**Depression & Suicide Among Teenagers**

## **Overview on Teen Depression**

Clinical depression is a massive public health problem. It is an illness. No family, and no person, is immune to developing depression. It can strike anyone, regardless of socioeconomic status, age, education, family influences, or religious faith or practices.

Mental illnesses, taken together, are easily the most likely cause of someone being disabled. Depression is likely among the psychiatric disorders for causing dysfunction, great suffering, and early death. Suicide is one outcome of depression. As many as 8% of those who suffer from the more severe varieties of depression die by suicide. Of all those who do die by suicide, perhaps half suffer from some form of depression.

The cause is believed to be a combination of genetic, environmental, and psychological factors. Risk factors include a family history of the condition, major life changes, certain medications, chronic health problems, and substance abuse. About 40% of the risk appears to be related to genetics. (For this and other reasons, no person with depression should be asked “What do you have to be depressed about?”)

Although there are many different disorders which can produce significant depression, two are perhaps most critical to know about.

***Major Depression***occurs in episodes. Commonly, a person begins to feel depressed, his or her symptoms progress over time. Typically, an episode may last a few weeks. But depressive episodes can recur. It is difficult to overstate how much a major depression can interfere with normal thinking, emotions, and behavior.

***Bipolar Illness*** also known as manic-depressive illness, is a biochemically driven disorder which is characterized by episodes of abnormally elevated mood and related behavior. Individuals with bipolar disorder commonly also have moderate to severe episodes of clinical depression.

Teenagers, and even children, may develop these illnesses. Teen depression is a serious mental health problem that causes a persistent feeling of sadness and loss of interest in activities. It affects how your teenager thinks, feels and behaves, and it can cause emotional, functional and physical problems. Although depression can occur at any time in life, symptoms may be different between teens and adults.

## **Symptoms of Depression in Youth**

Teen depression signs and symptoms include a change from the teenager's previous attitude and behavior that can cause significant distress and problems at school or home, in social activities, or in other areas of life.

Depression symptoms can vary in severity, but changes in your teen's emotions and behavior may include the examples below.

**Emotional changes**, such as:

* Feelings of **sadness**, which can include crying spells for no apparent reason. However, depressed teenagers will often deny they are sad and will seem appear angry.
* **Irritable or annoyed mood**. Frustration or feelings of anger, even over small matters. This is a critical issue for those who work with youth. Some teenagers who are depressed may not appear so much sad as **ANGRY**. Some have rages. ***Many will seem chronically and severely irritable****.*
* Feeling **hopeless** or empty. Hopelessness is particularly dangerous. If a person is suffering greatly—and depression always causes suffering—and also believes there is no hope of getting better, an individual may turn to suicide or to the kind of irrational violent behavior we have all become all too familiar with. If a person is suffering badly and has lost hope, they are in a dangerous state—danger to themselves and potentially danger to others.
* Loss of interest or pleasure in usual activities
* Loss of interest in, or conflict with, family and friends
* Low self-esteem
* Feelings of worthlessness or guilt
* Fixation on past failures or exaggerated self-blame or self-criticism
* Extreme sensitivity to rejection or failure, and the need for excessive reassurance
* Trouble thinking, concentrating, making decisions and remembering things
* Ongoing sense that life and the future are grim and bleak
* Frequent thoughts of death, dying or suicide

Watch for **changes in behavior**, such as:

* Tiredness and loss of energy
* Insomnia or sleeping too much
* Changes in appetite — decreased appetite and weight loss, or increased cravings for food and weight gain
* Use of alcohol or drugs. Note: The relationship between depression and other mental illnesses, and then to substance abuse, can work in both directions, or in a kind of vicious cycle. People with depression may “self-medicate” with drugs and alcohol. Use of drugs and alcohol can lead in many ways to more mood problems, and so on.
* Agitation or restlessness — for example, pacing, hand-wringing or an inability to sit still
* Frequent complaints of unexplained body aches and headaches, which may include frequent visits to the school nurse. This is particularly common in pre-pubescent children.
* Poor school performance or frequent absences from school
* Less attention to personal hygiene or appearance
* Angry outbursts, ***disruptive or risky behavior, or other acting-out behaviors.***
* Self-harm — for example, cutting, burning, or excessive piercing or tattooing
* Making a suicide plan or a suicide attempt

### **When to see a doctor**

If depression signs and symptoms continue, begin to interfere in your teen's life, or cause you to have concerns about suicide or your teen's safety, talk to a doctor or a mental health professional trained to work with adolescents. Your teen's family doctor or pediatrician is a good place to start. Or your teen's school may recommend someone.

