

What does depression look like?

What's making Danielle so moody?

Danielle has been very touchy lately. She snaps at her brother. She snaps at everyone. Yet when her mother tells her off, she often bursts into tears and complains, "I never do anything right. You're always picking on me!" Then she goes off to her room and sulks. This has been happening more and more. She will mope around for a while and then get cranky again and start picking fights with her brother. Danielle used to swim and play soccer, but she doesn't want to anymore. Now she is having problems at school too. Her mother got a note from her teacher to say that she had an argument in class and left the room. Danielle just says school is boring.

Is Danielle depressed?

It's possible, so further investigation would be important. An ongoing pattern of irritable behaviour can be a sign of depression. Being depressed is not just being sad or unhappy. Depression is a serious disorder. However, getting the right type of help and getting it early can make it much easier to deal with and to support Danielle and her family to get back on track.

A child who is depressed may

- have low energy and be difficult to motivate
- lose interest easily in an activity they usually enjoy
- have difficulty concentrating
- make a lot of negative comments about themselves
- look for what's wrong rather than see the positives in situations
- be very difficult to please
- be irritable, easily annoyed or upset
- seem sad and cry easily and be difficult to soothe
- either have no interest in food or overeat
- have trouble sleeping.

Children affected by depression need to feel supported and understood.

Activity is important to help them feel better, so try to keep up sports and interests they enjoy. This can also help to show them that life is not all gloom and doom.

How parents and carers can help

- Help children open up by showing interest and listening to them talk about school, friends and home.
- If unsure how the child is feeling – ask! If they say, "Don't know," suggest some feelings words and see if any hit the mark with them.
- Help children to get moving by making sure they have engaging activities and are not left with too much time to worry.
- Physical activity is a natural antidepressant. Encourage physical activities, such as walking, running, roller-blading, bike riding, swimming – anything that's physical will help. Don't wait too long for 'down' moods to become 'happy' moods. If the change of mood is very severe or goes on for a few weeks without improving, take action. Make an appointment with a doctor or a mental health professional. Seeking help early for your child is the best thing you can do.

Depression affects children's thinking as well as their mood and their behaviour. They may think they are worthless or that things will never get better. Children who are affected by this kind of negative thinking need help. Professional support from a mental health specialist can help them learn skills to tackle the depression and get back to feeling better about themselves and about their lives.

Are you worried your child is a bit like Danielle?

Here's how to get help

- Talk with your child's classroom teacher about how your child is managing at school and find out what resources the school can offer.
- Ask to speak to the school psychologist or counsellor.
- Talk to your doctor about the possibility of an assessment and referral to a children's mental health specialist.

A mental health professional may diagnose a depressive disorder when

- 1 there is a marked change from the child's previous behaviour or the child's behaviour is not what you would expect at this age or for this child
- 2 the behaviour is seen in more than one situation and the depressed mood colours everything the child does
- 3 the behaviour causes problems at home, school and with friends, and the difficulties seriously interfere with the child's ability to get on or to enjoy themselves.

Sometimes children who are experiencing depressed mood may talk about wanting to die or harm themselves. It is important to take seriously any talk about wanting to die or harm oneself from a child of any age. Such thoughts and talk indicates a high level of distress that requires attention. Consultation with a professional mental health practitioner will be required to support the child and family.

For more, please refer to the KidsMatter Primary information sheets on recognising and getting help for children with mental health difficulties.



This resource is part of a range of KidsMatter Primary information sheets for families and school staff. View them all online at www.kidsmatter.edu.au



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