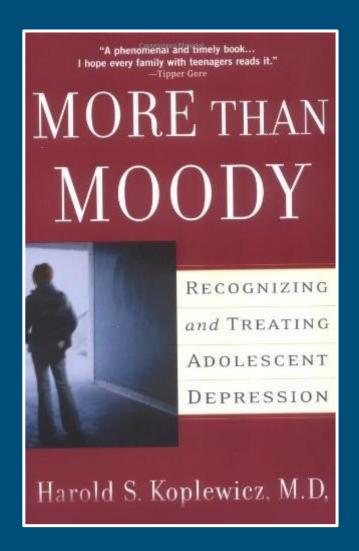


More Than Moody

How to understand teen depression and raise resilient and secure kids



Transforming Children's Lives



The Child Mind Institute is dedicated to transforming the lives of children and families struggling with mental health and learning disorders by giving them the help they need to thrive.

We've become the leading independent nonprofit in children's mental health by providing gold-standard care, delivering educational resources to millions of families each year, training educators in underserved communities, and developing tomorrow's breakthrough treatments. **Together, we truly can transform children's lives.**



Our Mission Areas: Care, Education, Science

The Child Mind Institute is the leading independent nonprofit in children's mental health, operating three Mission Areas that work together for greater impact.

Care



Education



Science



Our clinicians provide goldstandard, evidence-based treatment to thousands of kids annually through our clinical centers and in-school programs. We deliver free resources to millions of families and training to hundreds of educators each year, so more kids get the help they need.

Our researchers and engineers are uncovering the causes of mental health and learning disorders to develop tomorrow's breakthrough treatments.





What's new at the Child Mind Institute?

What we're talking about today

- Why are we seeing so many depressed teenagers
- What is typical "moodiness" vs. depression
- When to be concerned about what you are seeing
- The basics of Scaffold Parenting



Prevalence of Depression

- About 20% of teens experience depression before they reach adulthood, and 30% of teens with depression also develop a substance abuse problem.
- 15% of college students meet the clinical criteria for depression; less than half of them receive treatment.
- Depression is more prevalent in teens than in children or adults.
- Untreated depression is the number one cause of suicide, and yet less than 33% of teens with depression get help.



Moodiness vs. Depression

- Depression is **not** just a bad mood depression lasts longer and affects more than just mood
- Distinguishing differences
 - Duration How long have the symptoms been present?
 - **Severity** How intense do the symptoms seem?
 - Domains Are they having trouble in several areas?



Symptoms of Depression in Teens

Frequent Feelings of Sadness

Irritability, Anger, or Hostility; Acting Out

Changes in Eating and Sleeping Habits

Tearfulness or Crying Frequently

Feelings of Worthlessness, Guilt, Shame, Helplessness or Hopelessness

Withdrawal From Friends and/or Family

Loss of Interest in Activities Previously Enjoyed

Fatigue or Lack of Energy/Motivation

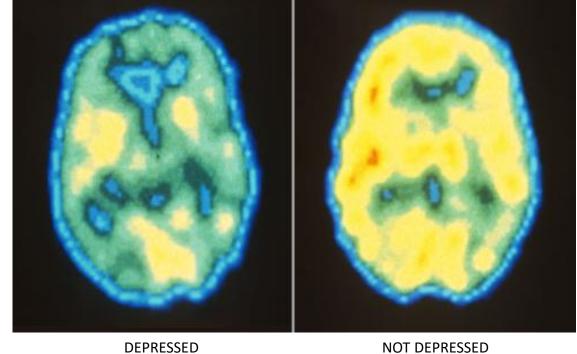
Difficulty
Concentrating,
Diminished Academic
Performance

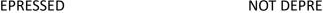
Thoughts of Death/Suicide



Neurobiology of Depression

- Physical changes in brain structure
 - Hippocampus
- Neurotransmitters
 - Depressed serotonin
- Hormonal changes
- **Depression** is real, common, and treatable.









