FROM DEPRESSION TO DISCOVERY A Teenager's Guidebook



Introduction

This Teacher's Guide provides information to help you get the most out of *From Depression to Discovery: A Teenager's Guidebook.* The contents of this guide will allow you to prepare your students before using the program and to present follow-up activities to reinforce the program's key learning points.

Clinical depression is a serious illness that can affect anybody, including teenagers. It can affect thoughts, feelings, behavior, and overall health. Most people with depression can be helped with treatment. But sadly, many depressed people never seek the help they need to become well.

When depression isn't treated, it can get worse, last longer, and prevent those who deal with it from getting the most out of life. In the worst case scenario, depression can even lead to attempted suicide. *From Depression to Discovery: A Teenager's Guidebook* aims to help teens understand and identify depression, as well as learn how to get help.

Learning Objectives

After viewing the program, students will be able to:

- Identify the most common myths about depression.
- Discuss the realities of depression and its causes.
- Identify signs of depression in themselves and in others.
- Name specific steps to take if they suspect that they are, or that someone they know is, depressed.
- Discuss the long-term prognosis for people who suffer from depression.

Educational Standards

NATIONAL STANDARDS

Health Education Standards

The activities in this Teacher's Guide were created in compliance with the following National Health Education Standards from the American School Health Association.

- Students will comprehend concepts related to health promotion and disease prevention.
- Students will demonstrate the ability to use interpersonal communication skills to enhance health.
- Students will demonstrate the ability to use goal-setting and decision-making skills to enhance health.

This represents the work of the Joint Committee on National Health Education Standards. Copies of "National Health Education Standards: Achieving Health Literacy" can be obtained through the American School Health Association, Association for the Advancement of Health Education or the American Cancer Society. Reprinted with permission.

English Language Arts Standards

The activities in this Teacher's Guide were created in compliance with the following National Standards for the English Language Arts from the National Council of Teachers of English.

- Students use a variety of technological and information resources (e.g., libraries, databases, computer networks, video) to gather and synthesize information and to create and communicate knowledge.
- Students use spoken, written, and visual language to accomplish their own purposes (e.g., for learning, enjoyment, persuasion, and the exchange of information).

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Technology Standards

The activities in this Teacher's Guide were created in compliance with the following National Education Technology Standards from the National Education Technology Standards Project.

- Technology communication tools: Students use a variety of media and formats to communicate information and ideas effectively to multiple audiences.
- Technology research tools: Students use technology to locate, evaluate, and collect information from a variety of sources.

The National Education Technology Standards reprinted with permission from the International Society for Technology Education.

Curriculum Areas

Relevant curriculum areas include:

- Psychology and Mental Health
- Guidance
- Teacher Education
- Professional Development

Program Overview

The purpose of this program, *From Depression to Discovery: A Teenager's Guidebook,* is to inform viewers about the signs, symptoms, treatment options, and long-term prognosis of teen depression. This program will arm students with the tools they need to recognize depression in themselves and others, understand the myths and realities of teen depression, and know where to turn for help.

Main Topics

Topic 1: What is Depression?

It is common for adolescents to occasionally feel unhappy. However, when the unhappiness lasts for more than two weeks, and the teen experiences other symptoms typical of depression, then he or she may be suffering from depression. Clinical depression is a serious illness that can affect anybody, including teenagers, and it can affect thoughts, feelings, behavior, and overall health.

Topic 2: Is it Depression?

Often, depressed teens will display a striking change in their thinking and behavior, lose their motivation, or become withdrawn. Symptoms can include sadness, anxiety, or a feeling of hope-lessness; loss of interest in food or compulsive overeating; disrupted sleep; social withdrawal;

rebellious behavior, a sudden drop in grades; skipping school; complaints of pains including headaches, stomachaches, low back pain, or fatigue; use of alcohol or drugs; promiscuous sexual activity; a preoccupation with death and dying; talk of or efforts to run away from home; and thoughts or expressions of suicide or self-destructive behavior.

