

## Depression Psychoeducation for Caregivers

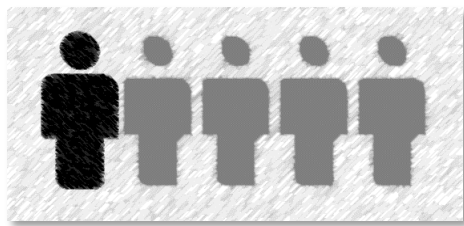
It is not unusual to feel sad from time to time. Sometimes we feel down because of something that we experience – a disappointment, a break-up, a disagreement with a friend or a family member. Sometimes we feel sad, and we don't even know why. Sometimes it can be hard to tell the difference between general feelings of sadness and depression. Clinical depression can be caused by a variety of reasons like chemical imbalances, stress, traumatic events, relationship problems, physical illness, grief/loss, or lack of sleep. If a person doesn't receive help for their depression, it can impact how they do at school, work, their physical health, in relationships, and create concerns of suicidal thoughts. Depression looks different across ages and across cultures.



### CLINICAL DEPRESSION DIFFERS FROM TYPICAL SADNESS/GRIEF IN THE FOLLOWING WAYS:

1. **SEVERITY** – mood impacts multiple areas (physical, psychological, behavioral)
2. **DURATION** – feelings of hopelessness, sadness, or low-mood have persisted for over 2 weeks
3. **INTERFERING WITH THE PERSON'S STUDIES, ACTIVITIES, AND FAMILY/SOCIAL RELATIONSHIPS.**

Physical	Psychological	Behavioral
<ul style="list-style-type: none"> <li>•Low energy or fatigue</li> <li>•Sleeping too much or not enough</li> <li>•Poor appetite or overeating</li> <li>•Slowed speech, decreased movement</li> <li>•Engaging in moves that serve no purpose (tapping feet, rapid talking, pacing)</li> <li>•Complaints of pain in body (muscle weakness, sore, stomach pain, etc.)</li> </ul>	<ul style="list-style-type: none"> <li>•Decreased concentration and memory</li> <li>•Attention problems</li> <li>•Anger</li> <li>•Confusion</li> <li>•Feeling loss of control</li> <li>•Negative view of self, world, and future</li> <li>•Sleep disturbance</li> <li>•Suicidal thoughts</li> </ul>	<ul style="list-style-type: none"> <li>•Sad mood</li> <li>•Social withdrawal</li> <li>•Does not participate in usual activities</li> <li>•Shows limited effort or motivation</li> <li>•Decreased work or school performance</li> <li>•Crying for no apparent reason</li> <li>•Talking about death or dying</li> <li>•Irritable</li> <li>•Weight changes</li> <li>•Hopelessness/low-self worth</li> <li>•Self Harm</li> <li>•Engaging in risky behaviors</li> </ul>



1 in 5 youth experience depression

## How we can support youth:

1. **Give reassurance and listen non-judgmentally**
  - Depression is not a choice; depressed youth are not choosing to underperform or withdraw. They want to be successful and often

are seeking guidance and support but lack the ability to articulate their needs.

2. **Help kids access healthy lifestyle habits/activity scheduling**

- Developing healthy habits have been shown to impact mood and decrease symptoms of depression. Getting enough sleep, making healthy eating choices, limiting social media use, and promoting exercise all make a big difference in our mental health and taking care of ourselves. Assist withdrawn youth in reengaging with pleasurable activities.

3. **Promote support networks and positive relationships**

- Help your child connect with positive peer and adult relationships. Relationships are a great support for kids who are needing connection and belonging as well as an outlet they can utilize to talk about their emotions and experiences.

4. **Work through negative thoughts and problem solve**

- It is not unusual for depressed people to have unhelpful or stuck thoughts. We can support youth to work through thoughts like *things are hopeless* and *nothing will get better*. Focus on one problem at a time. Help them define the problem, brainstorm solutions, think of options, and implement a plan. This can help kids move from hopelessness to action and have control over the scenario.

**Additional supports shown to be effective:** Cognitive Behavioral Therapy, Wraparound Support, Mindfulness  
**Resource for activities, practice, and tools for depression management:** <https://www.crisistextline.org/resources/>