



Helping young people with Depression

making a difference community
Dr Caroline Howe & Amy Beesley

- Housekeeping



- Looking after yourselves and others
(be respectful & responsible for yourself)

- Timings (Break 6.40-6.55)



- Share concerns and ask questions as we go

What is Depression?



[HTTPS://VIMEO.COM/218648325](https://vimeo.com/218648325)

Depression



Physical Symptoms

Sick and run down
Difficulty sleeping
Poor appetite

Muscle pains
Weight loss
Tired

Thoughts

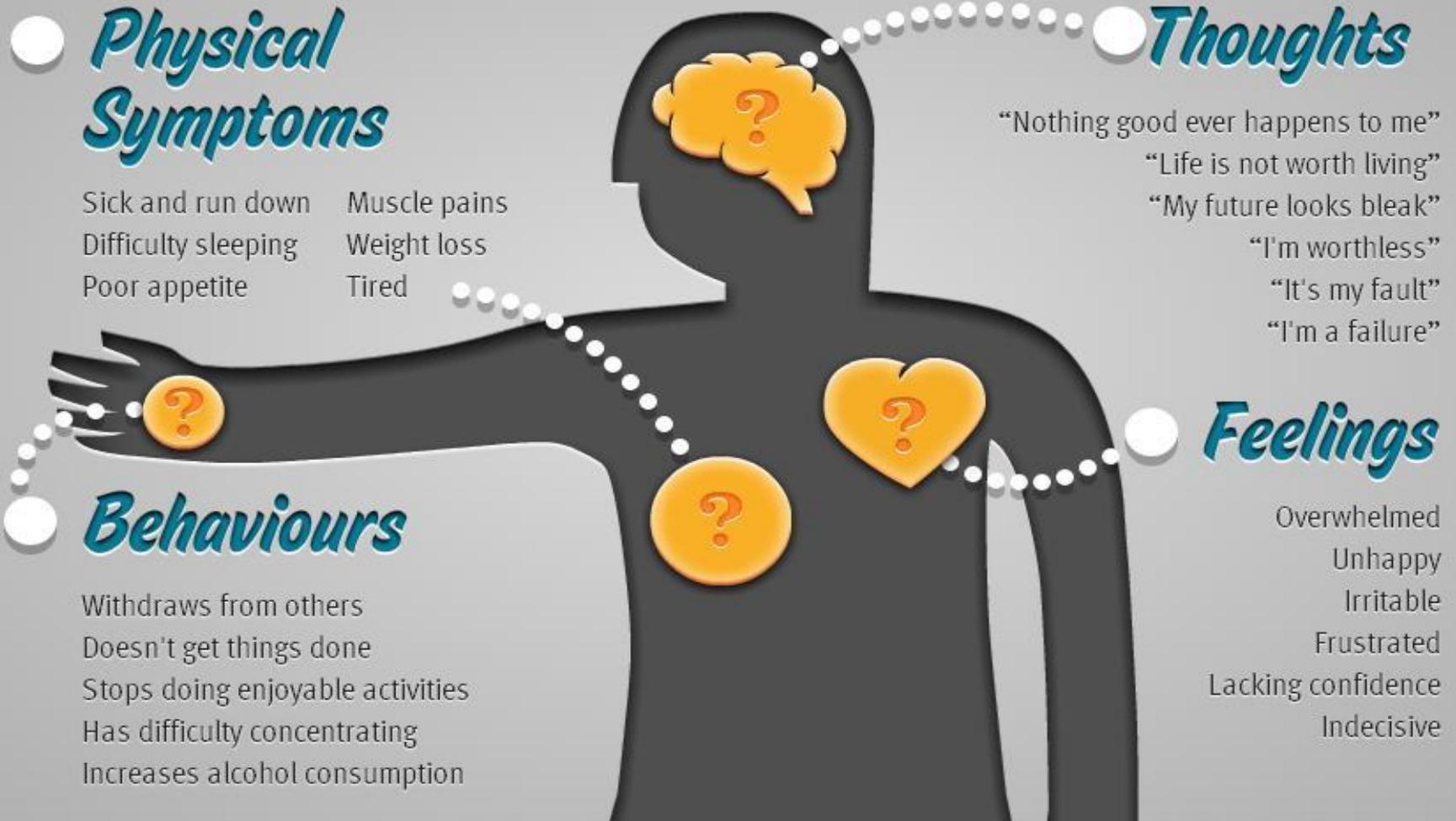
“Nothing good ever happens to me”
“Life is not worth living”
“My future looks bleak”
“I’m worthless”
“It’s my fault”
“I’m a failure”

