Dealing with Depression

- I will be resilient during difficult times.
- I will seek help if I feel depressed.
- I will use suicide prevention strategies when appropriate.

The National Institutes of Mental Health (NIMH) estimates that 3 to 5 percent of teens experience clinical depression each year. This lesson discusses life crises, depression, and suicide prevention.

What You’ll Learn

1. Discuss emotional responses used to cope with life crises. (p. 109)
2. Differentiate between kinds of depression, possible causes, symptoms, and treatments for depression. (p. 110)
3. Explain why being depressed puts teens at risk. (p. 112)
4. Identify strategies for coping with depression. (p. 113)
5. Identify warning signs for suicide and discuss suicide prevention strategies. (p. 114)
6. Discuss eight steps teens might take to be resilient. (p. 118)

Why It’s Important

Teens who are depressed often fail to seek help. If their depression goes untreated, they are at risk for developing addictions, being ill, and making suicide attempts.

Key Words
- life crisis
- minor depression
- major depression
- cognitive behavior therapy
- antidepressant
- suicide
- parasuicide
- cluster suicides
- suicide prevention strategies
- resiliency

Writing About Depression
Suppose that lately one of your friends has seemed distracted. She has stopped hanging out with your group of friends and always looks sad when you see her. She says she is fine, and that she just does not want to socialize with anyone right now. What do you do? After you read the information about depression on page 110, write what you would say to your friend in your health journal.
Sometimes life is difficult. Events happen over which you have no control—a loved one dies; a parent loses a job; an earthquake, fire, or tornado destroys your property. You might be in a car accident or turn on the television and view tragic world events. You might experience disappointments—you don’t make an athletic team, your parents argue, your boyfriend or girlfriend breaks up with you. A life crisis is an experience that causes a high level of stress.

How to Cope with a Life Crisis

Most people respond to life crises by working through a series of five emotional responses. The five responses are listed below. A person has worked through a life crisis when he or she accepts what is happening, adjusts, and bounces back. This does not mean that he or she likes what has happened.

Emotional responses The following example illustrates how a teen might work through a life crisis. Suppose a teen’s parents tell her they are getting a divorce. She denies that her parents will go through with the divorce. Then, her father moves out of the family home. She responds by being angry about what is happening. She might even act out her anger by breaking family rules.

Next, she responds by bargaining, or making promises, hoping it will change the outcome. Her promises might be motivated by guilt. She might feel she is partially at fault for her parents’ failed marriage.

She then responds by being depressed when she recognizes nothing she can say or do will change the outcome. This period of sadness is necessary. Sadness helps her feel the pain and experience the loss of family life as she knew it. After a period of time, she begins accepting the fact that her parents are no longer together. She makes adjustments and bounces back.

This is only one example of a life crisis. But, the five emotional responses are the same responses that apply to other life crises. People of all ages experience these emotional responses. If you experience a life crisis, remember these emotional responses. Learning to work through feelings during difficult times helps you become emotionally mature.

Five Emotional Responses Used to Cope with Life Crises

People respond to life crises by working through the following emotional responses:

- **Denying** or refusing to believe what is happening
- **Being angry** about what is happening
- **Bargaining**, or making promises, hoping to change what is happening
- **Accepting** the fact that an outcome is unlikely to change

Source: These five stages have been adapted from Dr. Elisabeth Kübler-Ross’s work on death and dying.
Some symptoms for depression are listed below. **Minor depression** is a mood disorder accompanied by feelings of hopelessness, sadness, or helplessness. It is diagnosed with two to four of the symptoms listed below that last for at least two weeks. Minor depression might go away, or it might become chronic. This means a teen continues to have mild depression. **Dysthymic disorder** is a long-lasting form of depression. With this disorder, an adult displays two or more of the symptoms listed below for the majority of days for two or more years; for children and teens, the time frame is one or more years.

### Major depression

**Major depression** is a mood disorder accompanied by long-lasting feelings of hopelessness, sadness, or helplessness. A teen is diagnosed as having major depression if he or she has at least five of nine general symptoms that last for at least two weeks. Some teens experience something called double depression. They have dysthymic disorder with periodic bouts of major depression.

