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Dealing With Depression

Antidepressant Skills for Teens

Mheccu

BRITISH COLUMBIA | Ministry of Children and Family Development

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Dealing with Depression is based on the experience of the authors and on scientific research about which strategies work best in overcoming depression. Also, because strategies useful for adults may not be useful for adolescents, depressed and non-depressed teens helped in the development of this guide.

Dealing with Depression is intended for:

- teens with depressed mood
- concerned adults who want to help a depressed teen
- other teens who want to help a friend or family member

This book is meant to provide teens with accurate information about depression. It is not a psychological or medical treatment, and is not a replacement for treatment where this is needed. If expert assistance or treatment is needed, the services of a competent professional should be sought.

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About Dealing With Depression

Depression is an extreme low mood that lasts a long time and makes a person feel sad, irritable or empty. Many people, including many teens, have suffered in this way. A depressed person:

- has much less energy to do activities
- feels like nothing matters.
- sees life in a negative way.
- feels like it will never get better

But **depressed people do get better and depression does end**. There are effective treatments and self-help skills to deal with depression. Health care professionals give depression treatments, but you can learn self-help skills and apply them to your own life. This guide teaches a set of antidepressant skills you can use to overcome depression. Sometimes the skills can be used on their own, when the depression isn't too severe. Sometimes they have to be used along with treatments by professionals.

Dealing with Depression is meant for teens who have been coping with depressed mood. Some of the things in this guide will make more sense to younger teens and some will make more sense to older ones. But check it out for yourself. Decide which parts of this guide make sense for your life. You might start by skimming it and reading the stuff that is most interesting to you. Take a look at the Table of Contents to get an idea of what it's about. When you are done skimming you can go back to the start and work through each section at your own pace. There are no right or wrong answers and no tests!

Give yourself time and be patient; you can return to sections or ideas at any time. If you are reading this on a computer, save a copy for later. Print any sections that you may want to take with you. If you have a printed copy, keep it somewhere private so you can read it on your own time.

We've suggested things to do, write down or think about. Try to think of situations or examples that make the most sense for you. If there are ideas that don't make sense or that you are not sure about, check with someone you trust. It will be easier to learn the skills if you write the exercises in each skill section. You can write in the boxes we provide, in your own notebook or in a computer document. If you're nervous about other people reading what you've written, keep it private... but remember:

If you ever get thoughts of harming yourself, tell someone who can help.

TOC

What is Depression?

Depression is not . . .

Most times when you feel down, you're not depressed. Feeling sad or low is a big part of life and can't be avoided. When something goes wrong in your life, whether it's an argument with a friend, a bad mark on a test, or a fight with your parents, your mood might drop.

If you feel especially sad or irritable because of this situation, sleeping poorly, not wanting to see your friends, not much appetite or too much eating, then you're probably experiencing low mood. Low mood will typically go away in a week or two, especially if there's an improvement in the situation that started it.

Depression is . . .

But suppose it doesn't go away and just gets worse. You might be depressed . . .

- if you feel very low mood or almost no interest in your life, every day, and this feeling continues for at least two weeks; **AND**
- if you have other problems like:
  - big changes in weight or appetite;
  - not being able to sleep enough or sleeping too much;
  - feeling that you are always restless or slowed-down;
  - thinking that you are worthless or guilty;
  - feeling really tired most of the time;
  - feeling numb or empty;
  - having a lot of trouble concentrating or making decisions;
  - thinking about death or suicide.

