



# mood problems in children and adolescents

kelty mental health  
resource centre

BC's Information Source  
for Children, Youth & Families

Mood problems affect a person's thoughts, how they feel about themselves and the way they think about things. The most common mood problem is depression, of which there are several types. Even very small children can experience depression, although the way they express the feeling may not be the same as an adult.

Very young children show that they are depressed by the way they behave. They may not be able to tell people how they feel. Instead, they will say they have a stomachache, a headache, or other aches and pains.

In teenagers, a certain amount of moodiness is to be expected. Sometimes, though, teenagers can become seriously depressed.

Children and adolescents who are depressed may seem as though they are not paying attention in class, or that they are ignoring what their parents say. If combined with other behaviours, like feeling sad all the time or crying easily, this is often a symptom of depression.

Other symptoms of depression include irritability and loss of interest in activities the child used to enjoy, like sports or going out with friends. Anxiety is often present, too.

Depressed teens are at high risk for suicide. It is very important that parents, other caregivers, and teachers are aware of the symptoms of depression in children and adolescents. Depression that is not treated can also lead to long-term health problems.

## *Types of Mood Problems*

### **Major Depression:**

Major depression can be a long-lasting and disabling condition that affects most aspects of a person's life. It has distinct emotional, mental, and physical symptoms, like feeling sad, hopeless or guilty for more than two weeks, or having problems sleeping or eating.

### **Dysthymia:**

Dysthymia is a chronic low level depression lasting for at least two years that reduces a person's ability to enjoy life, or feel enthusiastic or ambitious. It often starts in childhood and can continue throughout life.

### **Bipolar Disorder:**

Bipolar disorder is a condition which in adults is characterized by switching between depression and overexcitement (the so-called "manic" phase).

In children, however, the two emotional states (depression and mania) may not alternate. Instead, there may be long periods of depression, with the manic phase not appearing until years later.

In children and teens, the primary symptoms are often irritability and feeling very important and able to do anything (grandiosity).

### *What's normal and what's not?*

There is a difference between feeling sad and being depressed. Sadness tends to be felt over a short period of time and is related to a specific event. It has milder effects on one's day-to-day life.

Grief—sadness that is experienced after the loss of a loved one—is perfectly normal and should be expected after such an event.

Worry and fearfulness are also common and quite normal. Being afraid in threatening situations is a good thing: it heightens awareness, and gives you the motivation and energy to get out of harm's way—the so-called 'fight or flight' response.

However, when feelings of sadness, worry or anxiety don't go away and they interfere with a person's enjoyment of life or their ability to function, this may be a sign of depression. When this happens, it is time to see a doctor or other mental health professional.

It's important to get help for children and teens when:

- they feel sad all the time and cry easily
- they are irritable or have problems sleeping or eating
- they lose interest in activities they used to enjoy

### *What causes mood problems?*

Symptoms of depression in children and adolescents can be related to a number of things. It can be triggered by a sad or painful event like a death in the family. It can develop in children who observe constant fighting between their parents. It can also result from the child experiencing parental neglect or abuse.

However, being prone to more serious kinds of mood problems can run in families. They happen because chemicals in the brain that help regulate mood are not working properly.

Sometimes, when children are under stress early in life, their bodies change in a way that can make them react badly to stress for the rest of their life. As a result, they develop problems with depression and/or anxiety that can be lifelong.

### *How common are they?*

At any one time, depression in any of its forms can be found in about 3.5% of children and teenagers between the ages of 5 and 17, and the rate increases with age.

In the teen years, many more girls report symptoms of depression than do boys. In childhood, there are no such differences between boys and girls.

Depressed teens are at high risk of suicide. Parents, other caregivers, and teachers need to be able to spot early signs of depression in children and adolescents so that treatment can be provided at the earliest stages.

### *How long do they last?*

The length of time a person will have a mood disorder depends on the kind of mood disorder.

Major depression usually lasts six months or more, and dysthymia lasts two or more years. Both can be short-lived or last a lifetime. It all depends on whether or not they are diagnosed and treated early and successfully.

Bipolar disorder is usually a life-long condition.

### *What treatment is effective?*

Treatment of depression in children and adolescents can consist of either behavioural therapy or drug therapy. The first line of treatment is cognitive behavioural therapy (CBT), which helps the child or adolescent change ways of thinking and acting that contribute to a depressed mood.

A newer class of antidepressant drugs called SSRIs (selective serotonin reuptake inhibitors) is now being widely used to treat more severe cases of major depression. These drugs work by allowing the body to make more efficient use of serotonin, a chemical in the brain that can affect mood and behaviour.

Bipolar disorder is treated with a number of different drugs, as well as family and individual therapy.

#### **BACKGROUND INFORMATION**

**Lonely, Sad and Angry** by Barbara Ingersoll & Sam Goldstein, Specialty Press/A.D.D. Warehouse; 2001

**New Hope for Children and Teens with Bipolar Disorder: Your Friendly, Authoritative Guide to the Latest in Traditional and Complementary Solutions** by Boris Birmaher, Three Rivers Press 2004

**The Life of a Bipolar Child: What Every Parent and Professional Needs to Know** by Trudy Carlson, Benline Press; 2000

#### **STEP-BY-STEP GUIDES**

**Helping Your Teenager Beat Depression: A Problem-Solving Approach for Families** by Katharina Manassis & Anne Marie Levac, Woodbine House; 2004

**The Depressed Child: A Parent's Guide for Rescuing Kids** by Douglas Riley, Taylor Trade Publishing; 2001

**Coping with Depression in Young People: A Guide for Parents** by Carol Fitzpatrick and John Sharry Wiley; 2004

**Bipolar Disorders: A Guide to Helping Children & Adolescents** by Mitzi Waltz, Patient Centered Guides; 2000

**Rescuing Your Teenager from Depression** by Norman T. Berlinger, Collins 2006

#### **FOR YOUNG PEOPLE**

**What's Your Mood? A Good Day / Bad Day / In-between Day Book** by Kimberly Potts, Adams Media Corporation; 2004

#### **WEBSITES**

**American Academy of Adolescent and Child Psychiatry**  
[www.aacap.org/publications/factsFam/depressed.htm](http://www.aacap.org/publications/factsFam/depressed.htm)

**National Institute of Mental Health Booklet on Depression**  
[www.nimh.nih.gov/healthinformation/depressionmenu.cfm](http://www.nimh.nih.gov/healthinformation/depressionmenu.cfm)

The Kelty Mental Health Resource Centre is BC's information source for children, youth and families dealing with mental health and substance use issues. In addition, the centre offers resources on eating disorders for all ages.

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