Behaviours

Withdraws from others
Doesn't get things done
Stops doing enjoyable activities
Has difficulty concentrating
Increases alcohol consumption

Feelings

Overwhelmed
Unhappy
Irritable
Frustrated
Lacking confidence
Indecisive



Depression



Symptoms of depression in children often include:

- sadness, or a low mood that doesn't go away
- being irritable or grumpy all the time
- not being interested in things they used to enjoy
- feeling tired & exhausted a lot of the time

Children /YP may also:

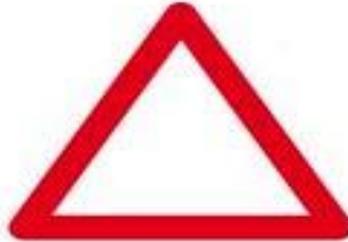
- have trouble sleeping or sleep more than usual
- not be able to concentrate
- interact less with friends & family
- be indecisive
- not have much confidence
- eat less than usual or overeat
- have big changes in weight
- seem unable to relax or be more lethargic than usual
- talk about feeling guilty or worthless
- feel empty or unable to feel emotions (numb)
- have thoughts about suicide or self harming
- actually self-harm, e.g. cutting their skin or taking on overdose

DEPRESSION

THE WARNING SIGNS



Feelings of
hopelessness and
pessimism



Feelings of
worthlessness, guilt
and helplessness



Thoughts of
death or suicide



Restlessness



Irregular sleep



Decreased energy



Changes in mood



Insomnia



Difficulty
making decisions



Appetite and
weight loss



Persistent sad, anxious
or empty mood



Tearfulness

Understanding and working with depression



Black dog (WHO)

- <https://www.youtube.com/watch?v=XiCrniLQGYc>

Treatment? Stepped care model, NICE



- **Mild depression:** watchful waiting, non-directive supportive therapy, guided self help/group CBT

- Speak to GP

- Good diet, sleep & exercise imp.

- Counselling – through school, No. 5, No. 22, Time to Talk, Youth line, on line e.g. Kooth, Talking Therapies