MYTH: **It's normal for teenagers to be moody: teens don't suffer from "real" depression.**

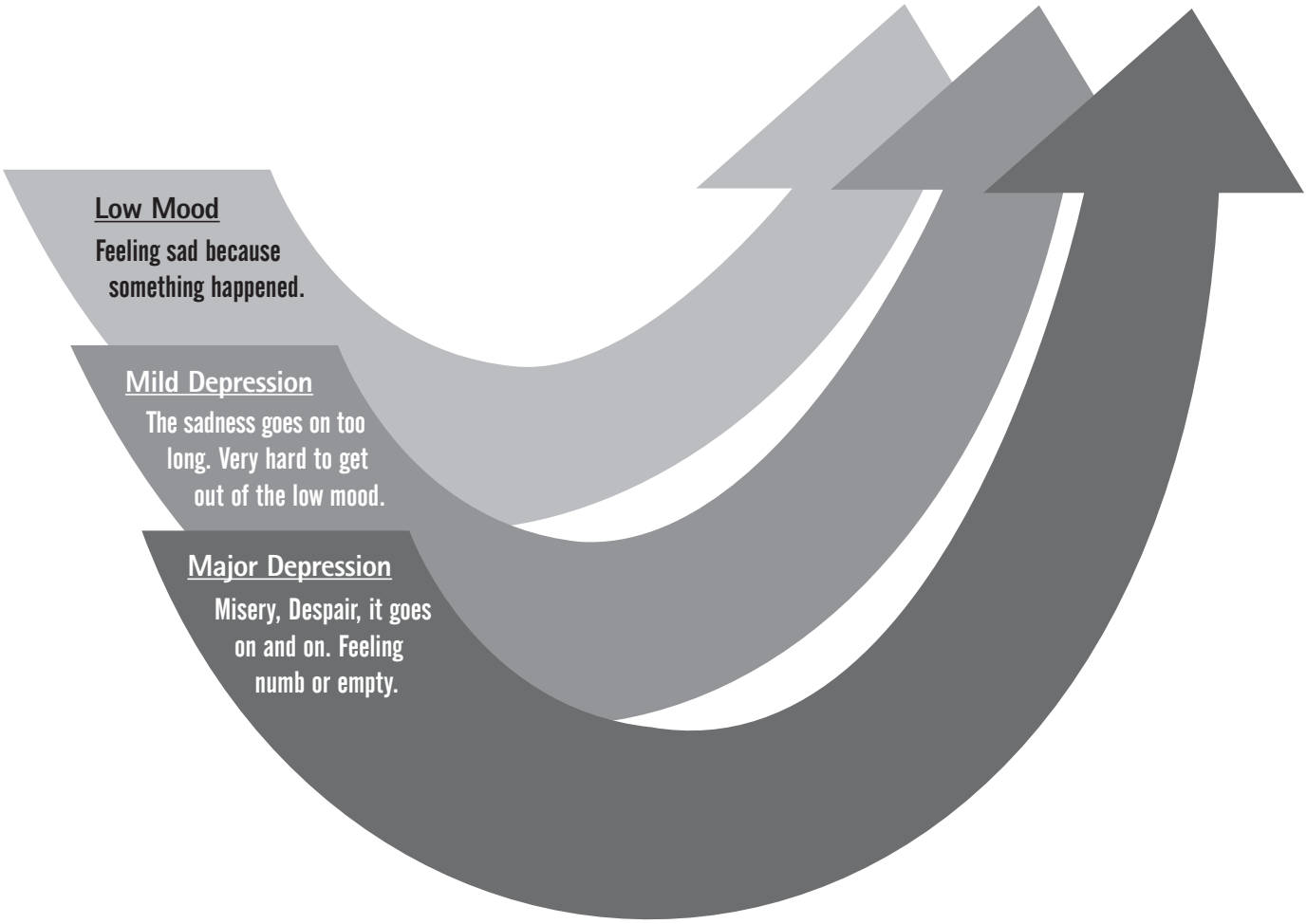
FACT: **Depression is more than just being moody. And it can affect people at any age, including teenagers.**

http://www.psychologyinfo.com/depression/teens.htm

What is Depression?

The two most common types of depression are called **mild depression** and **major depression**.

Each of these includes the same kinds of problems (the ones we've listed above) but major depression is more severe. Usually, when a teen gets depressed, it's the mild kind. You can check whether you have a depression by talking to a health professional (family doctor, psychiatrist, psychologist, clinical social worker, mental health counsellor, or mental health nurse). Or you can visit your local mental health centre.



If you think you have depression . . .

