

Depression and low mood in young people

Supporting young people with Behavioural Activation techniques

Written by Dr Carl Lejuez for the PPEP Care project

# Psychological Perspectives in Education & Primary Care

A programme of training designed to help staff in education and primary care to:

- recognise and understand mental health difficulties presenting in childhood/adolescence
- better support these children, young people, and their families

## Modules include:

- Recognising common mental health difficulties
- Communicating with distressed young people
- Supporting young people who self harm
- Supporting young people with depression and low mood
- Supporting young people with anxiety (in primary and secondary schools)

- Supporting children and young people with ASD
- Supporting children and young people with ADHD
- Recognising Eating Disorder difficulties and supporting young people
- Supporting children and young people with behavioural difficulties

### Thanks to:

The Charlie Waller Trust

https://www.charliewaller.org



The ANDY research clinic (University of Reading)

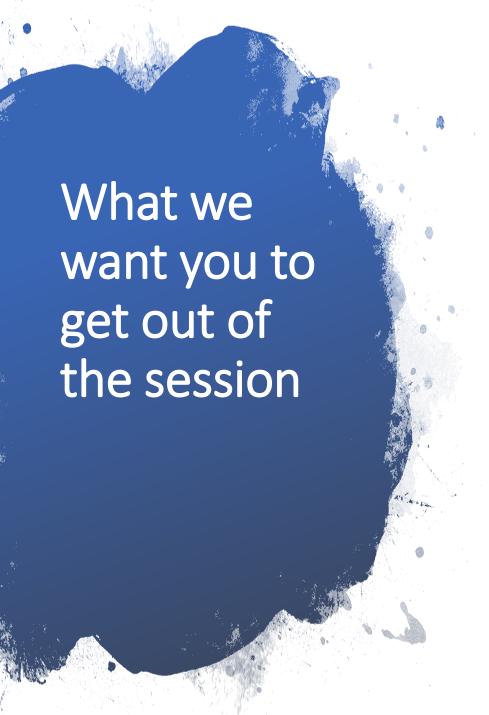
https://research.reading.ac.uk/andy/



# TAKE CARE OF YOURSELF



What would **you** like to get out of this session?



- An understanding of what depression is and how it may look in a young person (YP)
- Confidence to notice difficulties and talk to YP about them.
- An understanding of what treatment for depression (BA) looks like and how it's used to help YP
- Clarity about your role in supporting YP and how this can best be done

## Overview of the module



 What is depression and what does it look like in young people?

 How to talk to a young person about what might be going on for them

What keeps depression going?

 How you can support young people with techniques using a BA approach.



#### A word of warning:

This session isn't about turning you into therapists....

....but these techniques may be suitable for young people with **mild** levels of depression

For young people with more moderate/severe depression, it should help you understand their difficulties and what maintains their symptoms.

# NICE National Institute for Health and Care Excellence

Following a period of up to 4 weeks of watchful waiting, offer all children and young people with continuing mild depression and without significant comorbid problems or signs of suicidal ideation individual non-directive supportive therapy, group cognitive behavioural therapy (CBT) or guided self-help for a limited period (approximately 2 to 3 months). This could be provided by appropriately trained professionals in primary care, schools, social services and the voluntary sector or in tier 2 Child and Adolescent Mental Health Services (CAMHS).

## Overview of the module



#ChildrensMentalHealthWeek

# 1 in 8

children and young people have a diagnosable mental health problem.



About **67,600**CYP in England are seriously depressed

#### 7x

Depression is 7x more common in older children: 5-10 years 11-16 years

1.4%

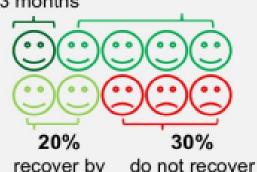
#### Prevalence (%)

0.2%



#### **Prognosis**

10% 40% recover by 1 year 3 months



2 years

by 2 years

Depression is caused by a combination of risk factors including:

#### Biological Family histo

Family history of depression



Family Lone parent

More than 1 child Unemployment

Factors intrinsic



to the child Chronic ill health Disability



Interpersonal
Poor friendships
Being bullied
History of abuse



Psychological
Emotional distress
e.g. bereavement
Emotional
temperament
High levels of
critical self thought

