors such as personal preference, how severe the symptoms are, how long they have been present for and the apparent cause. A person with depression can be treated at home, with regular appointments with the treating professional or team. In severe situations, some services can be arranged through home visits. If hospitalisation is required, this is usually only for a brief period. Living in their normal environment rather than going to hospital minimises distress and disruption for the young person and their family. Hospitalisation is generally only considered when the symptoms place the young person or others at a level of risk that cannot be managed by them remaining in the community. Psychological and family therapies have been identified as the most effective treatments for children and young people with depression. Two psychological therapies found to be especially helpful in treating young people are cognitive-behaviour therapy (CBT) and interpersonal therapy (IPT). CBT helps a person identify unhelpful thinking patterns and behaviours, and learn strategies on how to change these. IPT helps a person learn strategies for how to better manage the relationship between their mood and the people around them.

In addition, it is important for a young person to learn additional strategies to cope with stress, address any sleeping problems and learn to recognise warning signs of any future episodes. Because of the potential impact of depression on their functioning, treatment may also assist the young person with practical tasks such as finding accommodation or obtaining financial help.

Medication as Part of Treatment

Medication may be used as part of the treatment of depression. While medical professionals have differed in their recommendations regarding the use of antidepressants amongst young people, there is agreement on the following:

- Antidepressant medication should not be used as the single first-line treatment for children and young people with mild to moderate depression;
- Treatment with antidepressant medication is more effective when combined with psychological therapies; and
- Anyone taking antidepressant medication should always be monitored by their treating doctor, especially in the first two months when the risk of suicidal behaviour may be highest. Ongoing monitoring is also vital so that the type or dose of medication can be reviewed to minimise any side effects that may prevent them from staying on medication to assist in their recovery.

Throughout treatment, it is important for the young person with depression to be actively involved in their recovery. Sometimes they may need to
sort out secondary problems such as catching up on the school they have missed, or re-establishing friendships. They also need to be informed of their rights, and have the opportunity to ask questions if anything is unclear. Depression may occur in episodes, but with accurate information and effective treatment a young person and their support people can learn to recognise the warning signs to interrupt the occurrence and impact of future episodes. It is also important to develop an understanding of possible triggers of future episodes. These may include family problems, financial difficulties, changing living arrangements, changing jobs or losing a job, having other health problems, losing someone close, changing treatment and using alcohol and other drugs. Trying to avoid these triggers can be an important part of a young person’s recovery, as well as learning to manage triggers that can’t be avoided.

Helping a Young Person with Depression

It can be difficult to know when children and young people are feeling depressed because adults may expect them to be moody. Children and young people do not always understand or express their feelings very well. When asked they may deny that anything is wrong. They may also express their feelings through aggressive, hostile or risk taking behaviour. These behaviours only lead to more problems and possibly worsen any feelings of depression. If a young person is severely depressed, they may not be able to participate in usual activities. This doesn't mean they are lazy and is often a sign they need specialist help. However, few young people will seek help on their own. They need support and encouragement from concerned adults and their friends to do something about it.

When children and young people are feeling down, there are a number of things friends and families can do to help them. Most importantly, offer help and encourage them to talk about their feelings, ideally in a private place where you’re not likely to be interrupted. Acceptance and belonging are very important to children and young people even when they may seem to reject or need it. In encouraging them to talk, it is important not to offer advice but instead try to listen in a non-judgmental way. Sometimes talking in this way can be difficult for a child or young person, to the point that they may become angry if asked how they are feeling. If this happens, it's important that you stay calm, be fair, respect their limits, and admit it when you're wrong. Some other things that may be helpful include encouraging them to:

- Talk to someone they trust;
- Ask for help when they need it;
- Spend time with friends and family, even if they sometimes say they don't feel like it;
- Exercise or participate in sports, school activities or hobbies with a focus on positive activities and achievements;
- Eat a healthy diet, including a wide range of fresh fruit and vegetables; and
- Be involved in organisations that provide support for young people and help them develop additional interests and skills.

If a situation seems like it is serious, seek help promptly. Sometimes this may mean breaking a confidence but it may be necessary to save a young person's life. Looking out for someone who is depressed can be stressful in its own right. It is important that friends and family take care of themselves, including seeking support and information, doing things they enjoy and getting enough rest and exercise. Talk to your GP if you need to seek professional support for yourself.