If you think you have depression, it is important that you find support. The skills in this guide are meant to help you with your depression, but you shouldn't have to do it alone. Talking it over with someone you trust can help you understand your problems or put them in perspective. If you continue to feel depressed, seek the help of a healthcare professional. This can be a family doctor, psychiatrist, psychologist, clinical social worker, mental health counsellor, or mental health nurse. They can help you with a number of different treatments for depression. A good thing about most of these treatments is that they work well alongside those you learn from this guide.

If you feel like hurting yourself . . .

For many people, depression makes life seem hopeless and unmanageable. Most depressed people feel this way from time to time. For a small number of individuals this feeling of hopelessness gets so strong they begin to think that life itself is not worth living. If this happens to you or someone you know, it's time to get help. Talk to an adult you trust so you can find a health care professional to help you get past these feelings. If you can't wait for an appointment, there are a number of crisis lines, staffed 24/7, that you should call. Just go to your yellow pages and look under *Crisis Centres* to find the numbers in your area. Remember, things **can** get better.

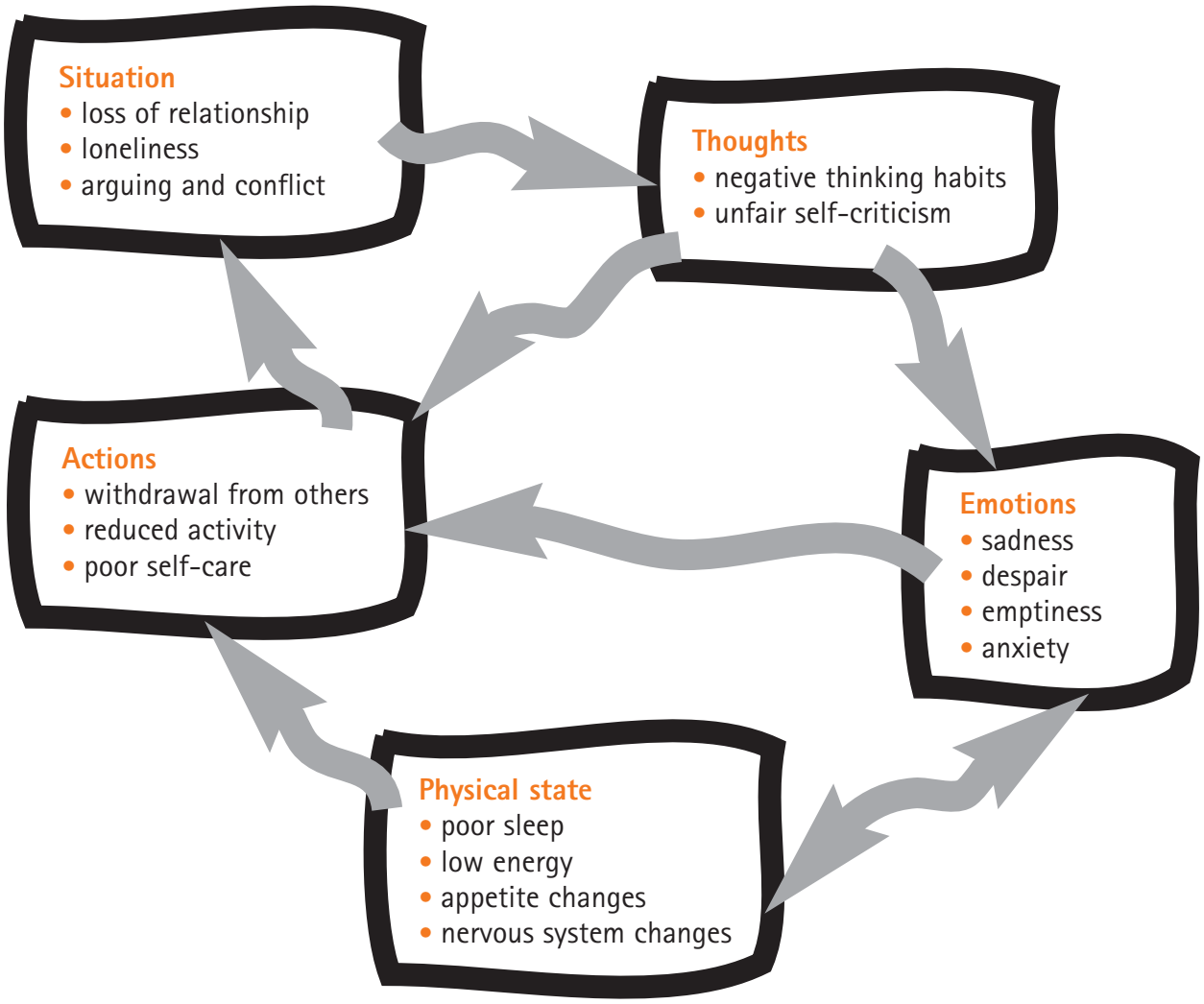
MYTH: Talking about depression only makes it worse.