Behavioural therapy to manage depression is **cost effective**, with benefits including:



Higher earnings



Lower costs in the NHS



Lower costs in the education system

Every £1 spent on cognitive behavioural therapy for children returns:





Group therapy

service

Individual

Most parents of children with depression seek advice, but only about 25% have contact with a children's mental health

# Mental health is a **big** issue for YP

- 1 in 6 young people aged 16-24 has symptoms of a common mental disorder such as depression or an anxiety disorder.
- Half of all mental health problems manifest by the age of 14, with 75% by age 24.
- In 2017, suicide was the most common cause of death for both boys and girls aged 5-19 (16.2% of all deaths in boys and 13.3% of all deaths in girls).

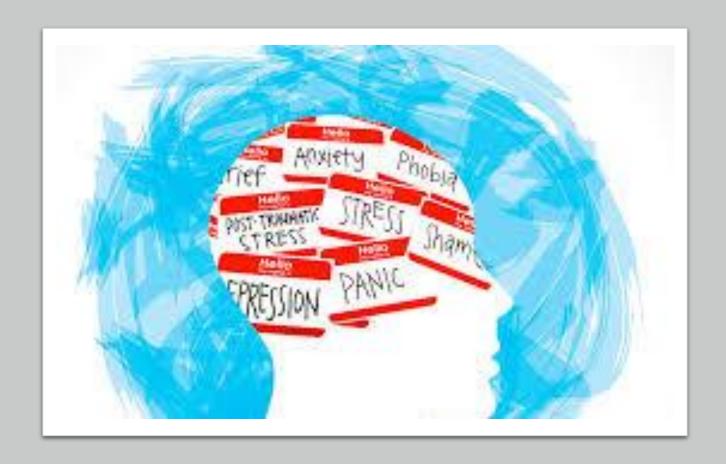


# Young people **need more support**

 Less than 1 in 3 children and young people with a diagnosable mental health condition get access to NHS care and treatment

 76% of parents say that their child's mental health had deteriorated while waiting for support from Child and Adolescent Mental Health Services (CAMHS)





Mental health in childhood has a big impact on adult mental health

1 in 3 adult mental health conditions relate directly to adverse childhood experiences



But depression may not always be easy to spot.
Why?

May start very gradually

Not a uniform presentation

The young person may not be a 'bother' in the classroom

Some symptoms may be synonymous with adolescence

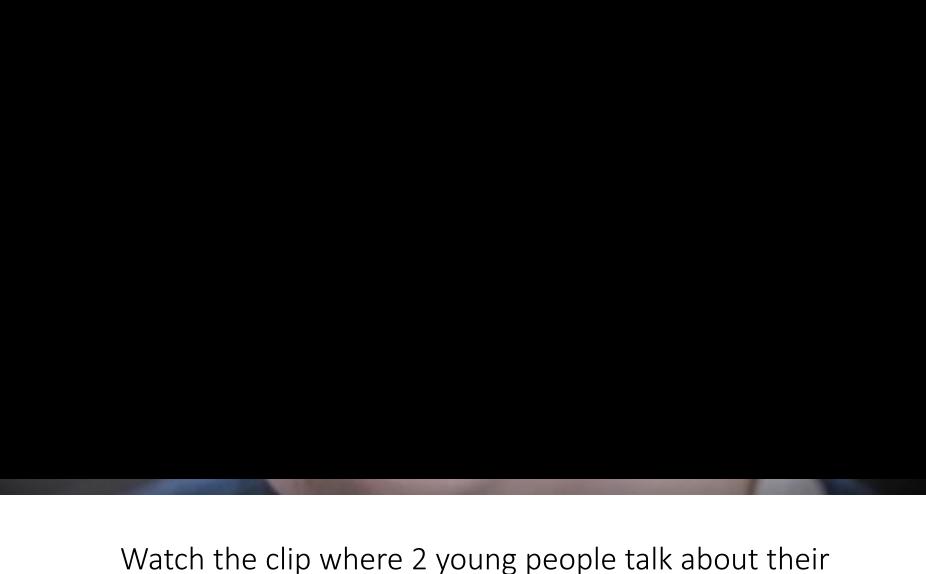
Young person may try to hide it/avoid talking about it