### What Causes Depression

**Inability to cope with a life crisis**

Some teens are unable to get through life crises that most teens can cope with, such as the loss of a boyfriend or girlfriend, or moving to a new neighborhood. Some teens experience severe life crises, such as being a victim of crime, or being in a natural disaster, such as an earthquake, flood, or tornado. When teens cannot cope with a life crisis, they may develop a form of depression. Some teens develop post-traumatic stress disorder (PTSD) after experiencing a life crisis. Teens who have PTSD often are depressed.
**Changes in brain structure** Changes in brain structure can increase risk for depression. During the teen years, the brain is still developing. Between the ages of 14 and 17, there is a “pruning” or clearing of the gray matter. The gray matter consists of closely packed and interconnected nerve cells. It is found in the outer layers of the cerebrum. The cerebrum is the largest part of the brain and controls the ability to memorize, think, and learn. Gray matter also is found in some regions deeper within the brain. The “pruning” process involves clearing out unused brain-cell connections from the gray matter. This clearing process prepares the brain for even deeper brain-cell connections. When this process is complete, teens can focus more intently and learn things more deeply. Scientists have learned that there is a significant increase in mental disorders, including depression, when this clearing-out process takes place. Research is being conducted to find out why.

**Genetic predisposition** The inheritance of genes that increase the likelihood of developing a condition is called **genetic predisposition**. Some teens may be genetically predisposed to having depression. The closer a teen is connected to a biological family member who is depressed, the greater the likelihood that the teen may become depressed. For example, a teen whose mother suffers from depression is more at risk than if the teen’s aunt suffers from depression.

**Low serotonin levels** A chemical that is involved in controlling states of consciousness and mood is **serotonin**. Serotonin levels fluctuate and are not the same in all people. Teens who have lowered serotonin levels are more at risk for depression.

**Traumatic family events** Teens who have experienced traumatic family events are at increased risk for depression. Examples of traumatic family events might include: parents’ divorce; serious illness of a family member; the death of a family member; a parent losing a job; a family member going to jail; the murder, abduction, or sudden absence of a family member; a family member engaged in a war; or abuse by a family member (physical, emotional, or sexual).

**Physical illness and disorders** Teens who have certain physical disorders and are ill may experience depression. For example, heart disease, cancer, diabetes and stroke are related to depression. Some nutritional deficiencies, such as Vitamin B, also may increase the risk of depression.

**Alcohol and other drug use** Teens who drink alcohol and abuse other drugs have much higher rates of depression. Their brains are not yet fully developed, and depressant drugs have an even greater effect on their mood. Teens who suffer from depression and use alcohol and other depressant drugs become even more depressed.
Most teens feel down in the dumps once in a while. In many cases, they bounce back after speaking with a parent, guardian, mentor, or other trusted adult and using coping strategies for depression. But, some teens do not bounce back from depressed feelings.

**School performance** Teens who are depressed may be tired and have difficulty concentrating. This affects their ability to memorize, think, and learn. They may be apathetic and have difficulty getting motivated to do school work. School absence and poor grades are warning signs of teen depression. Teens who do poorly in school limit the options they will have in the future.

**Social isolation** Teens who are depressed often withdraw from friends. They stop participating in enjoyable teen activities, such as athletic events, clubs, and get-togethers. This can make their depression worse. Teens who are socially isolated miss the opportunity to gain social skills, which makes it difficult for them to develop and maintain healthful relationships.

**Drug addiction** Drug addiction is the compelling desire to take a drug even though it harms the body, mind, and relationships. Teens who are depressed might depend on alcohol and use other drugs to escape from problems or change their mood.

**Other addictions** Teens might depend on certain behaviors to change their mood. Some of these behaviors, such as exercising, are normally healthful and may help with depression. However, when a specific behavior is taken to extremes, it can become an addiction.

**Physical illnesses** When teens are depressed, their body’s immune system is suppressed. The immune system is less able to fight off pathogens. Teens who are depressed are more susceptible to colds and flu.

**Mental disorders** Teens who are depressed are at increased risk for having major depression in adulthood. They are also at increased risk for developing other mental disorders.

**Suicide attempts** Teens who are depressed have a sense of hopelessness and helplessness. When these feelings are coupled with other risk factors, such as drug use, eating disorders, or social isolation, the risk of making a suicide attempt increases.

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**Make the Connection**

**Addictions** For more information on addictions, see page 84 in Lesson 9.

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1. What are the five emotional responses people go through after a loss?
2. Name three symptoms of depression.
3. How can being depressed affect school performance?
Teens who are depressed usually suffer for years before they are diagnosed. Few teens who need treatment for depression actually seek help. The following are types of treatment for depression.