FACT: Talking about your feelings to someone who can help, like a physician, counsellor or psychologist, is the first step towards beating depression. Talking to a close friend can also provide you with the support and encouragement you need to talk to your parents or school counsellor.

http://www.psychologyinfo.com/depression/teens.htm

What Causes Depression?

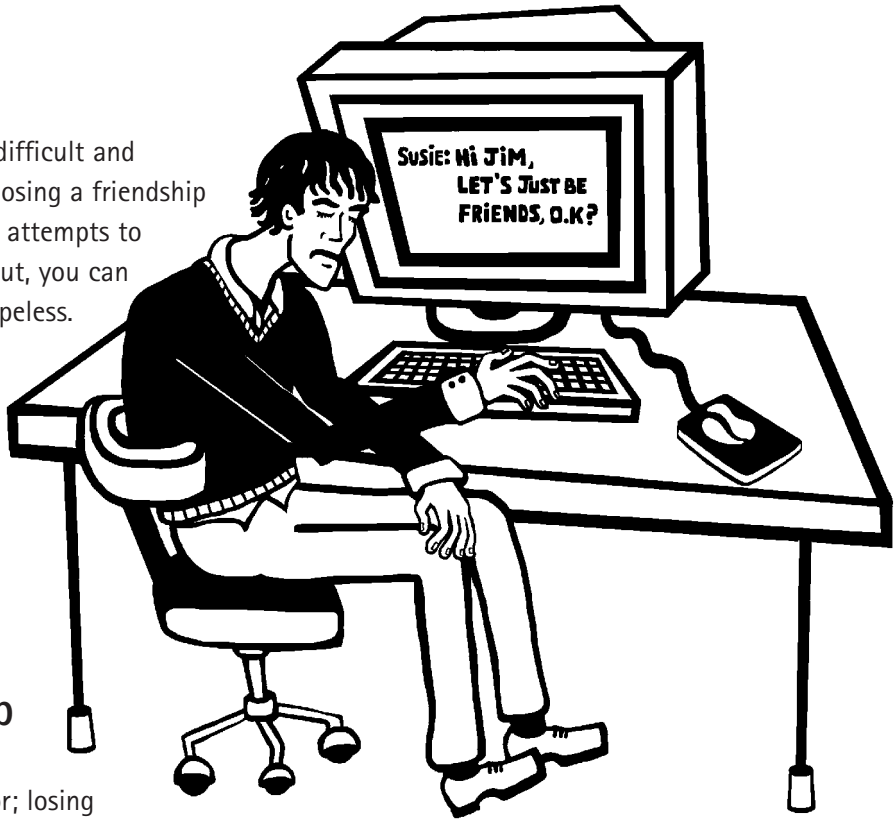
Depression is not simple. Researchers have identified five different parts of your life that can cause depression or keep it going. These parts are: your situation, your thoughts, your emotions, your physical state and your actions. These five parts all affect each other. The way you act changes your situation, the way you think about yourself changes your feelings, the way you feel changes your physical state, and so on. So we can think of these five parts as part of a circle of depression.



