Understanding Children’s Mental Health Disorders and the Impact on Learning and Functioning
Introduction to Children’s Mental Health

An Overview of Depression
Depression is Common

Estimates of Incidence
1 % Preschoolers
2 % School age
5 % Adolescents

20 % Lifetime prevalence during adolescence (parallels adult life time prevalence)

Birmaher et al., 2002
Risk and Reoccurrence

- Childhood Onset Depression
- Adolescent Depression
- Later Adolescent Depression
- Adult Depression
Depression is...

- a mood disorder
- a sleep and energy disorder
- a thinking disorder
Depression: Signs and Symptoms

- Mood Changes
- Interpersonal Relationships
- Physical Changes
- Cognitive Changes
- School Performance
- Behaviors

MEANING
Mood Symptoms

Sad
Irritable
“mood swings”
Anhedonia
loss of interest
social withdrawal or isolation
boredom
Physical Symptoms

Sleep Difficulty
either with too much or too little sleep

Fatigue

Appetite Change
loss of appetite
increased carbohydrate craving
Cognitive Symptoms

Difficulty concentrating
Increased distractibility and “spaciness”
Decreased attention and focus
Cognitive Symptoms

Worried, ruminating thoughts
Worthlessness, low self-esteem, guilt
Distortions, misperceptions, misinterpretations
Symptoms in Infants and Toddlers

Mood

– Excessive whining
– Too little or too much crying
– Withdrawn from cuddling, being held
– Lack of interest in surroundings
Symptoms in Infants and Toddlers

Physical

– Sleep disturbance
– Sad or flat facial expression
– Little motor activity
– Failure to grow and thrive
Depression Symptoms in Preschoolers

Mood

– Frequent sadness
– Irritability
– Low tolerance for frustration
– Loss of pleasure in previously enjoyable activities
Depression Symptoms in Preschoolers

Physical

– Dulled, flat affect
– Frequent, unexplained stomachaches, headaches, and fatigue
– Overactivity or excessive restlessness
Depression Symptoms in Preschoolers

Cognitive

– Tendency to portray the world as sad or bleak
– Distracted, inattentive
Depression Symptoms in School-Aged Children

Mood
- Tearfulness
- Unprovoked hostility or aggression
- Refusal or reluctance to attend school
- Little interest in playing with others
Depression Symptoms in School-Aged Children

Physical
– Frequent and unexplained physical complaints
– Changes in sleep patterns
Depression Symptoms in School-Aged Children

Thinking

– Drop in grades
– Low self-esteem
– Excessive worrying
– Morbid or passive suicidal thoughts
Depression Symptoms in Adolescents

Mood

- Irritability
- Feelings of sadness or hopelessness
- Boredom and “I don’t’ care”
- “Bad Attitude”
- Social isolation
Depression Symptoms in Adolescents

Physical
– Changes in sleep patterns
– Eating-related problems
– Increased motor restlessness
– Physical slowness
– Fatigue
Depression Symptoms in Adolescents

Thinking

– Drop in school grades and/or conduct
– Low self-esteem
– Extreme sensitivity to rejection or failure
– Morbid or suicidal thoughts or actions
Top 3 Take Home Messages
Understand anhedonia
Thinking is distorted
Communication is inhibited
Understand Anhedonia

May be the most debilitating aspect of depression

May be the most misunderstood and misinterpreted symptoms
the child with the “bad attitude”

Pay attention to your own internal responses of frustration and anger
Thinking is Distorted

The depressed child’s view is changed, different and distorted from your view.

The child is often not aware of being depressed or aware of the changes to his or her thinking.

Don’t assume that the child knows and understands their own depression.
Communication is Inhibited

They lack the words to describe their feelings and internal experiences.

This leads to further feelings of confusion and isolation.

Don’t rely on the depressed child to “tell you” what they feel or need.
Promoting Wellness in Depressed Children

Physical wellness

Social and emotional wellness

Accessing care
Promoting Physical Wellness

– Regular Adequate Sleep
– Healthy Diet and Nutrition
– Regular Aerobic Exercise
– Not abusing chemicals including nicotine and caffeine
Promoting Social and Emotional Wellness

– Relaxation and self-soothing activities
– Healthy support system including adults
– Engaging in fun and recreation
– Personal growth
Accessing Care

- Primary care visits
- Mental health care visits
- Regular Counseling/Therapy
- Medications
The End
For additional information and resources contact:

Minnesota Department of Human Services
Phone: (651) 431-2368
E-mail: dhs.cmhs@state.mn.us
Website:  http://www.dhs.state.mn.us

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References