May be difficult for the young person to even recognise it



# Ellie, aged 16

• 'Ellie' is 16 years old, and at school studying for her GCSEs. She feels down most days and cries a lot. Ellie finds it a real struggle to concentrate on homework, and even though she still goes to school and has dance classes twice a week, she feels like she isn't enjoying anything she does. Ellie finds it hard to get to sleep, and often wakes up in the middle of the night. Ellie has lost her appetite since she started feeling low, and only eats when her mum makes her. She thinks she is a failure and things are never going to improve.



Watch the clip where 2 young people talk about their depression. Does anything surprise you about what they say?



Symptoms of depression

- What are your experiences of adolescent depression?
- What are the signs and symptoms?

# 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 decisons



Appetite and weight loss



Persistent sad, anxious or empty mood





Signs of depression in adolescence

- Easily irritated
- Sadness (with or without crying)
- Anxiety
- Temper outbursts and/or violent episodes
- **Self-critical** remarks
- Sleeping too little or too much
- Little or no **appetite**, or eating too often



Signs of depression in adolescence cont.

- Withdrawal from friends and family
- Loss of interest in activities usually enjoyed (including school activities)
- Feelings of fear (even if there is no conscious reason)
- Increased use of alcohol/drugs
- Worsening grades and/or missing school

## Severity

Mild

can cause the young person to feel unhappy, but won't stop him or her from leading a normal life

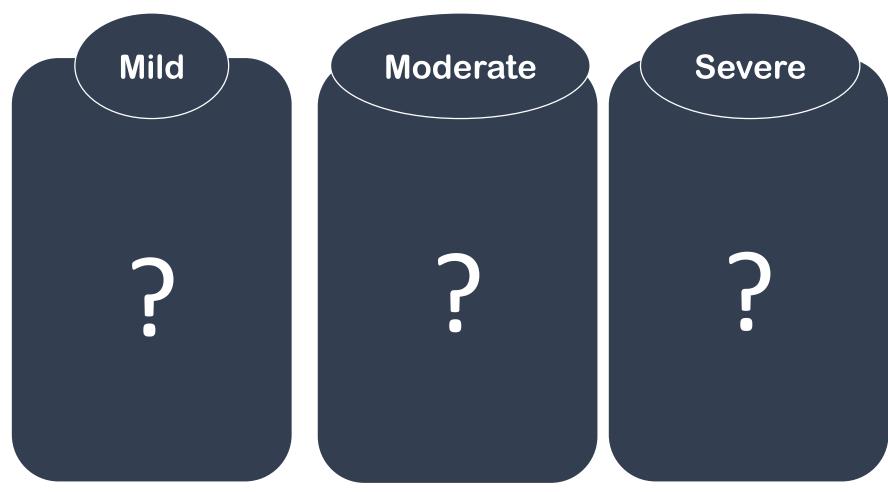
#### **Moderate**

Can have a significant impact and make the young person constantly miserable and low

#### Severe

Significant impact on function. May have constant negative thoughts and feel like s/he isn't able to cope

## Risk – what would this look like?



# If we're using these signs, aren't all teenagers depressed?

## Clinical levels of depression

#### **CORE SYMPTOMS:**

Low mood /irritability and/or difficult in getting pleasure from usual activities (nearly every day at least 2 weeks)

PLUS: At least 4 additional symptoms

**PLUS:** Difficulties interfere with functioning (e.g school, work, friends, family)

**e.g.** sleep problems, weight loss/gain, change in appetite, suicidal thoughts, lack of energy, feelings of worthlessness, poor concentration, irritability etc

# The use of questionnaire measures

There are specific questionnaires which can be used to assess anxiety in young people.

You need to mindful of how you ask a young person to fill one in and how you use this info

What are the pros and cons of using questionnaires?