Let's take a closer look at these 5 parts.

Situation

Depression often starts out with difficult and stressful situations — things like losing a friendship or doing poorly in school. If your attempts to handle the situation don't work out, you can start to feel overwhelmed and hopeless. Then you might get depressed. Some situations that increase the chance of a depression:



loss of a relationship

This might be:
the death of someone you care for; losing a good friend; or breaking up with someone.

conflict with another person

This might be:
constant arguing with your parents; having a disagreement with a friend that you can't work out; being bullied; or getting in trouble often with a particular teacher.

loneliness

This might happen because:
you are a shy person; your family moved; or you haven't yet found others with the same interests.

poor school performance

This might happen because:
you're feeling down and having trouble concentrating; you have a learning disability; or the work is just really hard for you. Sometimes, using alcohol or drugs causes teens to have trouble with schoolwork.

That doesn't mean people only get depressed when things are going badly. Some people get depressed when their life has been going smoothly: depression just seems to come out of nowhere! Antidepressant skills are just as useful for these people, helping them to recover.

Thoughts

Each of us has our own way of thinking about situations and how we think has a big effect on how we feel. Depressed teens often think about situations and about themselves in a way that is *negatively distorted*. This means that their thinking is slanted toward a negative way of looking at things. This kind of thinking exaggerates how bad a situation is and ignores positive events.

unrealistic negative thoughts about your situation

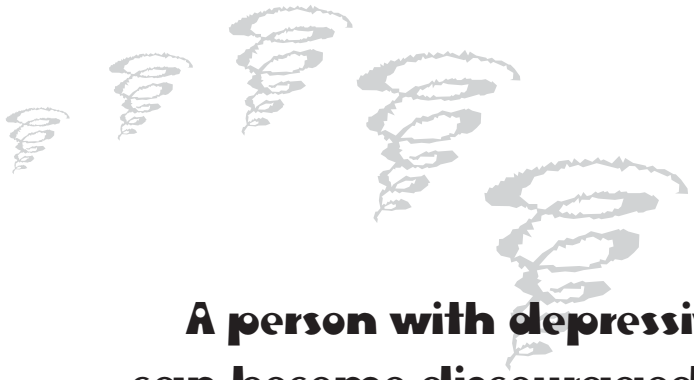
Seeing only problems and ignoring good things. If a friend passes in the hallway with only a quick hello, you take this as proof that no one really likes you, while ignoring that someone else said hi and smiled.

unfair negative thoughts about yourself

Judging yourself in a harsh way, setting really high standards for yourself, putting yourself down. Any failures you've had or mistakes you've made come to your mind clearly — but you exaggerate how bad the failure or mistake was. Not only that, you forget what you've accomplished or the good things you've done. It seems to you like the positive things don't really count.

unrealistic thoughts about your future

Exaggerating the chance that bad things will happen, imagining the worst, looking at the future in a gloomy way that doesn't really make sense. For example, someone with depressive thinking who doesn't make a hockey team might imagine that he won't get picked in the future and will never be able to play league hockey.



A person with depressive thinking can become discouraged or hopeless even when things are going well

Emotions

Depression usually begins with feelings of discouragement or sadness. If it gets really bad, the depressed person can feel swallowed up by hopelessness. Many depressed people feel like they no longer get enjoyment from things they used to love doing. If depression gets extreme, there might be a kind of numbness or emptiness, like having no feelings. It's as though the pain becomes so strong that your mind simply switches off your emotions.

Remember that depressed people think about their situation and themselves in an unrealistically negative way. Since their emotions are based on this distorted way of thinking, then their emotions can also be unrealistically negative. It may be hard to think of emotions as unrealistic. But imagine a man who thinks that airplane travel is very dangerous, who believes that airplanes are constantly falling out of the sky. He will be very frightened when flying; but his fear comes from unrealistic thinking and so it is not realistic.