Topic 3: What Causes Depression?

Depression is the result of a complicated process of various genetic, psychological, and environmental factors. Modern brain imaging technologies have revealed that neural circuits responsible for the regulation of moods, thinking, sleep, appetite, and behavior fail to function properly in people with depression. Depression, like many other illnesses, tends to run in families. Some studies suggest adverse life events such as divorce, serious illness, or multiple misfortunes may cause depression. Teenage girls and minorities are at high risk for depression.

Topic 4: How Do You Get Help?

While teen depression is a serious mental illness, help is readily available. Those suffering from depression can reach out to psychologists, school counselors, parents, trusted family members, family physicians, clergy, or professionals at mental health centers. Psychotherapy and medication are treatment options.

Topic 5: Living with Depression

Those living with depression need to commit to taking an active role in daily activities, such as school or sports. It may be helpful to them to understand that recovery is a long-term process, and that feeling better takes time. Negative thinking can be a part of depression, and will disappear as depression responds to treatment.

Fast Facts

- Estimates on how many adolescents experience depression vary from 3% to 6%. At any given time, from 2% to 10% of school-age children are thought to be suffering from depression.
- Modern brain imaging technologies have revealed that neural circuits responsible for the regulation of moods, thinking, sleep, appetite, and behavior fail to function properly in people with depression.
- A child with one parent with depression has a 10% to 13% increased chance of developing the condition. In the case of identical twins, if one twin has depression, the other one has a 70% chance of developing the illness sometime in his or her life.
- Continuous exposure to violence, neglect, abuse, or poverty can lead to chemical imbalances that make people who are already susceptible to depression more vulnerable to the illness.
- Children under stress, who experience loss, or who have attention, learning, conduct, or anxiety disorders are at a higher risk for depression.
- Teenage girls are at especially high risk for depression, as are minority youth.
- Adolescent suicide is the second leading cause of death among youth and young adults in the U.S. It is estimated that 500,000 teens attempt suicide every year, with 5,000 succeeding. These are epidemic proportions.
- There aren't any specific tests that can be performed to detect depression. Healthcare professionals determine if an adolescent is depressed using psychological tests and detailed clinical interviews with the individual and his or her family members, teachers, and peers.

- Studies show that current treatments for adolescent depression, such as the use of SSRI (selective serotonin reuptake inhibitor) medications, are generally safe and effective.
- Adolescents with depression are just as likely to develop recurrent depression as an adult who is depressed—but 10 to 20 years earlier in their life.

Vocabulary Terms

Antidepressants: A group of medications that are thought to relieve symptoms of depression by helping to adjust the level of chemicals, known as neurotransmitters, in the brain. Antidepressants are not habit-forming, and are generally considered safe and effective.

Bipolar disorder: Formerly known as "manic depressive disorder," this mental illness causes people to have severe high (manic) and low (depressive) moods. In between mood swings, a person's moods may be normal.

Depression: Mental illness characterized by sadness, general apathy, a loss of self-esteem, feelings of guilt, and, at times, suicidal tendencies. People who suffer from major depression feel that their mood is permanent.

Dysthymia: Also sometimes referred to as "chronic depression." This type of depression occurs most of the time over a period of at least two years in adults, and one year in children and adolescents. It is characterized by less severe, lingering symptoms of depression that may last for years.

Monoamine Oxidase Inhibitors (MAOIs): A group of medicines sometimes prescribed to treat severe depression. MAOIs increase the concentration of chemicals responsible for transmitting information between nerves in particular regions of the brain, which may lead to increased mental functioning.

Neurotransmitters: Chemical "messengers" that facilitate communication between nerve cells. Neurotransmitters are found in the brain and along pathways to the brain, such as the spinal cord. Many experts believe that neurotransmitters play a major role in regulating a person's moods, emotions, and feelings of pain.

