



Depression Basics

In this guide you'll learn the signs and symptoms of depression, how it's diagnosed and how it's treated.

What Is Depression?

Kids with depression have chronic feelings of sadness or worthlessness. A child with depression will experience a sad mood for weeks or months, and often loses interest in things she enjoys. Her mood may or may not be evident to others. The most common kind of depression is called major depressive disorder, which is a more severe presentation of symptoms that tends to last at least two weeks and may last several months. Persistent depressive disorder, also known as dysthymia, is another form of depression that has milder symptoms but may last for years.

What to Look For

- Unusual sadness, persisting even when circumstances change
- Reduced interest in activities she once enjoyed; reduced feelings of anticipation
- Involuntary changes in weight
- Shifts in sleep patterns
- Sluggishness
- Harsh self-assessment (“I’m ugly. I’m no good. I’ll never make friends.”)
- Thoughts of or attempts at suicide

A child with depression will stay in a dark mood for weeks or months, and often loses interest in things she enjoys.

Diagnosis

In diagnosing depression, a professional will depend upon observations of a child or adolescent by family members and other adults involved in her care, as well as her own descriptions of her life. Descriptions of both major depressive disorder and persistent depressive disorder follow.

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Major depressive disorder

For a diagnosis of major depressive disorder, a young person will be in a depressed or irritable mood most of the time, or lose interest or pleasure in daily activities most of the time, or both, for at least 2 weeks. These symptoms must be a distinct shift from previous functioning. In addition, she will show a variety of the following signs:

- Marked weight loss or gain
- Sleeping too much or too little
- Restlessness or lethargy
- Fatigue
- Feelings of worthlessness or excessive or inappropriate guilt
- Cloudy or indecisive thinking
- A preoccupation with death, plans of suicide or an actual suicide attempt

A clinician will also need to rule out other causes for these symptoms, including substance abuse, medical conditions like diabetes and hypothyroidism and other psychiatric disorders. The condition must significantly interfere with her day-to-day activities.

Persistent depressive disorder

For a child to be diagnosed with persistent depressive disorder, she must exhibit a depressed mood or irritability most of the day for at least one year; for adults eighteen and older this changes to two years. In addition, she must have at least two of the following symptoms, to the point where they cause her distress or interfere with her ability to function well at home, in school or in other areas of daily life:

- Poor appetite or overeating
- Trouble sleeping, persistent tiredness or lack of energy
- Low self-esteem
- Hopelessness
- Trouble concentrating
- Difficulty making decisions

When a person has persistent depressive disorder, the severity of her symptoms may vary, at times including episodes severe enough to meet the criteria for major depressive disorder.

Risk Factors

Genetic and environmental factors can affect the likelihood of a child developing depression. Kids who have a close relative who has depression are more at risk, as are those who have another major disorder. Children may develop depression after a traumatic life event, but the vast majority of kids with depression haven't suffered any trauma.

Additional Resources:

- childmind.org/parents-guide-getting-good-care
- childmind.org/depression

Treatment for Depression

Depression is sometimes treatable with therapy or medication alone, but experts agree that a combination including therapy and medication is usually the best approach.

Childhood and adolescent depression is often treated with cognitive behavioral therapy (CBT), including interpersonal therapy (IPT), behavioral activation and dialectical behavior therapy (DBT). Family therapy is often employed to engage parents and other family members in keeping track of symptoms and managing stress levels in the home.

Medications may include selective serotonin reuptake inhibitors (SSRIs) and serotonin and norepinephrine reuptake inhibitors (SNRIs). Children and young adults should be closely monitored by their health care providers and their families when taking antidepressants, especially when they have just begun taking them or when their dose has recently been changed.



The Child Mind Institute is an independent, national nonprofit dedicated to transforming the lives of children and families struggling with mental health and learning disorders. Our teams work every day to deliver the highest standards of care, advance the science of the developing brain and empower parents, professionals and policymakers to support children when and where they need it most. Together with our supporters, we're helping children reach their full potential in school and in life. We share all of our resources freely and do not accept any funding from the pharmaceutical industry. Learn more at childmind.org.