

Co-parenting for Domestic Violence
Class Thirty-four.
Watching for Depression in Yourself and Your Child.

by Yvonne Sinclair M.A., LMFT

If you notice your child has been feeling sad most of the day and can't seem to shake that down feeling, perhaps they are experiencing an episode of depression. In most cases depression is a treatable condition.

Depression can happen to anyone. It can be caused by a traumatic event, a change in body chemistry, or a sense of deep loss. In some cases, an inherited family pattern can spark the depression. This is called a predisposition for depression. Depression is usually caused by a traumatic event. Each person has his/her own reality, so another person cannot determine if a specific event was traumatic for another. Depression can start or be aggravated by things that happen around you or by your own feelings about events. Feelings of rejection, loneliness and the way you relate to others can trigger depression. With so much happening in the parent's life, and so many changes, it is not surprising that a child may slip into a depressed state.

Parents separating may seem like the end of the world to a child. Not all children are stress and anxious about their parents separating, but most have problems with the change on some level. Depression in adolescents and children can present in a different way than in adults. Below you will find the check list clinicians use for depression. Talk with your child if you sense there is sadness that drags on. Some of the symptoms you will notice more than they, and some of the symptoms may not have been shared with you.

During the time parents are separating the child may not want to upset parents with their own issues. The child may not want to worry you, feeling you have enough stress. They may also feel if they are to blame for the separation, their problems need to be kept secret now. The child may feel if they are not perfect one or both of the parents will reject them as they rejected each other. Talk to your child about their feelings and talk to someone about your own.

Determining Major Depressive Disorder in Youth.

Major Depressive Disorder is diagnosed by examining what is happening emotionally and physically. Symptoms that indicate depression include the following;

- *trouble sleeping and/or change in eating patterns.
- *loss of ability to concentrate well, and they may have trouble making a decision.
- *grades may go down.
- *problems with authority that is new.
- *feeling helpless and/or hopeless.
- *feeling worthless, they may not talk openly and/or say things that indicate they are feeling bad about themselves.
- * loss of interest in the usual things they like to do, and/or loss of energy,
- *in adults, depression may cause a decrease in libido.
- *sad most of the day, the child may have little or no expression.
- *cry more easily than usual, feeling guilty.

- *feeling guilty about things that are not their fault.
- *the child may stay away from family and/or friends with a tendency to isolate.
- *social withdrawal or feeling the need to isolate from the world.
- * irritable feelings, and in children this irritability can be constant. Irritability, alone, can be an indicator of depression in children.
- *restless feelings or need for perfectionism.
- *use of drug or alcohol in an attempt to lift mood.
- *suicidal thoughts, actions, or plans such as “I wish I wasn’t born or I wish I wasn’t here.”

If you, or your child, have five of these symptoms your diagnosis will be Major Depressive Disorder. The more yes answers on this check-list, the deeper the depression. Notice the diagnosis is “disorder.” This is not a mental illness. It is a disorder, just like a physical flu, this disorder can usually go away.

These symptoms can also be normal response to daily stresses. If it is Depression these symptoms are consistent, day after day, in whatever setting. For instance if the child is isolating and irritable at home and active and happy at school, something else is not working for them.

When young people are going through a stressful time, perhaps feeling left out, or angry with the situation, they may turn to suicide to strike back at people for real or imagined injustices. Or they may believe it is a way to escape the uncomfortable situation. If you suspect your child, especially an adolescent, is depressed, be proactive about getting professional care for the child and yourself.

Counseling is definitely something to consider through a separation of parents. It gives the child a neutral party to talk about upsetting issues and the counselor can monitor the child’s level of depression. Counseling for yourself around a child’s depression will assure you have access to any tools needed to assist your child in recovering.

Exploring remedies.

Major Depressive Disorder usually involves a change in the chemistry in your brain. Sometimes it takes a chemical to change the brain chemistry back to “normal.” This is where medication can be an option. Just because one anti-depressant worked wonders for someone you know does not mean you will react to that same medication in the same manner. Each person reacts differently to a medication. Benefits and side effects are personal.

Putting a child on medication is a big decision and will take cooperation of both parents. Communicate with each other and be open to what the child needs. Consult with the child’s physician and a professional counselor. Suicide sometimes occurs just when despair has lifted, because the person/child then has the energy and concentration to act on their plan. 24 hour watch is needed until the child is well out of harm’s way.

Depression is indicated in low serotonin so a naturopathic doctor will examine for other low serotonin conditions you may be experiencing. If you want to stay away from the chemical of medication, this is an alternative.

The natural things that will lift depression before it slips to the level of “severe,” include: aerobic

activity, sunlight in your eyes, and complex carbohydrates. Whole grains are believed to help lift depression. Popcorn, whole wheat, and oatmeal are all great ways to get our whole grains. Be careful when it comes to alcohol. It is a depressant and will consequently exacerbate the depression. The information below can be used by yourself or taught to your child.