Only use these questionnaires if you are confident in their use

#### **Strengths and difficulties questionnaire**

https://sdqinfo.org/py/sdqinfo/b3.py?language=Englishqz(UK)

#### **Revised Child anxiety and Depression Scale**

https://www.corc.uk.net/outcome-experience-measures/revised-childrens-anxiety-and-depression-scale-and-subscales/

#### Additional Video clips

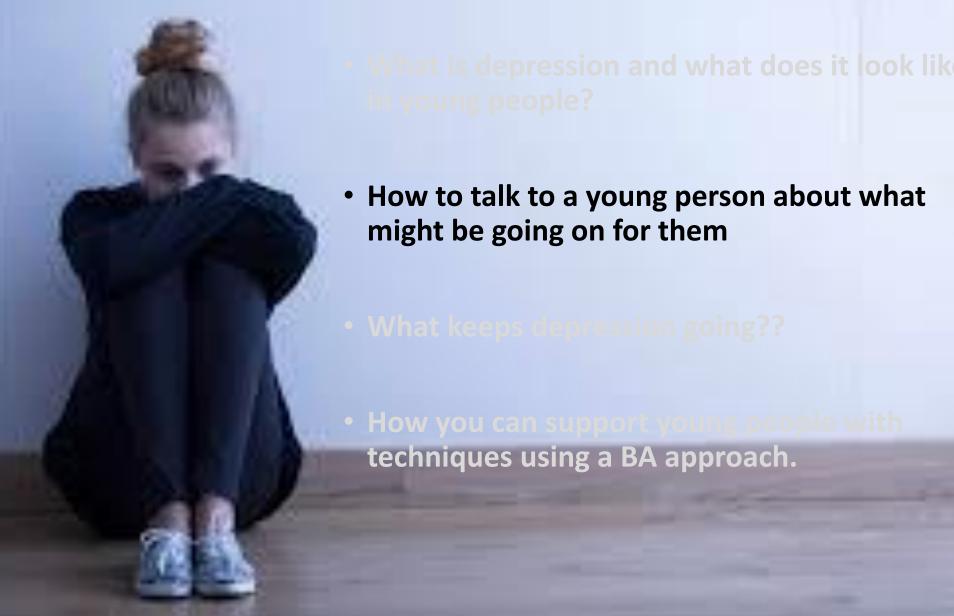
- What are the key signs of depression in these 2 young people?
- What will you take from these clips?







## Overview of the module





# What makes a good listener?

- Think of a colleague or friend who you would talk to about something troubling you.
- What makes them approachable?
- What specifically do they do and/or say that makes you think they will listen?



What do we need to be mindful of when young people open up to us?

Why is their initial contact with an adult so important?

### Always try and remember to:

Normalise what the young person is Normalise feeling and going through Praise them for sharing their difficulties. It takes guts to talk Praise about this with an adult Show genuine interest in them (not Show just as the 'depressed kid')



## What could you talk about?

## Above all, be interested in the young person and what they have to say

- General questions (how are things going at school and home?)
- More specific questions (has the young person noticed any issues with low mood or depression?)
- Targeted tailored questions (what the low mood feels like, when it started, how much it bothers then and how it interferes with life)





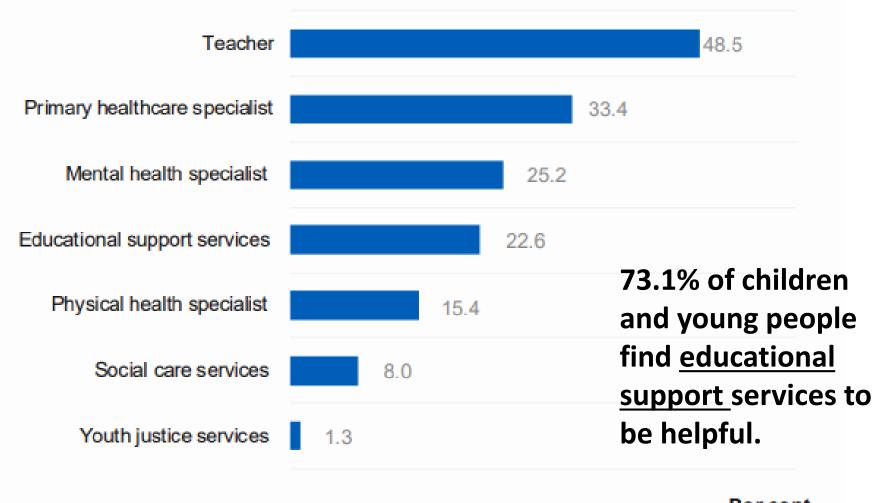


Watch the clip – What 3 key messages will you take from it?