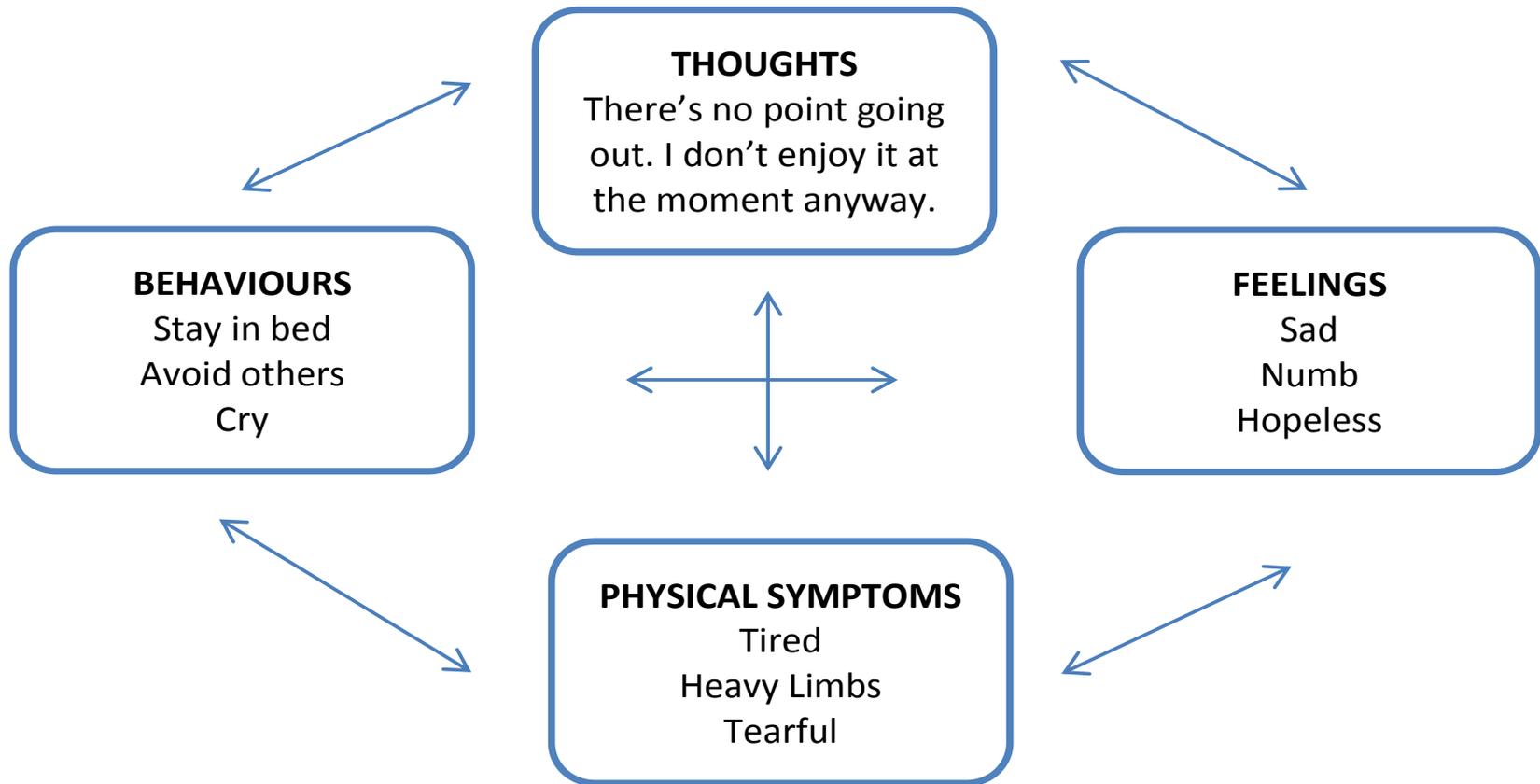
- Guided self-help

- Tier 2: PCAMHS (CBT, psychotherapy, family support); Emotional Health Academy; AnDY Research Clinic (referrals via CPE, CAMHS)

- **Moderate to severe depression**

- Tier 2/3, CAMHS: Brief psychological therapy (CBT, family therapy, play therapy) +/- medication

CBT – Understanding depression



Components of CBT & what's involved



- Goal focussed
- Behavioural activation
- Thought records / diaries, challenging thoughts
- <https://www.youtube.com/watch?v=m2zRA5zCA6M>
- Stepped plans, Problem solving, Relaxation skills
- Home tasks
- Able to talk about thoughts & feelings
- Motivation to change & willingness to engage in treatment

Lack of family / school support, preoccupation with other issues happening in their life & multiple difficulties occurring together can make it difficult for children/YP to engage in CBT

Principles of Behavioural Activation



- Increasing activity levels
 - Activity helps us feel better
 - Activity helps us feel less tired
 - Activity helps us think more clearly
- Pick activities that are fun and that increase sense of achievement and sense of purpose
- Start simple