**Physical examination** A physical examination is needed to evaluate health status. Poor health status, such as illness, might precede depression. Depression also might precede poor health status because it is associated with symptoms such as sleeplessness and loss of appetite. Depression also suppresses the immune system, which increases the risk of illness.

**Therapy** Teens who are depressed may benefit from therapy. *Cognitive behavior therapy* is a form of psychotherapy that involves behavior therapy and cognitive therapy. Other forms of therapy, such as individual counseling or a combination of therapy and medication, also can be beneficial. Therapy can help change a teen’s hopeless and negative thinking. It can help a teen gradually resume former responsibilities and patterns of daily living.

**Medication** A physician will determine if a teen will benefit from taking prescription drugs for depression. An *antidepressant* is a drug used to relieve depression. There are different kinds of antidepressant drugs. Some antidepressants regulate serotonin levels, which play a role in regulating a person’s mood. Antidepressant drugs can take several weeks to become effective, and require medical supervision to check for side effects.

Some of the antidepressant drugs prescribed by physicians have not yet been approved by the Food and Drug Administration for use by persons under 18. However, physicians might prescribe them in what is referred to as “off-label” use. This is a common procedure for prescription drugs that are being studied. The National Institutes of Health is still studying the long-term effects of several antidepressants when used by teens. Questions have been raised about the possible risks associated with the use of antidepressant drugs. Parents or guardians and teens should discuss the risks and benefits of antidepressant drug treatment with their physician.

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**Coping with Depression**

These are strategies for coping with depression:

- Talk with a parent, guardian, mentor or other trusted adult.
- Stay connected with friends.
- Practice healthful behaviors, such as eating nutritious meals and getting exercise.
- Use anger-management skills. (Page 98)
- Practice stress-management skills. (Page 104)
- Avoid the use of alcohol and other drugs.
- Take steps to develop resiliency. (Page 118)
- Seek treatment if these strategies do not relieve depression.
The essayist and poet Joseph Addison once said, “The three grand essentials to happiness in life are something to do, something to love, and something to hope for.” Having something to do, and doing it well, gives a person a feeling of accomplishment. Having people to love gives a person the opportunity to share feelings, hopes, dreams, and disappointments. Having something to hope for gives a person a reason to live. Teens who do not have things to do, people to love, and something to hope for can be at risk for making a suicide attempt.

**What to Know About Suicide and Suicide Attempts**

**Suicide** The intentional taking of one’s own life is suicide. Some teens view suicide as a way to end depression, or as a way to escape problems. Other teens view suicide as a way to gain attention or a way to get even with those who have rejected them. But, suicide is the ultimate mistake—it cannot be undone. Suicide is never the best choice.

**Parasuicide** A suicide attempt in which a person does not intend to die is parasuicide. Parasuicide is a cry for help. Teens who make a suicide attempt are depressed, discouraged, and lack hope. They want others to know that they are in a lot of pain. Some teens who make a suicide attempt and do not intend to die are not found in time. Their cries for help end in tragic death. Without help, teens who have attempted suicide once may attempt suicide again. For this reason, a suicide attempt or talk of a suicide attempt always must be taken seriously.

If you are depressed and have thoughts about suicide, seek help. You can call 1-800-SUICIDE toll free to speak with a trained individual. You also can find a mental-health professional in your area in your local phone book. Therapy and/or medication can help. Never make a suicide attempt, even as a way to get attention. Remember, you will not have a second chance if your attempt goes too far. Talk to a trusted adult if you have suicidal thoughts.

**Cluster suicides** A series of suicides occurring within a short period of time and involving people who are connected in some way are cluster suicides. Some teens make pacts or agreements. Other teens commit suicide in response to the suicide of a friend. Teens also might consider suicide after they learn about another teen’s or a famous person’s suicide.

If you know someone who has committed suicide, talk to your parents, a guardian, school counselor or other trusted adult. You might need help working through your feelings. If you learn about a suicide of a famous person, realize that this person made the ultimate mistake. Do not copy this mistake.
What to Know About Suicidal Tendencies

Teens who attempt suicide may have had a difficult life experience, such as a breakup of a relationship, an unplanned pregnancy, or failure at school. Teens are more likely to attempt suicide if they encounter any of the following experiences.

Abuse of alcohol and other drugs People who abuse alcohol and other substances often have other risk factors for suicide, such as social problems. Also, people who abuse substances can tend to be impulsive, which also has been linked to teen suicide.

Death of a parent, parental separation, or parental divorce These events can cause extreme stress in teens. Although these events are out of the teen’s control, they may feel responsible in some way. Teens also may feel like the mental pain they are feeling will never go away.