Suicide, Let's Talk About It

Suicide in Adolescents

- Second leading cause of death in children and young adults aged 10-24
- Over 6,000 youth suicides every year (age 10-24)
- Gender differences
 - Females attempt suicide more frequently
 - Males complete suicide more frequently (4 times more than females)
- American Indians and Alaska Natives (AIAN) have the highest completion rates of suicide, followed by White adolescents
- Nearly half of LGBTQIA students report having considered suicide
- 100-200 suicide attempts per completion
 - Between 30-50 percent of those who have attempted reattempt
 - More than 50 percent of attempters fail to attend or complete treatment



Risk Factors for Suicide

Protective Factors for Suicide

- Mental illness or substance abuse
- Previous suicide attempts
- Firearms in the home
- Parent depression or mental illness
- Non-suicidal self-injury
- Exposure to the suicidal behavior of another
- Sexual orientation
- Physical or sexual abuse
- Academic difficulties
- Physical disease and injury
- Social milieu/media

- Family connectedness
- School connectedness
- Positive peer relationships
- Reduced access to firearms
- Academic achievement
- Increased self-esteem
- Goals for the future
- Reasons for living



Worried a Child Is Thinking About Suicide?

What You Can Do

Assess for safety.

- Don't be afraid to ask. Be direct. "Are you thinking about killing yourself?"
- Show concern and stay calm
- Encourage them to express their feelings
- Show them that you understand them from their point of view
- Be non-judgmental. Avoid lecturing or convincing them to live
- Don't try to offer quick solutions you're not going to fix the problem immediately
- Offer hope that options other than suicide are available
- The best thing to do is listen.

Steps to keep your child safe.

- Remove weapons, knives, razors, pills, or any other item your child could use to harm themselves
- Monitor your child
- Seek mental health care for your child; encourage them to contact their therapist
- Call 911/go to the nearest ER if needed

24/7 Suicide and Crisis Lifeline Call or text 988





Let's Talk About Parenting

Parents are the scaffold that provide structure and support.

- ▶ Helicopter parenting
- ▶ Concierge parenting
- Snowplow parenting



What do they have in common? "Swooping in!"



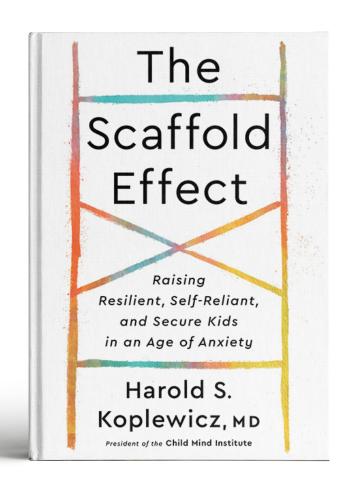
Introducing the "Scaffold Effect" Model

Parents are the scaffold that provide structure and support.

Parents are there to protect and guide, but they shouldn't get in the way of learning and risk-taking.

Good parenting is *not* about rescuing kids.



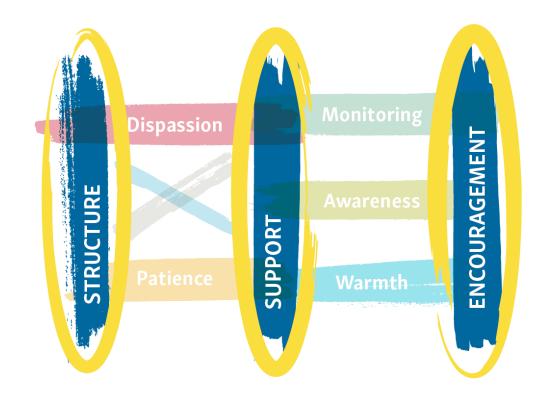




Scaffolding Pillars

These pillars are the framework of scaffold parenting. By relying on these three pillars, you will boost your kids' confidence, self-esteem and coping skills.