Compassion focused therapy



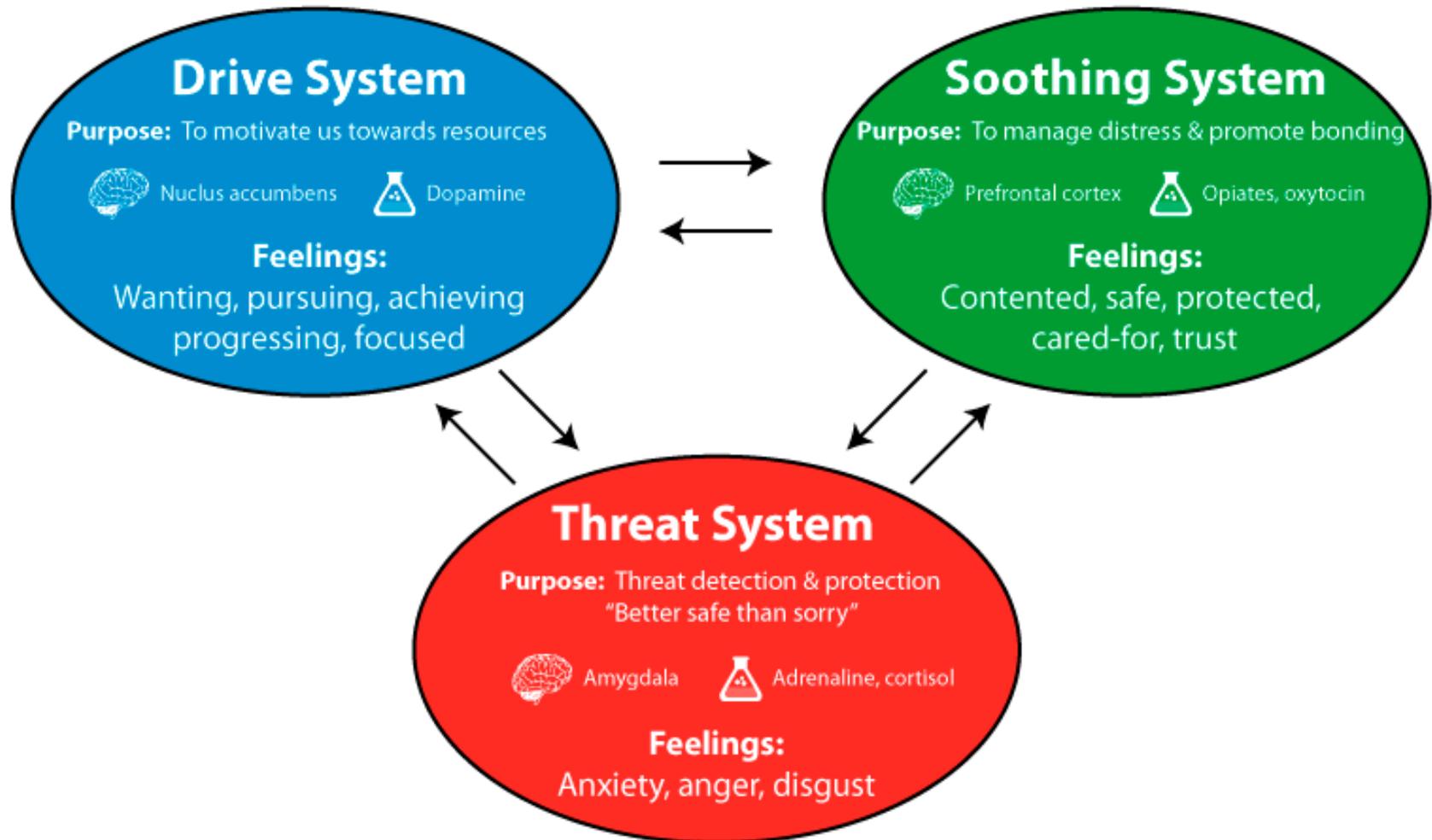
Self criticism v self compassion (example, teacher)

Tricky brain – (example, humans v zebras)

Emotional Regulation Systems

Paul Gilbert's evolutionary model proposes that human beings switch between three systems to manage their emotions. Each system is associated with different brain regions and different brain chemistry.

Distress is caused by imbalance between the systems, often associated with under-development of the soothing system.



Looking after yourself



What can you do to help?



- Look after yourself – take a break
- Know that it is not your fault
- Listen
- Validate your adolescent's experiences
- Develop a step-by-step plan to re-engage with lost activities or to face their fears

What can you do to help?



- Encourage independence and ‘have a go’ behaviour
- Model and reinforce healthy coping behaviour
- Be clear, patient & consistent
- Support them to cope without self-harming wherever possible
- Support your adolescent to problem-solve challenges

Therapeutic Lifestyle Change; the Psychological Toxicity of Modern Adolescence (& *examples* of what we can do about it)

Ilardi & Casteen



Exercise is Medicine

It is now well-established that vigorous physical activity triggers a wide array of beneficial physiological changes throughout the body, including many in the brain.

Healthy Diet

Sunlight Exposure

Our eyes and brains were designed by natural selection to derive the benefits that follow from regular bright light exposure.