Figure 2: Type of professional service contact in past year for mental health reason in 5 to 19 year olds with a disorder, 2017

Base: 5 to 19 year olds with a disorder

Types of professional service



Source: NHS Digital

Per cent

### Case Study: Mark

Mark has felt sad and overwhelmed for the past few weeks. He can't seem to get out of feeling this way. At school, Mark is outgoing and friendly – he plays the drums in band, makes straight A's, and is a member of several school clubs. On the outside, Mark seems like the perfect student. Lately, however, Mark has been avoiding his friends and skipping band practice. His mother worries that something is wrong with him, because Mark has not been eating much and gets very upset with her when she confronts him about this.



Case Study: Mark

How might you approach Mark?

What would you do or say?

What should you be mindful of?



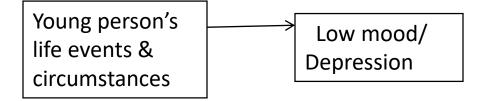
### Overview of the module

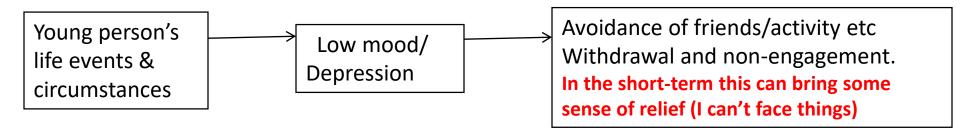


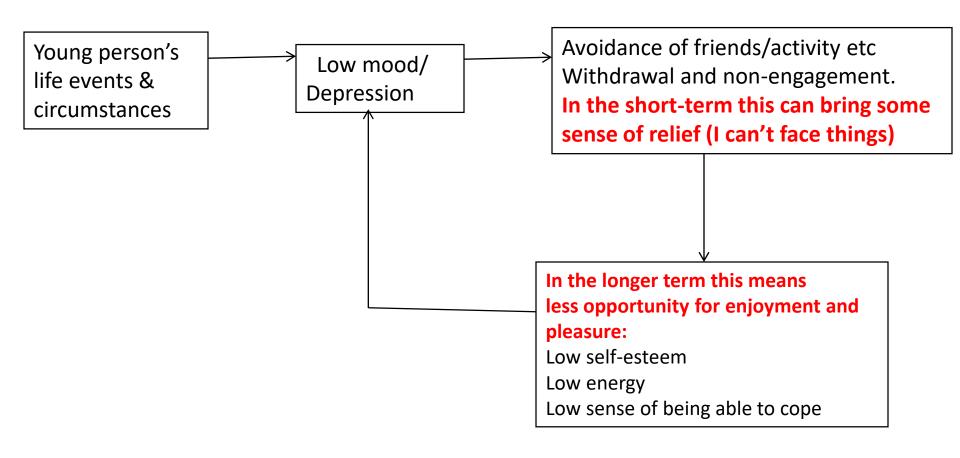


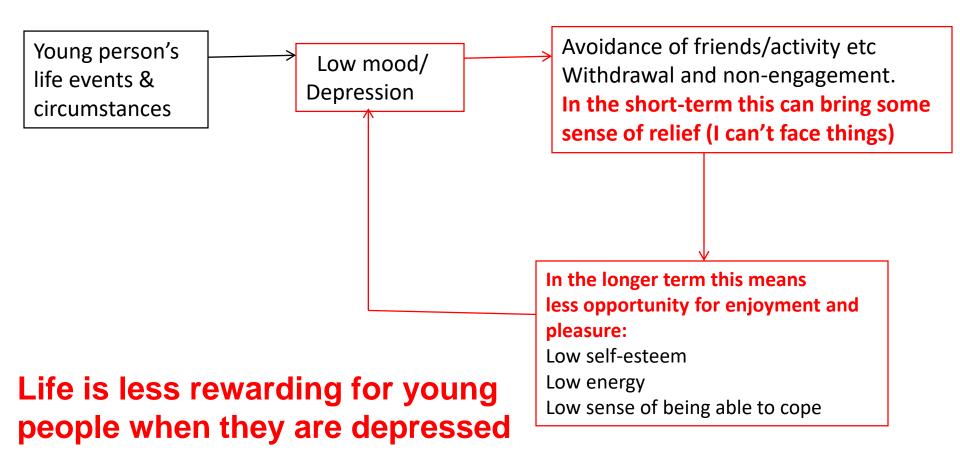
Think of a time when you've felt down or low.

How does your mood affect your behaviour and vice versa?









## Another way to think of it...





## Another way to think of it...



Withdrawal/inactivity is a natural response to feeling low. However, this plays a crucial role in maintaining low mood

Important point is to change behaviour *first*, rather than wait until you feel more motivated and less depressed

Sometimes, the key to helping young people change how they feel is to help them change what they do