- ▶ Structure
- ▶ Support
- ▶ Encouragement

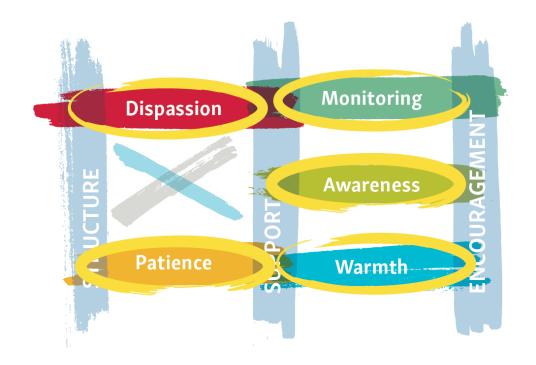




Scaffolding Planks

Stand on these "planks" to support your kids as they develop.

- ▶ Dispassion
- Patience
- Monitoring
- Awareness
- ▶ Warmth





Lay a Solid Foundation

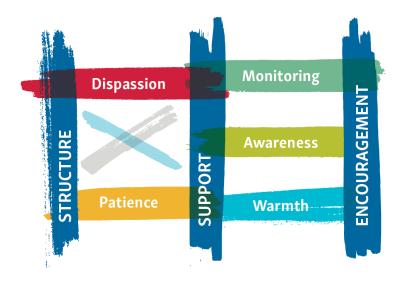
As a parent you should try to be there for your child physically and emotionally.

- Be mentally present and emotionally available
- Practice emotional regulation and being calm and kind
- Share attachment rituals

These techniques from Parent Management Training are clinically proven.



- Spend nonjudgmental quality time
- ▶ Use labeled praise





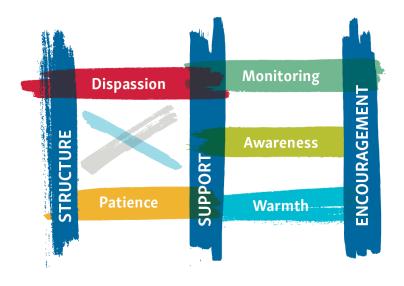
Empower Growth

Growth is a process of trying, failing, learning and trying again.

- ▶ Do less for your children
- ▶ Be supportive
- Be encouraging

Kids should spend time in both the "comfort zone" and the "growth zone."







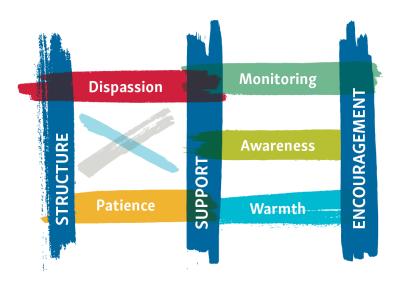
Build Strength

To make kids stronger promote courage, resilience, confidence and tenacity.

- Delay gratification
- ► Create a supportive environment
- Step away

Strength is built over time, like muscle. Make sure kids get plenty of practice.







Support Unconditionally

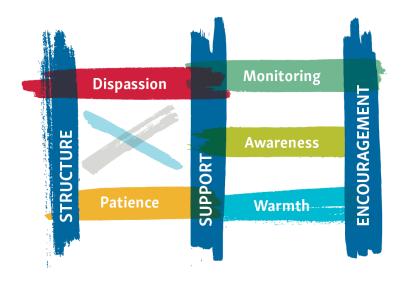
Accept your child for who they are

- Be honest and accepting
- Promote decisionmaking
- Join in their interests

- Recognize their assets and deficits objectively
- Help reshape deficits into assets

When your child explores his own happiness, try not to sound judgmental!







Taking Your Scaffold Down

Eventually, your child will be ready to stand on her own. Signs a child is ready include:

- Making wise decisions
- Solving problems
- Setting and reaching goals
- Being self-aware

- ► Having emotional intelligence
- Standing up for herself
- Getting things down on her own
- Seeking out appropriate help on her own
- And remember...the scaffold can always go back up!





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