Feelings of alienation and rejection Teens who do not have a supportive social-emotional environment and teens who feel that they have no one to talk to, are at greater risk for attempting suicide than teens who have a supportive network of family and friends.

Difficulty coping with body changes and sexuality Teens may be uncomfortable or unhappy with the changes that occur during puberty. They also may feel uncomfortable with their sexuality, and feel unable to ask questions or talk to someone about their feelings.

Depression Feelings of hopelessness or worthlessness that accompany depression also are risk factors for suicide. Although not everyone that suffers from depression attempts suicide, having depression increases the risk of suicide.

Impulsive and/or aggressive behavior Teens who are impulsive or aggressive do things without thinking them through first. They may make a suicide attempt without thoroughly thinking through the potential consequences of their actions.

Mental disorders A majority of people who have committed suicide either had a mental disorder or abused substances before they committed suicide.

How to Recognize Signs of Suicide

Teens who are thinking about making a suicide attempt often provide warning signs. By trying to warn others, they are crying out for help and hoping someone will step in and help them. Signs that a teen may be considering a suicide attempt include:

- making a direct statement about suicide, such as “I wish I was never born”
- making an indirect statement about suicide, such as “I wonder where I can get a gun.”
- having a change in personality
- withdrawing from contact with family and friends
- losing interest in personal appearance
- being preoccupied with death and dying
- using alcohol and other drugs
- losing interest in schoolwork
- giving away possessions
- talking about getting even with others
- failing to recover from a disappointment or a loss
- running away from home
- having a close friend or relative who has committed suicide

Reading Review

1. What are some causes of depression?
2. Why might a teen who is depressed be at risk for addictions?
3. What are some risk factors for suicide?
Depression is an illness that can affect both men and women at any age, or of any race, ethnicity, or economic group. It involves not only the body, but mood and thoughts as well. It is not a weakness, nor can it be willed away. People suffering from depression cannot just “pull themselves together” and recover. Depression needs to be treated with the help of health-care professionals that may include medical doctors, counselors, or therapists, all of whom work together with the patient and parents or guardians in the recovery process.

**Causes** While the exact cause of depression remains unknown, evidence that some types of depression, such as bipolar disorder, run in families indicates that genetics may play a role in the development of depressive disorders. Having low self-esteem or poor coping skills also may put people at a higher risk for developing a depressive disorder. Hormonal disorders may cause physical changes in the body that can lead to depression. Certain environmental factors can trigger the onset of depression. Depression may develop as a result of traumatic events, such as being a survivor of an attack. Stress at home, work, or school also may be involved in the development of depression.

Depression is a serious illness that should not go untreated. Some symptoms of depression were discussed on p. 110. Other signs and symptoms of depression include:

- feelings of guilt or worthlessness
- loss of interest or pleasure in activities or hobbies that were once enjoyed, such as sports or going out with friends
- thoughts of death or suicide
- difficulty making decisions
- feeling restless or irritable
- sleeping longer and more often
- experiencing other physical symptoms, such as headaches, stomachaches, or chronic pain that does not respond to treatment

Depression usually can be successfully treated with a combination of medication and therapy. The medication relieves the symptoms of depression, while therapy helps the patient learn coping mechanisms for dealing with life’s problems. Therapy can help the patient move away from the negative thinking and behavior that often accompanies depression. Exercise has been shown to relieve symptoms of depression in some patients. A mental-health professional may suggest a patient include exercise along with other treatments.

Visit [www.glencoe.com](http://www.glencoe.com) to research more information about depression.

- What should you do if you suspect a friend or family member may be suffering from depression?
- How do medications, such as selective serotonin reuptake inhibitors (SSRIs), work to relieve the symptoms of depression?
- Research current statistics on depression. How often does depression occur in men, women, teens, children, and the elderly?

Use a software program to create a pamphlet about depression, including places to get help.
Techniques that can be used to help prevent a person from thinking about, attempting, and completing suicide are suicide prevention strategies. If you know someone that is contemplating suicide, there are ways that you can help. Contact a suicide hotline for more information about ways to help a person who is thinking about suicide.

What to Know About Getting Help

**Listen.** If friends share their thoughts of suicide with you, listen to them and encourage them to talk to you. Use active listening skills. Remind them that suicide is not the answer, and point out the future events that they will miss if they commit suicide. Tell them how devastated their family and friends, including you, will be.