Healthy Sleep

The typical teen needs at least nine hours of sleep each night for optimal neurological functioning (Orzech, 2013),

Social Support

Problem Solving



Information Sheet for Schools – Depression

Within the school environment teachers are most likely to encounter changes or difficulties with the young person in the following areas:



Concentration	<ul style="list-style-type: none">• Concentration and memory may be impaired which could have a negative impact on learning
Motivation	<ul style="list-style-type: none">• The young person may find even the smallest, simplest of things difficult to do
Behaviour	<ul style="list-style-type: none">• Fatigue and lack of energy are common problems, especially if the young person is experiencing trouble sleeping³⁹• You may notice increased restlessness with the young person having difficulty staying settled during lessons
Mood	<ul style="list-style-type: none">• They may appear sad and upset, or might come across as more angry or irritable than usual.• Their mood may be worse at particular times of day; mornings can be particularly difficult• They may be more sensitive to criticism or negative feedback
Peer Relationships	<ul style="list-style-type: none">• As a result of mood changes or because they have cut themselves off from other people, relationships with peers may become hard to maintain

What schools can do to help:

- Where possible reduce the amount of homework given or extend deadlines where appropriate
 - Identify an individual who the young person can speak to if needed.
 - Acknowledge the individual and make them aware that you know they are feeling down.
 - Continue to make efforts to engage the young person, even when they present as withdrawn or not interested – do not give up on them.
 - Be understanding that the young person may find it harder to participate in lessons than usual.
 - Try to find ways to help them catch up on any work that they may have missed due to absence, or if they have been having difficulty focusing on classwork / homework.
 - Make a plan with the young person detailing all the steps the school can take to help support them
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- It will make a positive difference to the young person to know there are people at the school who know about their condition and who they can talk to if they feel worried or unwell.

Self harm



<https://www.youtube.com/watch?v=kT5cr-HTTEQ>

Self-injury is a coping mechanism. An individual harms their physical self to deal with emotional pain, or to break feelings of numbness by arousing sensation.

“LifeSIGNS at www.lifesigns.org.uk”

Why?



There are certain characteristics that some people who self-injure share:

- Low self esteem
- Perfectionism & high achievement
- Poor body image
- Trauma
- Other mental health issues.

Attention **needing** NOT seeking!



Self-injury is not ‘acting out’ or ‘attention seeking’, though it may sometimes be considered to be ‘attention needing’. If a person feels unheard or invalidated in their home, school or work environments and they rely on self-injury to help them cope with their distress, then by showing their injuries they may perhaps be able to make other people ‘see’ what they have been unable or unwilling to ‘hear’.

Managing self-harm



- It is not your fault or theirs
- Do acknowledge it
- Do validate the distress that leads to that behaviour
- Calmly express your concern
- Reduce access to means and explain your rationale; to protect them not to disempower them
- Keep talking to them
- Take them to A&E if at serious risk of harming themselves

Self injury factsheet



- <http://www.theministryofparenting.com/wp-content/uploads/2012/03/Life-Signs-Factsheet-for-Parents.pdf>

More information about Berkshire Healthcare Foundation Trust:

<https://cypf.berkshirehealthcare.nhs.uk/>



ALL SLIDES FROM THIS
EVENING WILL BE
AVAILABLE ON THE ANDY
WEBSITE:
[HTTPS://RESEARCH.READ
ING.AC.UK/ANDY/](https://research.reading.ac.uk/andy/)

TWITTER:
[@ANDY_RES_CLIN](https://twitter.com/ANDY_RES_CLIN)

Questions/discussion



Thanks for coming.



We welcome your feedback

Resources



- **The Overcoming Self-Help Series**
 - Overcoming your child's fears and worries (Creswell & Willetts)
 - Overcoming your child's shyness and social anxiety (Willetts & Creswell)
- **Teenage Depression - A CBT Guide for Parents: Help your child beat their low mood (Parkinson and Reynolds)**

Other resources



- **Berkshire Talking Therapies** (<http://www.talkingtherapies.berkshire.nhs.uk/>) or 0300 365 2000
 - Self-referral route to mental health support for adults
- **The Overcoming Self-Help Series**
- **Mood Juice Website** (www.moodjuice.scot.nhs.uk)
 - A free web-based CBT programme, which includes modules on assertiveness and inter-personal skills.
- **Mood gym Website** (<https://moodgym.anu.edu.au>)
 - A self-help site full of resources and booklets for dealing with depression, anxiety and other difficulties.
- **Future Learn** (<https://www.futurelearn.com/>)
 - Online educational courses on wellbeing, mental health and treatment options.