Physical State

Depression often includes different kinds of physical problems. One of these is difficulty with sleep — a depressed person can't fall asleep or sleeps too much. Beside sleep problems, depressed teens often feel like they have no energy, like they have no appetite or like they're always hungry. They can have difficulty concentrating on schoolwork. Finally, some depressed teens develop a kind of "imbalance" in how their nervous system operates.

The physical changes that go along with depression make it harder to deal with problems or even to learn the skills described in this guide. For some depressed teenagers, medication may be helpful in restoring sleep, concentration and physical energy, allowing them to learn and try out the antidepressant skills.

Before reaching the age of 18, about one in five young Canadians will experience an episode of major depressive disorder.

http://www.imshealthcanada.com/htmen/1_0_14.htm

Actions

People who are depressed often behave in ways that make depression worse.

These include:

withdrawing from family and friends

Depressed people feel like others don't want to be with them or they don't feel like being with others. So, they pull back from friends and family, turn down invitations and stop making efforts to connect. This leaves them cut off from other people.

not taking care of yourself

When people are depressed, they feel like they don't care about what they eat or how they take care of themselves. So, they often stop eating properly or exercising. They may abuse alcohol or drugs. This makes them feel physically weak and perhaps ashamed of their lack of willpower.

not doing enjoyable activities

Depressed teens might feel too tired or unmotivated to stay involved with activities they used to find enjoyable. They might give up fun activities like sports, listening to music, reading or favourite hobbies. But inactivity can become a habit. The less you join in fun activities, the less you feel able to enjoy them and the less you do. Inactivity feeds depression.

What Can You Do About Depression?

MILD Depression

- Talking to family and trusted friends about how you've been feeling is usually a good thing to do. They can help you to figure out solutions to some of the problems you've been dealing with; besides, just knowing that people care about you can be helpful.
- Writing about problems you're facing, your feelings and thoughts, and possible solutions can help you to understand what you're going through and what choices you have.
- Speak to a health professional (family doctor, psychiatrist, psychologist, clinical social worker, mental health counsellor, or mental health nurse) if you think you might be depressed. A professional can help you figure out what's been going on and can make useful suggestions.
- In some cases, antidepressant medications can be helpful in overcoming mild depression. But for most adolescents with mild depression, the answer does not lie in medication.

Learning and practicing the skills in this guide, developing antidepressant skills, is likely to be very helpful in overcoming mild depression.

MAJOR Depression

- Talking to family and trusted friends about how you've been feeling is still helpful.
- Writing about problems you're facing, your feelings and thoughts, and possible solutions is also still helpful.
- Definitely see your family physician if you think you might be depressed. Major depression is a serious problem and should be diagnosed by a family physician, psychiatrist or psychologist. You might visit your local mental health centre, where these mental health professionals are usually available.
- One effective treatment for major depression in adolescents is cognitive behavioural therapy [CBT]. CBT is a talking therapy that teaches new skills for thinking and acting more effectively. This guide is based on CBT methods.
- Another effective treatment is interpersonal therapy [IPT], a talking therapy that teaches new skills for dealing with friends, teachers and family.
- Antidepressant medications are often helpful in overcoming major depression in adolescents. But they don't seem to be as effective for adolescents as they are for adults: talk it over with your physician.

Learning and practicing the skills in this guide, developing antidepressant skills, is likely to help in overcoming major depression. BUT remember that the skills taught in this guide will not be enough by themselves to fix something this serious. If you have a major depression, you should seek professional help.

More About MEDICATION

Antidepressant medications are helpful to depressed adults, but research has shown that they are not as effective in young people, often no more effective than a sugar pill or placebo. Medications need to be used with other treatments and coping strategies.

Up to half of teens diagnosed with depression may be prescribed medication by their doctors, especially if depression is more severe and goes on for a long time, or when they also have other problems such as anxiety which might be helped by medication. New research is telling us that the combination of medication and self-help skills is better than medication alone. If you are prescribed a medication, ask your doctor about what to expect in terms of improvements and potential side effects. Medication should be accompanied by coping strategies as described in this self-help guide, or other psychological treatments.