Norepinephrine: A neurotransmitter that has been linked to a number of the emotional and physical symptoms of depression, such as a loss of interest, lack of concentration, and aches and pains.

Psychiatrist: A physician who specializes in evaluating and treating mental, emotional, or behavioral disorders. Psychiatrists are medical doctors and can prescribe medication.

Psychologist: A healthcare professional who specializes in the science of mind and behavior. Psychologists usually have a PhD and have received additional training to work with patients. Psychologists are not medical doctors, and cannot ordinarily prescribe medication. They do perform evaluations, use psychotherapy, and may work with medical doctors to treat patients.

Psychotherapist: A general term used to describe a person who practices psychotherapy.

Psychotherapy: Also known as counseling or "talk" therapy. One of several possible treatments for depression, psychotherapy aims to help a person learn about himself or herself, understand past and present relationships, and change patterns of behavior that may contribute to depression. Psychotherapy can involve individual, group, or family sessions. It has proven to be effective in treating mild and moderate forms of depression, and can be combined with drug therapy to treat all degrees of depression.

Reactive Depression: Depression triggered by tragic or highly stressful events.

Serotonin: A neurotransmitter in the brain that has been linked to a number of the emotional and physical symptoms of depression. Some of these may include despair, anxiety, loss of appetite, and bodily aches and pains.

SSRI (selective serotonin reuptake inhibitor): A class of antidepressants that are thought to relieve the symptoms of depression by helping to correct an imbalance in the brain's level of serotonin.

Pre-Program Discussion Questions

- 1. What do you think are some common myths about depression? What are the realities behind these myths?
- 2. What factors influence teen depression?
- 3. Do you know anyone suffering from depression? How do you know that it is depression?
- 4. What would you do if you suspected that someone you knew was suffering from depression? What would you say?
- 5. What would you do if you thought you might be depressed?

Post-Program Discussion Questions

- 1. Why do you think someone might avoid seeking treatment for depression?
- 2. After having viewed the video, what would you do if you suspected that someone you knew was suffering from depression? What would you say?
- 3. After having viewed the video, what would you do if you thought you might be depressed?
- 4. If you were depressed, would you use your school's mental health or social service personnel services? Why or why not?
- 5. How has viewing this program changed your understanding about depression?

Group Activities

Myth-Busters!

Have students divide into small groups, and give each group a list of five to ten myths about depression. Students should create a project (e.g., a poster series or a PowerPoint presentation) that "busts" the mistaken beliefs about teen depression and replaces them with facts.

Teen Suicide Prevention and Depression Awareness

Have the class work on creating a Teen Suicide Prevention and Depression Awareness day or event for the school. Divide students into committees to work on the following:

- Budget
- Marketing and public relations
- Planning and implementation
- Coalition-building

Add additional teams as necessary. Make the idea a reality! (See "Grant Me This" in the Internet Activity section for more ideas.)

Nature vs. Nurture

Divide students into teams. Each team will need to take a position on the causes of depression either "nature" (genetics and biochemistry) or "nurture" (social and environmental factors).

Using a solid background of research beyond this video, have teams debate which set of causes seems to have a greater influence on whether someone develops depression. Ask the students who are not debating to serve on a panel of judges.

Individual Student Projects

Case Studies

Using the information from the video as well as from other sources, have each student write up a single-page case study of a fictional student who may or may not be suffering from depression. The case study should include the following information about the individual:

- Family relationships
- Peer relationships
- Participation in classes and extracurricular activities
- Behaviors that indicate depression
- Symptoms of depression and their duration
- Any additional information that you deem necessary

After the case studies have been written, have students exchange them with one another. Each student should make the case for whether the adolescent is dealing with depression, and why or why not.

A Beautiful Mind

Ask students to create a piece of art (painting, drawing, collage, computer image, etc.) that shows how someone living with depression might view the world. Encourage creativity with colors, textures, sizes, shading, etc.