How to Get Help

Talk to your child's general practitioner, teacher, guidance officer, school counsellor or school health nurse. If more specialised assessment or intervention is required, general practitioners, schools or other health professionals can make a referral to a Child and Youth Mental Health Service (CYMHS) if they are under 18 years of age. If they are over 18 years, they will need to be referred to an Adult Mental Health Services. For your local clinic, look under Health in the White Pages telephone directory or call the 13 HEALTH Service on 13 43 25 84. Your general practitioner may refer you to other specialists who work with children and young people such as a private psychiatrist or psychologist. In an emergency contact your local hospital Emergency Department. Occasionally a young person may need to be assessed and treated using the powers of the Mental Health Act.

Services

- Alcohol and Drug Information Service - Free confidential counselling and information service 24 hours a day, 7 days a week. Phone 1800 177 833.
- Association of Relatives and Friends of the Mentally Ill - Support and information for significant other/s of those affected by mental illness. Call their head office on 3254 1881 or see ARAFEMI (http://www.arafmiqld.org/) for local support groups.
- Community Action for the Prevention of Suicide - Not-for-profit association that aims to provide a practical non-clinical support service to coordinate care, attention and support for people at risk of suicide, those who are concerned for someone at risk, and the children of someone at risk. Phone 3870 8359 or see CAPS (http://www.caps.org.au/).
- 13 HEALTH (13 43 25 84). For general health information and referral. Includes the Child Health Line.
- Indigenous Youth Health Service - Provides assistance on all health issues relating to Aboriginal and Torres Strait Islander youth. Phone (07) 3393 0055 during business hours.
- Kids Help Line - Free national telephone counselling for children and young people 24 hours a day, 7 days a week. Phone 1800 55 1800.
- Lifeline - Free counselling and support, available 24 hours a day, 7 days a week. Phone 13 11 14.
- Mental Illness Fellowship of Queensland - Provides services and support for people living with schizophrenia and other serious mental illness, and their families. Call their Brisbane office on 3358 4424 or see Richmond Fellowship Queensland (https://www.rfq.com.au/) for local support groups.
- National Cannabis Information and Helpline - Provides information all issues relating to cannabis. Phone 1800 30 40 50.
- Parentline - Counselling and support for parents, available 8am – 10pm, seven days a week. Phone 1300 30 1300.

Version number: 13
Date published: 25/06/2019
Date generated: 22/11/2019
Queensland Transcultural Mental Health Service - Provides mental health assistance and information to people from culturally diverse backgrounds. Phone (07) 3167 8333 during business hours
SANE Australia - National charity aimed at enhancing mental health through campaigning, education and research. Phone 1800 187 263.

Websites

- COPMI (Children of Parents with a Mental Illness) (http://www.copmi.net.au/) Information and resources for children, young people, families and service providers assisting families affected by parental mental illness.
- Counselling online (http://www.Counsellingonline.org.au) Counselling via text interaction for information and support for those seeking help with their own drug use or use by a friend or family member.
- headspace (http://www.headspace.org.au/) Website for the National Youth Mental Health Foundation, which aims to support Australian young people with mental health and related problems.
- Mood gym (https://moodgym.com.au/) Interactive website that uses cognitive-behaviour therapy to help prevent depression.
- Open doors Youth Service inc. (http://www.opendoors.net.au) Up-to-date information and resources for lesbian, gay, bisexual and transgender young people, including direct email links to workers.
- ReachOut (http://au.reachout.com/) Interactive forum for young people to access support and assistance.
- Suicide Prevention Australia (http://Suicidepreventionaust.org/) Provides information and resources to help young people with suicidal and self-harm behaviours, and the people who care for them.
- Youth beyondblue (https://www.youthbeyondblue.com/home) National, independent, not for profit organisation working to address issues associated with youth depression, anxiety and related substance disorders.

Acknowledgments

This fact sheet was in part based on content from:
The Family Health Kit (NSW Health, 2002); and The youth beyondblue information factsheets (http://www.youthbeyondblue.com/factsheets-and-info)

Disclaimer

Information in this fact sheet is intended as a guide only. Although every effort was made at the time of printing to ensure the accuracy of information, Queensland Health does not accept responsibility for changes in service details. Queensland Health accepts no responsibility for the way in which this fact sheet is used. In addition, quality of service provision is the responsibility of individual service providers.