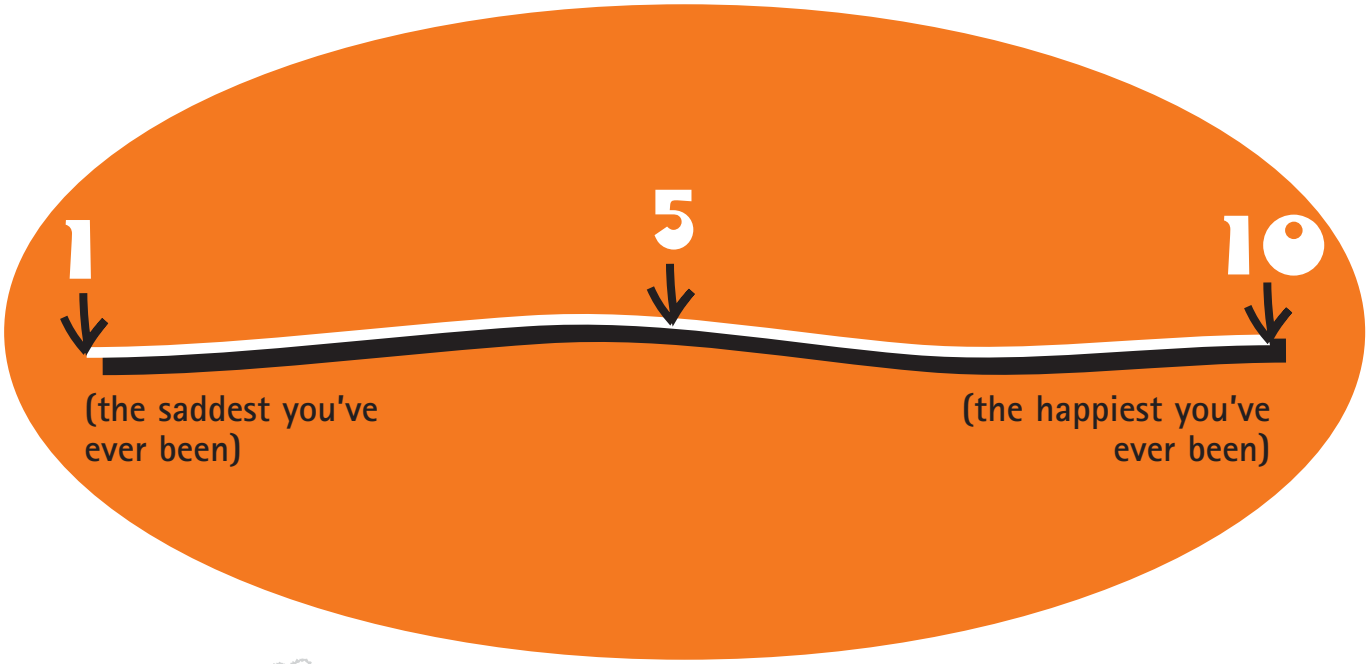
A recent scientific study compared cognitive-behaviour therapy, antidepressant medications and a combination of both of them with a control condition. The study concluded that the combination of the two was the most beneficial for moderate to seriously depressed teens.

Journal of the American Medical Association, 2004, 292, No.7

Self-monitoring

Knowing how you're feeling is one thing, but how do you describe it? Words like sad or depressed can tell about a mood, but they don't really explain how upset you are. The word depression is used a lot these days to mean anything from "I'm really depressed about my parents' divorce" to "I'm so depressed, the concert sold out!"

Being able to accurately describe your mood is important if you want to look for changes. Most people work well with a simple mood line like this:



Try putting your mood right now somewhere on this 1-10 line.

As you work through this guide go back and check on your mood by giving it a number and keep track.

Antidepressant Skills

You will learn three skills that can stop your mood from sliding down, can make you feel less depressed and can prevent depression from happening again.

