

Facts and Figures

- ✓ No gender differences occur in children ages six to twelve
- ✓ Among adolescents, twice as many females than males are diagnosed with depression
- ✓ Untreated episodes of depression lasts four months or longer but some symptoms (insufficient to meet the full diagnosis) may persist for months or years
- ✓ Depression often co-occurs with other mental disorders (i.e., anxiety, ADHD, disruptive behaviors, or substance abuse disorders)
- ✓ Early onset of depression predicts more episodes in adulthood
- ✓ Depression onset is occurring earlier in life than in past decades

- ✓ Children and adolescents who are depressed may complain of headaches, stomachaches, muscle aches, and boredom
- ✓ They may engage in reckless behavior and chemical abuse
- ✓ They may have difficulty in relationships and experience social isolation
- ✓ They may frequently miss school or have poor school performance
- ✓ They may talk of or run away from home

- ✓ Culture can influence the experience and communication of symptoms of depression
 - Complaints of nerves and headaches in Latino and Mediterranean cultures
 - Complaints of weakness or imbalance in Chinese and Asian cultures
 - Problems of the heart in Middle Eastern cultures
 - Being “heart-broken” among the Hopi

- ✓ Children and adolescents are screened for depression using the Children’s Depression Inventory or the Beck Depression Inventory
- ✓ Diagnostic evaluation includes interviews with the child or adolescent, parents, and other informants when possible

- ✓ Treatment includes cognitive behavioral therapy, interpersonal therapy, and antidepressant medications (SSRI’s)
- ✓ Antidepressant medications (SSRI’s) combined with therapy has been shown to be effective treatment