

## DEPRESSION AND SUICIDE

Bradley Hospital's main concern is for the emotional well-being of children and their families.

If you feel overwhelmed by a problem, call us anytime: 401-432-1364.

### THERE IS HOPE

Severe depression can be cured. While it is one of the most debilitating illnesses, it is also one of the most treatable. Please seek help if you suspect a problem. Remember that two of the best ways to reduce the risk of suicide are to build healthy family relationships and have open communication.

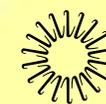
If you are concerned or worried that suicide is a possibility, call a mental health professional for an assessment. Bradley Hospital is especially well qualified, with experts in children's mental and emotional health. **Call anytime: 401- 432-1364.**



**Bradley Hospital**  
*A Lifespan Partner*

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**Bradley Hospital**  
*A Lifespan Partner*

*Healing the Hearts and Minds  
of Children and their Families*

## WHAT COULD A CHILD OR TEENAGER BE DEPRESSED ABOUT?

It may be difficult for adults to understand that a child or teen could suffer from serious depression. Children's problems may seem manageable compared to the challenges adults face.

Like adults, children experience sadness, grief, disappointment and loneliness. Because of their immaturity and inexperience, children aren't able to see how things can work out. They can't see any options, and despair can set in.

Mental health professionals identify multiple causes of depression. It can be triggered by an experience such as a loss of a relative or friend, by intense family conflict or it might run in the family like other medical conditions. Most experts believe that a family history of depression makes some people more vulnerable than others.

## SIGNS OF CHILDHOOD DEPRESSION

Sometimes the signs of depression are obvious—a child may talk about his feelings and show his depression overtly. At other times, the signs are subtle. A child may be very lonely and sad but may compensate by being especially outgoing or cooperative with others. Excessive anger and irritability can also be signs of depression.

Our best advice is to be observant of your children and to pay attention to changes that persist or seem unnatural.

**Common signs of depression include:**

Behavioral Changes

- Isolation
- Loss of interest in friends
- Loss of interest in activities the child has enjoyed
- Irritability
- Frequent thoughts of death
- Expressions of hopelessness
- Suicidal thoughts
- Alcohol or drug use
- Anger or irritability
- Change in functioning or personality

Physiological Changes

- Disrupted sleep patterns
- Serious loss of or increase in appetite
- Constant fatigue
- Inability to concentrate

These can also be symptoms of substance abuse; depression can be accompanied by alcohol or drug use.

The symptoms can appear gradually or over just a few days. They can be triggered by an event, such as a break-up with a boyfriend, the death of a pet or an embarrassing experience at school and sometimes have no trigger at all.

## HOW PARENTS CAN HELP

Parents sometimes unintentionally add to a child's depression. However, blaming yourself is not productive. Even parents who pay close attention to their children's behavior can miss signs of vulnerability, and professionals have difficulty at times.

**Following these steps, on an ongoing basis, can help:**

- Talk to your children and try to understand their feelings.
- Listen when they want to talk, and take them seriously.
- Show love and concern openly so there is little chance that your feelings will be mistaken.
- Trust your instinct. If you sense something is wrong, ask your child directly about your suspicion.
- Build your child's self-esteem with complimentary words and actions as positive reinforcement.
- Do not dismiss disruptive behavior as attention-seeking. Check out the underlying cause.
- Do not discount your child's negative feelings. Saying "you shouldn't feel that way" rarely helps.
- Do not let fear make you silent. Talk to your child.
- If your child states "I wish I were dead" take it seriously.

## DEPRESSION CAN LEAD TO SUICIDAL BEHAVIOR

Approximately 5,000 to 6,000 adolescents in the United States commit suicide annually. That number has tripled since the 1950s. Nationally, and in Rhode Island, suicide

is now the third leading cause of death in youth ages 15 to 24. According to the Rhode Island Department of Health, from 2005 to 2010, 77 young people ages 13 to 24 died by suicide in Rhode Island.

We know these figures are not merely a result of better reporting. There are more pressures in our society. Drug and alcohol abuse exacerbate the problem, and the means to commit suicide are more readily available.

Those most likely to commit suicide are people who have threatened it or attempted it in the past and have a serious emotional disturbance. It is shocking that 60 percent of teenagers think about suicide and as many as 8 to 10 percent actually attempt it.

## COMMON MISCONCEPTIONS ABOUT PEOPLE WHO ATTEMPT SUICIDE

Contrary to common perception, children as young as elementary school age increasingly attempt suicide. The probability that they will complete it, however, increases with age.

Younger children don't usually understand that death is not reversible. They sometimes carry out actions that they hear adults describe as deadly. For example, they run into traffic because they are aware that "you can get killed crossing in front of moving cars."

Both girls and boys are vulnerable to suicide. However, boys are more likely to use violent means, such as shooting themselves, while girls are more likely to take pills. Overall, approximately 80 percent of all suicides are boys.

No socioeconomic status is immune, and children and teens with all types of personalities and temperaments can be victims. A child doesn't have to be a stoic type or be depressed to contemplate suicide. Children with physical or intellectual disability are also capable of suicide.

## SEEK HELP

Children and teenagers go through many difficult periods as they develop. Emotions such as sadness, loneliness, self-contempt and disillusionment are natural, to a certain extent, at the various developmental stages. Because suicide is final, our advice is to err on the side of overreacting if you fear a problem.