BA is about helping young people to change what they do (to change how they feel)



These techniques may not be appropriate if the level of depression is moderate or severe (where more specialist help is required)

### When is it appropriate to try BA techniques?

Mild ?

can cause the young person to feel unhappy, but won't stop him or her from leading a normal life

Moderate ?

Can have a significant impact and make the young person constantly miserable and low

Severe ?

Significant
impact on
function. May
have constant
negative
thoughts and
feel like s/he
isn't able to cope



**HOW** you support the young person is crucial

### How NOT to do it.....

### Just snap out of it!



### How NOT to do it.....



# How you can help

- 1. Notice if they are struggling
- 2. Talk to the young person about their difficulties
- 3. Psychoeducation (the depression cycle)
- 4. Help them to think about what they currently do
- 5. Help them to plan and do more offer encouragement
- 6. Review things and seek additional support when needed



# How you can help

#### 1. Notice if they are struggling

- 2. Talk to the young person about their difficulties
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# When supporting a young person, please remember:



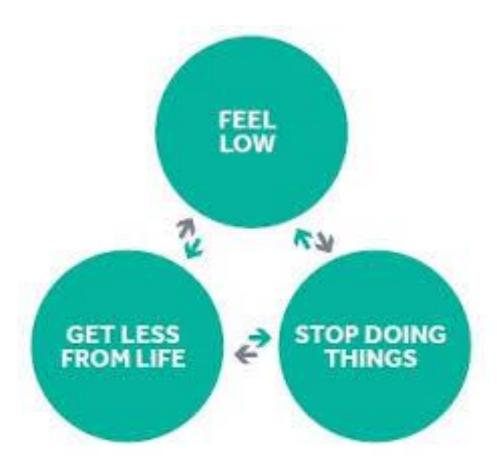
- In many cases the adolescent won't be actively seeking help and may feel embarrassed or reluctant to talk
- The young person may be reluctant to change if this involves going out of their comfort zone
- The young person may be reluctant for you to involve parents/carers