**Encourage them to seek help.** Tell your friends that there are ways that depression can be treated. Remind them that their depressed feelings may not go away on their own. With treatment, they may be able to start enjoying life again. Refer them to a suicide hotline, where they can talk to a trained professional.

**Tell a trusted adult.** Do not promise your friends that you will keep their suicidal thoughts a secret. Tell your friends that you care too much about them to keep their secret. They may be upset at first, but remind them that you care and want them to continue to be a part of your life.

**Suicide Prevention Strategies**

If you are concerned about a teen:

- look for warning signs when a teen is depressed
- listen without giving advice
- take a suicide threat seriously
- ask if the teen has a specific plan and means to follow through
- do not be sworn to secrecy
- call a parent, a guardian, or other responsible adult immediately
- stay with the teen until professional help arrives
“When the going gets tough, the tough get going.” “Tough times never last, but tough people do.” These sayings describe people who demonstrate resiliency. **Resiliency** is the ability to adjust, recover, bounce back, and learn from difficult times. Some teens are more resilient than others. Being resilient is a powerful protective factor. A **protective factor** is something that increases the likelihood of a positive outcome. Being resilient helps you cope with life crises. It helps prevent depression and suicide. If you have not been resilient in the past, you can work to increase your resiliency.

**How to Be Resilient**

**Work on your relationships with members of your family.** You are working on skills to gain independence from your parents or guardian. Yet, at the same time, you need to remain close to them. Feeling connected to family members gives you added strength during tough times. Family members can comfort you. They also can offer suggestions for coping with life crises. Do not wait for tough times to happen. Spend time talking to your parents or guardian and other family members every day. Share what is happening in your life—your successes and your difficulties. Be vulnerable and share fears and insecurities.

**Develop a close relationship with a mentor.** A responsible person who guides another person is a mentor. A coach, member of the clergy, teacher, counselor, principal, guardian, aunt, uncle, grandparent, or other responsible adult can be a mentor. Spend time with the person you choose as a mentor. Discuss difficult situations with your mentor. Get suggestions on ways to handle life crises. When you need someone to talk to, or are looking for advice, a mentor can help you get through difficult times. You might want to keep a journal of your daily successes and difficulties and discuss your journal with your mentor.

**Choose friends who are supportive and who have responsible behavior.** Select your friends wisely. Friends who choose responsible behavior will encourage you to make wise choices during difficult times. They will listen to your feelings. They might think of options you do not. Stay away from teens who behave in harmful ways.
When you experience life crises, they might encourage you to participate in harmful behaviors.

**Do not put off dealing with your feelings when a difficult situation arises.** At first, you may respond to a difficult situation by denying what is happening. Do not get stuck in a state of denial. Get in touch with your feelings. Express any anger you feel in healthful ways. If you feel sadness or depression, share these feelings with your parents, guardian, mentor, or other trusted adult. Remember, tough times do not go away by pretending nothing is wrong. Face up to what is happening. Work through your feelings to gain acceptance and take responsible actions.

**Avoid choosing harmful behaviors as a way of coping with tough times.** You cannot adjust and bounce back from tough times by choosing harmful behaviors. Drinking alcohol or using other harmful drugs will interfere with your ability to make responsible decisions. Other addictive behaviors, such as gambling, smoking, and eating disorders will interfere with your ability to cope. These behaviors also are harmful to health. Stealing, lying, or breaking rules and laws will get you into trouble. Remember, harmful behaviors make the situation worse.

**Ask for support when you need it.** Reach out and ask for help during tough times. Some people do not ask for help, for fear they will look weak. Others feel that asking for help will show they are not in control. However, people who ask for help or support show that they are in control and are strong enough to know when to turn to another for support or assistance. People that ask for help or support can deal with problems and move on. If they had not asked for help or support, they still may have been suffering from the problem. Willingness to ask for help is a key ingredient in developing resiliency.

**Discuss available support groups with a parent, guardian, mentor, or other responsible adult.** A group of people who help one another recover from an addiction, a particular disease, or a difficult situation is a support group. Sometimes it is helpful to be in a group with other teens who have experienced the same life crisis. You will not feel like you are the only one who has ever felt the way you do. Other teens can share their experiences with you. They can reassure you that they made it through a specific life crisis and you will too. Most support groups have guidelines concerning privacy. Those who attend agree not to share anything from the meeting outside the group.