Poetry and Prose

Ask students to think about how an adolescent living with depression might be feeling, and the challenges he or she faces. Using their knowledge of written work (poetry, novels, great quotations, biographies, screenplays, operas, theater, etc.), have students find a particular passage that they feel might be shared with someone dealing with depression. Next, have students turn their passages into cards or posters that can be displayed near the school's mental health offices.

Internet Activities

Depression Across the Cultures

Using the Internet, have students research the prevalence of depression across cultures in the US, as well as around the world. Ask students to write an essay explaining their findings, their implications, and how this information might be used in the prevention or treatment of depression.

Grant Me This

Divide students into groups of three or four. Using the Internet for research on successful proposal writing, ask each group to write a grant proposal to a potential funding source (real or imaginary) asking for a particular amount of money to fund a teen depression-related initiative. These can range from Suicide Prevention Screenings to a Teen Depression Awareness Day and beyond. Students can represent the school, or create their own "organization" or "agency" for the purposes of writing this proposal.

After students have written their proposals, hand out each group's proposal to the rest of the class. Students should then act as "grant makers" and decide which initiative they would fund, and why. If possible, have the entire class work on the winning proposal and submit it for a local grant (school- or community-based) to make the initiative a reality!

Who's A Guinea Pig?

According to recent reports, some anti-depressants originally touted by their manufacturers as safe for adolescents have been proven otherwise. Ask students to use the Internet to review media reports and develop a list of questions that need to be addressed to better understand this issue. Examples are:

- Which drugs are in question?
- How often are these drugs used in trials with adolescents rather than with adults?
- How do they determine whether or not those in the trials actually suffer from depression?

Then, have students return to the Internet to develop answers and their opinions.

Assessment Questions

Q: Which of the following is *not* a myth about depression?

- a) Antidepressants can help anybody with depression.
- b) There is no single cause of depression.
- c) There are no outward signs of depression.
- d) People dealing with depression never experience extreme highs.

A: b

Feedback: There is no single cause of depression. Depression can be triggered by one or a combination of environmental, genetic, and biochemical factors.

Q: It is common for adolescents to occasionally feel unhappy, but a teen may be suffering from depression when the unhappiness lasts for more than how long?

- a) One week
- b) Two weeks
- c) One month
- d) One year

A: b

Feedback: Unhappiness that lasts for more than two weeks accompanied by other symptoms typical of depression may, in fact, indicate depression.

- **Q:** Which of the following is a symptom of depression?
 - a) Sadness, anxiety, or a feeling of hopelessness
 - b) Loss of interest in food or compulsive overeating that results in rapid weight loss or gain
 - c) Staying awake at night and sleeping during the day
 - d) All of the above

A: d

Feedback: Depressed teens will display a striking change in their thinking and behavior, lose their motivation, or become withdrawn. Other symptoms include withdrawal from friends, rebellious behavior, sudden drop in grades, cutting school, complaints of pains including headaches, stomachaches, low back pain, fatigue, use of alcohol or drugs, promiscuous sexual activity, a pre-occupation with death and dying, talk of or efforts to run away from home, and thoughts or expressions of suicide or self-destructive behavior.

Q: If a child or teen says, "I want to kill myself," or "I'm going to commit suicide," you should always take it seriously. (*True or False?*)

A: True

Feedback: Always take the statement seriously and seek evaluation from a child and adolescent psychiatrist or other mental health professional.

Q: Most people with depression seek help for their illness. (True or False?)

A: False

Feedback: Most people with depression can be helped with treatment. But, many depressed people never seek the help they need. Untreated depression can get worse and last longer.

Q: A child with one parent with depression has what percent increased chance of developing the condition?

a) 2% - 5% b) 10% - 13% c) 20% - 23% d) 30% - 33%

A: b

Feedback: Depression tends to run in families. A child with one parent with depression has a 10% to 13% increased chance of developing the condition. If one identical twin has it, the other one has a 70% chance of developing the illness sometime in his or her life.

Q: Depression can be caused by which three primary factors?