Life style changes to lift depressive symptoms.

If you're like most people who struggle with depression, believing or doing most of the things listed here is going to feel a little unnatural, uncomfortable, or even impossible. But if you can manage to make this commitment for yourself and believe things can change for the better, your efforts will be well worth the work.

Counseling can also help identify and inherently remedy the underlying issues that may be the cause of your depression. Counseling can also help you change the way you look at events or the way you communicate your needs. It can also offer ways to empower you to be happy.

Self talk

Depression is similar to an emotional flu. When you go to the Medical Doctor and tell him/her you have symptoms such as fever, nausea, etc, the doctor may say, "You have the flu. Get lots of rest and drink lots of fluids." Do you go home and say to yourself, "Self, this is so stupid. I should just get over this fever and throwing up?" No, you do not. You take care of yourself and are proactive helping your body heal. Depression is a form of emotional flu. Saying to yourself, "Self, this is so stupid. Why can I not just get over feeling drained and irritable?" does not apply here as it did not apply for physical flu. Has nothing to do with personal weakness.

Scientists have determined that changes in nerve pathways and brain chemicals called neurotransmitters can affect your moods and thoughts. These changes in brain chemistry may show up as symptoms of depression. If you talk to any two depressed people about their experiences, you may think they were describing entirely different realities. One might not have the ability to maintain their usual energy level while the other might feel tired and unable to motivate themselves. It may feel like you are up to your neck in mud. Everything is a huge effort. One person may feel sad and break into tears easily. One might pick at food without any appetite, and another might want to eat constantly. Depression symptoms are not universal; each person will experience depression in his/her personal way.

While sadness touches all of our lives at different times, the illness of depression can have enormous depth and staying power. If you have ever experienced depression or been close to someone who has, you know that this disorder cannot be changed at will. It cannot be wished or joked away either.

Sometimes the sad slowly becomes deeper before we know it we are in a depressive state. Every small change that you make has positive effects on your physical and mental health.

Children and Suicide.

The family may be the key element in preventing suicide. Open effective communication, love and acceptance, are the best preventative methods. There are many warning signs to notice. If you are not sure what you are noticing is a serious problem, consult a counselor or therapist. You

can call a suicide hotline for information, referrals, and support.

Suicidal thoughts may be voiced with the following statements;

“I wish I had never been born, I can’t take it anymore, people would be better off without me, this had got to stop, I wish I was not here.”

Do not dismiss this kind of talk. Even if you feel it is manipulative and not serious, you need to take it seriously. 75% of all suicide victims have mentioned suicide beforehand. Most suicides are planned and are not on impulse.

Other warning signs;

*talk about death or afterlife.

*talk of suicide or harming themselves.

*anxiety and tension.

*chronic pain, anxiety, and/or insomnia.

*difficulty in talking with parents. (and please don’t play each other saying “they talk to me” be realistic-it could mean your child’s life.)

*frequent, or any use, of alcohol and/or drugs.

*giving away valued possessions.

*sudden and unexplained joy or whirlwind activity after a sad and gloomy time.

*sudden changes in behavior-moodiness, poor appetite, sleep problems, isolating, lack of interest in grooming, school, or opposite sex, and missing school.

What to do.

Communication is always great here. Ask some low-key questions, such as, “you don’t seem like yourself lately, you seem like you feel down today, is something bothering you?” When the child begins to talk – listen. Remember the reflective listening in chapter one and utilize it. Keep the communication open with responses like, “tell me more, and then what, anything else?”

Don’t shy away from asking , “are you feeling depressed?” If you suspect the child is suicidal, or they are making obvious statements in that direction – ask, “are you feeling like hurting yourself?” or “Are you feeling suicidal?”

Resources;

California Youth Crises Line 800-843-5200

National Hotline 800-386-3077

National Institute of Mental Health <http://www.nimh.nih.gov>

American Academy of Child and Adolescent Psychiatry <http://www.aacap.org>

American Psychiatric Association <http://www.psych.org>

NAMI <http://www.nami.org>

National Mental Health Association <http://www.nmha.org>

Find the suicide support phone lines and agencies in your area.

Counseling can be found by calling your insurance for referral to a clinician in your area. Good Therapy.org has search options for finding therapists in any area.

Whether your child or you are experiencing depression, find help and relief. Be proactive about being healthy and happy. Counseling, also known as “talk therapy,” can be most helpful for a depressed person. It is important to have someone supportive and neutral to talk to when working through a difficult time in life. Young people in particular may benefit from group , therapy

where they have an opportunity to share their feelings and thoughts with other adolescents in the same situation.

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