# How you can help

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### Psychoeducation

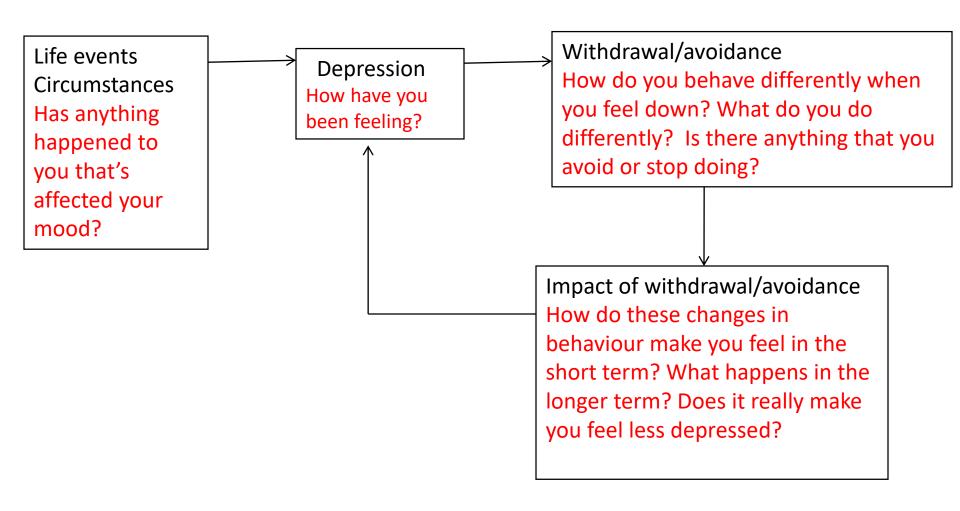


Explore what is going on for the young person – what do they do (or avoid doing) when they are feeling low?

What impact does this have in the shorter term? And longer term?

Explain the rationale for Behavioural Activation as a means of 'getting your life back'

## Psychoeducation





A useful analogy....

# How you can help

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## Generate activities to try



WHAT matters to the young person? WHO matters to the young person?



# Examples of activities

#### **Caring for family members**

- Help my mum cook dinner
- Babysit for my sister's children once per week

#### Being an attentive friend

- Text my friend.
- Ask my friend about their week (what happened)



## Examples of activities

#### Caring for my boyfriend/girlfriend

- Make special plans with him/her
- Tell him/her that I care about them
- Buy or make him/her a surprise gift

#### Find out about the world around me

- Watch the news on TV
- Talk about current events with my parents



## Examples of activities

#### **Being active**

- Take the dog for a walk
- Play a game of football on Saturday

#### Being physically healthy

- Eat home-cooked meals
- Go for a run once a week

### Talking to someone about problems and feelings

- Ask a friend round
- Write in a journal



## Scheduling activities

Once the young person has thought of an activity to try, help them to plan in advance when (day and time) they will try and do it. Write it down.

- Start with the easiest activities
- Break things down into smaller tasks
- Try to anticipate difficulties and problem solve



Watch the following clip

- How does the staff member elicit possible activities?
- Do they anticipate difficulties and problem solve?
- What goes well?
- What goes less well?

# How you can help

- 1. Notice if they are struggling
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Be aware that the young person may run into problems

Try and help the young person to identify if they are avoiding things

Think about if anything is making them feel better in the short term but worse in the long term

Think about referral (if necessary)

Reviewing progress

Try to problem solve together – what's been difficult and how can it be made easier?

Has there been any impact on mood?

# NICE National Institute for Health and Care Excellence

Following a period of up to 4 weeks of watchful waiting, offer all children and young people with continuing mild depression and without significant comorbid problems or signs of suicidal ideation individual non-directive supportive therapy, group cognitive behavioural therapy (CBT) or guided self-help for a limited period (approximately 2 to 3 months). This could be provided by appropriately trained professionals in primary care, schools, social services and the voluntary sector or in tier 2 Child and Adolescent Mental Health Services (CAMHS).



### When to refer to CAMHS:

- When there is depression with risk in another family member
- Moderate or severe depression
- Reoccurrence after recovery
- Active suicidal ideation/risk
- Unexplained self-neglect
- Frontline intervention has not worked



If the referral is urgent it should be initiated by phone so that CAMHS can advise of best next steps

Before making the referral, have a clear idea of the mental health concerns including the <u>impact</u> of the difficulties.

You must also be able to provide evidence to CAMHS about what intervention and support has been offered to the young person by services and the impact of this



# What is achievable for you?

- Notice if they are struggling
- 2. Talk to the young person about their difficulties
- 3. Psychoeducation (the depression cycle)
- 4. Help them to think about what they currently do
- Help them to plan and do more offer encouragement
- Review things and seek additional support when needed