- a) Genetic, biochemical, and social environmental factors
- b) Genetic, economic, and biochemical factors
- c) Biochemical, genetic, and political factors
- d) None of the above

A: a

Feedback: Depression is the result of a complicated process of various genetic, biochemical, and social environmental factors.

Q: Continuous exposure to which of the following does *not* lead to chemical imbalances that make people who are already susceptible to depression more vulnerable?

- a) Television
- b) Violence
- c) Neglect d) Abuse

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A: a

Feedback: Television has not been proven to influence depression. In addition to the social environmental factors above, continuous exposure to poverty can also lead to the same chemical imbalances.

Q: Which of the following is not a warning sign of suicide?

- a) Threatening to kill one's self
- b) Preparing for death, giving away favorite possessions, writing goodbye letters, or making a will
- c) Expressing a hopelessness for the future
- d) Long crying spells

A: d

Feedback: While frequent crying may be symptomatic of depression, it is not a warning sign of suicide. In addition to the signs here (a, b, and c), an additional sign includes giving up on one-self and talking as if no one cares.

Q: If someone is thinking of harming him or herself, he or she should ______.

- a) call their best friend
- b) find an appropriate chat room on the Internet
- c) talk to a parent, teacher, or mental health professional
- d) wait until the feeling passes

A: c

Feedback: The most appropriate people to reach out to are adults who have the tools and resources to help immediately. If you think you're depressed, talk to someone who can help, such as a psychologist, school counselor, parent, a trusted family member, a family doctor, a clergy member, or a professional at a mental health center.

Q: Which of the following professionals can proscribe medication for depression?

- a) Clinical social worker
- b) Psychologist
- c) Psychiatrist
- d) Psychoanalyst

A: c

Feedback: A psychiatrist is a physician who specializes in evaluating and treating mental, emotional, or behavioral disorders. Psychiatrists are also medical doctors, and therefore can prescribe medication.

Additional Resources

WEB SITES

Depression Hurts

www.depressionhurts.com

Teen Health (keyword: depression) www.kidshealth.org/teen

Depression and Bipolar Support Alliance

www.dbsalliance.org

Psychology Info Online

www.psychologyinfo.com

WebMD Online (key word: depression) www.webmd.com

Wing of Madness—Depression Information, News and Support www.wingofmadness.com

BOOKS

Helping Students Overcome Depression and Anxiety: A Practical Guide Kenneth W. Merrell ISBN: 1572306173 Guilford Publications, Inc., 2001

More than Moody: Recognizing and Treating Adolescent Depression

Harold Koplewicz ISBN: 0399529128 Penguin Group, 2003

Disappearing Girl: Learning the Language of Teenage Depression

Lisa Machoian ISBN: 052594866X Penguin Group, 2005

Other Products

Depression: A Teenager's Guide • VHS • DVD-R • Digital on Demand

Today more than two million teenagers suffer from clinical depression—which can lead to substance abuse and even suicide—but only 40% seek help. In this fact-filled, down-to-earth program, medical professionals and six young men and women speak out about depression: what it is, what it feels like, how to identify it, what its triggers and symptoms are, and how to treat it. This candid guide is an indispensable part of any teen-oriented depression awareness program. *Correlates to national educational standards.* (18 minutes)

Item no: 8989 • Films for the Humanities and Sciences • www.films.com • 1-800-257-5126

Hills And Valleys: Teen Depression • VHS • DVD-R

Don't feel like biking...lost interest in following your favorite pro basketball team...even your friends don't seem fun anymore? You may be depressed, a normal feeling that happens to everyone once in a while. But when is depression *not* normal? How long should feelings of depression last? There can be a fine line between normal depression and clinical depression, which requires professional intervention. This video helps students recognize and react appropriately to life's ups and downs, and advises them on what can be done about depression. A Cambridge Educational Production. (16 minutes)

Item no: 11004 • Cambridge Educational • www.cambridgeeducational.com • 1-800-468-4227



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