Depression symptoms likely won't get better on their own — and they may get worse or lead to other problems if untreated. Depressed teenagers may be at risk of suicide, even if signs and symptoms don't appear to be severe.

If you're a teen and you think you may be depressed — or you have a friend who may be depressed — don't wait to get help. Talk to a health care provider such as your doctor or school nurse. Share your concerns with a parent, a close friend, a spiritual leader, a teacher or someone else you trust.

### **When to get emergency help**

Suicide is often associated with depression. If you think you may hurt yourself or attempt suicide, call 911 or your local emergency number immediately.

Also consider these options if you're having suicidal thoughts:

* Call your mental health professional.
* Call a suicide hotline. In the U.S., call the National Suicide Prevention Lifeline at 1-800-273-TALK (1-800-273-8255) or use its webchat on suicidepreventionlifeline.org/chat.
* Seek help from your primary care doctor or other health care provider.
* Reach out to a close friend or loved one.
* Contact a minister, spiritual leader or someone else in your faith community.

If a loved one or friend is in danger of attempting suicide or has made an attempt:

* Make sure someone stays with that person.
* Call 911 or your local emergency number immediately.
* Or, if you can do so safely, take the person to the nearest hospital emergency room.

Never ignore comments or concerns about suicide. Always take action to get help.

## **Complications**

Untreated depression can result in emotional, behavioral and health problems that affect every area of your teenager's life. Complications related to teen depression may include, for example:

* Alcohol and drug misuse
* Academic problems
* Family conflicts and relationship difficulties
* Involvement with the juvenile justice system
* Suicide attempts or suicide

**TEEN SUICIDE: PART OF A NATIONAL CRISIS**

For all ages, suicide now ranks as the 10th leading cause of death in the USA. Because youth are far less likely to die of diseases, it is the 2nd leading cause of death among teenagers. Statistically, among African American youth, it is lower. Black people of all ages are less likely to die by suicide than white people. Black youth are more likely to be the victims of homicide.

Suicide rates have been climbing for virtually all demographics in the last several years. They are up more than 30% since 1999. However, as I will summarize below, youth suicide rates are climbing faster.

We now lose more than 47,000 Americans to suicide. Firearms account for about half of those.

More than 3 out of 4 suicide deaths are males.

The national suicide rate in 2017 was 14 per 100,000 people per year.

The suicide rate in Alabama was 17.1 per 100,000 people per year.

I will summarize the national data and then Alabama data.

Here are the national stats on 15 to 19-year-olds.



Note that suicide rates among teenagers, which had steadily increased for decades, actually fell from the 1990s until 2007. We have seen steady increases since then.





Young black females have historically had the lowest suicide rates, and that is still true. However, from these very low rates, there has been the sharpest increase in recent years.



Comments

* No one can be sure what is contributing to rise in suicide rates, including among youth. Recent 10-year period of increasing suicide rates coincides with the period of time during which teenagers began to engage in social media and carry around smartphones. Many commentators in the field believe that social media is at least in the mix of factors contributing to rises in suicide rates.
* When youth suicide occurs, our culture now defaults to a quick explanation that the student must have been bullied at school and that the school failed to act. These reports emerge so quickly after the suicide that there are reasons to be skeptical. Most suicide experts agree that bullying does not directly cause suicide. Another way to say that is that an otherwise emotionally healthy child will attempt suicide (or die by suicide) as a result of bullying. However, many students who ALREADY have psychological problems—meaning they already are at higher risk for suicide--are prone to be bullied. Bullying can be a trigger for an already vulnerable and potentially suicidal young person.