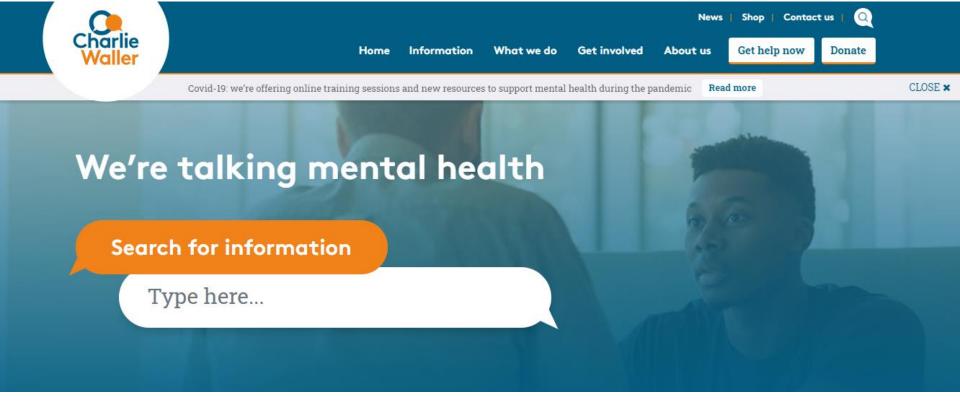


CAN YOU THINK OF THREE THINGS
THAT YOU KNOW NOW THAT YOU
DIDN'T KNOW BEFORE THIS
SESSION?



CAN YOU THINK OF ONE THING THAT YOU WILL DO DIFFERENTLY AS A RESULT OF THIS SESSION?





# charliewaller.org

# E-learning



### Advice and information for parents



## Low mood and depression

### About depression

Coping with different emotions is part of everyone's life. We all feel happy and sad at different times. Feeling sad can be a natural and normal response to what is happening in our lives. Mostly, the passing of time, life changes and the support of those around us help these feelings go away. Depression is when sadness and low feelings do not go away, overwhelm a person and stop them from doing the things they normally do.

Things that can cause children and young people to become depressed include: family conflicts; divorce or separation; the death of someone close to them; feeling rejected or left out; problems with school work or exam pressure; changing school or moving home; friendship problems; issues relating to sexual identity or gender; physical illness in themselves or a carer; low self-esteem; bullying; abuse; poverty and homelessness; a family history of depression.

### The symptoms of depression

Depression in young people is not always the easiest problem to spot or get them to talk about. Some children can talk about feeling unhappy, but others are only able to show how they feel through the way they behave. Signs of depression may include:

- Finding it hard to concentrate, losing interest in schoolwork and play
- Refusing to go to school or playing truant
- Disruptive behaviour at school, bullying, stealing or doing other things that lead to them being punished
- . Constantly complaining of feeling bored or lonely, even when they have friends
- · Irritability and moodiness beyond what is normal for your child
- Tearfulness
- · Defiance or violent outbursts
- Lack of confidence and blaming themselves if things go wrong
- · Becoming very withdrawn
- · Self-injury, drinking or taking drugs to excess
- Inappropriate sexual behaviour
- Sleeping very little or too much
- Regressive behaviour such as bedwetting

### Younger children and depression

If your child has been displaying some of these signs for a while, talk to them about their troubles, however small they may seem to you. After that, seek help as early as you can. Your GP is the best starting point, and talk to others who know your child well – family, friends, school – to see if they have also noticed changes and signs.

https://youngminds.org.uk/media/3953/depression-and-low-mood-updated-dec-2019.pdf

# www.andyresearchclinic.com



# futurelearn.com

**ONLINE COURSE** 

# Understanding Depression and Low Mood in Young People

Understand how to recognise depression and low mood in teenagers and learn how to help.

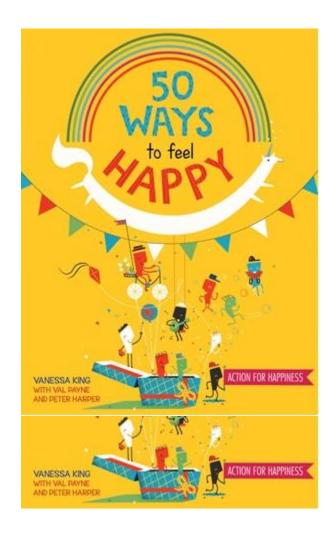


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# E-learning





http://www.actionforhappiness.org/50-ways