**Be involved in school activities.** Don’t withdraw from friends or stop participating in school activities. Being involved is an important way to feel connected to others. Being a member of a school team or participating in an activity gives you a sense of belonging.
Activity: Using Life Skills

Accessing Valid Health Information, Products, and Services: Accessing Hotlines for Help

Most communities have suicide prevention or crisis intervention hotlines. A person calling the hotline can get immediate help in dealing with suicidal thoughts or an emotional crisis. Hotlines are an emergency health service. Here are some points that will help you use this service.

1. **Identify health information, products, and services.** Most hotlines are staffed by experienced volunteers, who are trained to listen to people in distress.

2. **Many hotlines focus on specific problems, such as suicide or rape.** Any information shared with hotline staff will be kept private. Callers do not need to give their name or other identification to a hotline counselor.

3. **Hotlines give a person who is depressed or suicidal a chance to talk.** Talking to someone about negative feelings that seem overwhelming can make a difference. They can provide comfort and perspective.

4. **Locate health information, products, and services you need.** Some hotlines, such as 1-800-SUICIDE (1-800-784-2433), are national. You can call these numbers toll-free. National hotlines can direct you to treatment services in your area. Other hotlines are offered by local hospitals, mental-health centers, and community organizations.

5. **Evaluate health information, products, and services, and take action when health information is misleading and/or health products and services are unsatisfactory.** To learn more about crisis hotlines that are available in your community, create a crisis resource handbook. List the name of the hotline, its phone number, and a few details about the service. To gather information for the handbook, check your local phone book. Make multiple copies of your crisis resource handbook. Place them at locations in your school and community where other teens will see them.

**Practice healthful behaviors.** Remember the powerful mind-body connection. Your thoughts and emotions can trigger certain body responses. For example, the body’s immune system might be suppressed during stressful times. Be proactive. Get plenty of exercise. Limit sedentary activities. Eat healthful foods. Avoid eating to manage stress. Practice stress-management strategies. Get plenty of sleep, and pay attention to grooming to keep a neat and clean appearance. Wear a favorite outfit and try to look your best.

**Volunteer to help others.** Acts of giving stimulate the brain to release endorphins. Endorphins are substances produced in the brain that create feelings of well-being. The release of endorphins helps produce a state in which a person feels increased energy, relaxation, and improved mood as a result of giving service to others. During tough times, it is helpful to have increased energy, relaxation, and improved mood. Helping others who are less fortunate can help you put your own troubles in perspective.

**Make the Connection**

**Volunteering** For more information on being a volunteer, see page 66 in Lesson 7.
Key Terms Review

Complete these fill-in-the-blank statements with the lesson Key Terms on the left. Do not write in this book.

1. _____ is therapy that helps teens identify and deal with sources of depression.
2. _____ is an experience that causes a high level of stress.
3. _____ are a series of suicides occurring within a short period of time involving people who are connected in some way.
4. _____ is the ability to adjust, recover, bounce back, and learn from difficult times.
5. _____ is a mood disorder accompanied by mild feelings of hopelessness, sadness, and helplessness.
6. A(n) _____ is a drug used to relieve depression.
7. _____ is a suicide attempt in which a person does not intend to die.
8. _____ are techniques that can be used to help prevent a person from thinking about, attempting, and completing suicide.
9. _____ is a mood disorder accompanied by long-lasting feelings of hopelessness, sadness, and helplessness.
10. _____ is the intentional taking of one’s own life.

Recalling the Facts

11. What are the five stages of emotional response to life crises?
12. In what ways does being depressed put teens at risk?
13. What are strategies for coping with depression?

Critical Thinking

19. Discuss why a teen might consider attempting suicide after learning of a celebrity’s suicide.
20. Why might a person with depression have changes in appetite or weight?
21. Why might a teen think that he or she is getting even with someone if he or she attempts suicide?
22. How does having a support system promote resiliency?

Real-Life Applications

23. Why might two people react differently to the same traumatic event?
24. How do you think exercise helps relieve symptoms of depression?
25. Why might a person who is depressed stop taking his or her medication a week or two after starting it?
26. Why do you think suicide rates are highest among the elderly?

Activities

Responsible Decision Making

27. Write You are feeling down because you did poorly on an exam. A classmate suggests that you drown your sorrows with a six-pack of beer. Write your response in your journal. Refer to the Responsible Decision-Making Model on page 61 for help.

Sharpen Your Life Skills

28. Advocate for Health Contact a local mental-health agency and find out how it is working to decrease the stigma associated with depression and suicide. Create an information packet on depression and suicide.