The skills are:

Realistic Thinking ○ Problem Solving ○ Goal Setting

We will explain how each of these skills helps fight depression and show you in a step-by-step way how to use the skill. It's best to think about these skills the way you would if you were learning a new sport: *practice* is very important. Lots of people find it helpful to share this book with a trusted friend, counsellor or family member — this person can help you to keep practicing even when you feel low energy or unmotivated. She or he would be like a coach to keep you on target. If there's no one like that, then be your own coach and keep yourself practicing the antidepressant skills. As you work through the skills, it will gradually get easier and the result is totally worth it.

Here's something to remember. Just as the 5 parts of your life (situation, thoughts, feelings, physical state and actions) can affect each other in negative ways, they can also affect each other in *positive* ways:

- Think more realistically and your emotions will become less negative;
- Solve problems more effectively and your situation will gradually improve and this will help your mood;
- Become more active, your mood will improve and it will become easier to think about yourself in a fair way.

So by working with more than one skill at the same time, you can make change in several areas of your life, with each area having a positive impact on the others.

If you never change your mind, why have one?

Edward de Bono

Realistic Thinking

In this section you will learn to:

- Spot depressive thoughts that lead to depressed mood
- Challenge these depressive thoughts
- Come up with realistic thoughts
- Practice realistic thinking

We've talked about the kind of negatively distorted thinking that feeds into depression. Depressive thinking is *unrealistic* and *unfair:*

- unrealistic negative thoughts about your situation
- unfair negative thoughts about yourself
- unrealistic negative thoughts about your future

Your plan is to replace depressive thinking with realistic thinking.

Realistic thinking is:

- accurate about your situation, seeing things clearly as they are;
- fair about yourself, looking in a balanced way at the positive and negatives in your life;
- accurate about your future, not exaggerating bad outcomes.

So, how do you change depressive thinking?
See the following page for the steps . . .

1 Spot depressive thoughts

Here are the most common types of depressive thinking:

all or nothing

You see situations as totally one way or the other. If you don't get an A on the exam, that means you basically failed it. If you're having trouble with Math, that means you're never going to understand it. If your friend just says hi quickly in passing, that means she doesn't want to spend time with you ever again. One version of this is perfectionism, where you think that you have to be the best in the situation or it means that you failed. But the fact is that very few situations are completely one way or the other. Most situations fall somewhere in between. It's more realistic to think about situations in shades of gray, not black and white. Having difficulty with Math is a problem that will require getting assistance, not a total disaster. Your friend may be unhappy with you over something, so you'll need to talk it over with her, but that doesn't mean she never wants to see you again. As for perfectionism, since nobody can reach the top-level performance all the time (and be the smartest Science student, the most creative Art student, the most popular person in the school), set your expectations at a level that is challenging but not superhuman. Remember, if you set your standard for yourself at the top level, you may be setting yourself up for depression.

overgeneralizing

Based on one negative event, you expect that things will continue to go wrong; or based on one negative fact, you assume that everything else in the situation is negative. You do poorly on one exam, so you expect to do poorly on all the exams coming up. You hear that one student is mad at you, so you assume that all the students in your class are mad at you. But it's more realistic to look for extra information to decide how things are rather than rely on one little fact. Doing poorly on one exam doesn't mean you can't do well on later exams in that subject if you study more, or on exams in other subjects. Instead of assuming that all the students are mad at you, check it out.

labeling

You talk to yourself in a harsh way, calling yourself names like "loser", or whatever the worst insults are for you. You talk to yourself in a way that you would never talk to a friend or almost anyone. But this kind of self-labeling is unfair. All it really accomplishes is to make you feel discouraged and overwhelmed. Stop putting bad labels on yourself and instead encourage yourself to try things and praise yourself for what you achieve. You'll feel better and accomplish more.

exaggerating

You exaggerate risk and expect the worst possible thing to happen. If you're going to a party, you expect that everybody will ignore you and you'll have a horrible time. Or an exam is coming up and you're convinced that you'll fail, no matter how much you study or how well you've done before. Or you don't sign up for any activities like music or sports because you're convinced that you'll be useless at it and you'll be humiliated. But this kind of thinking exaggerates the likelihood of something horrible happening. It makes you feel much more discouraged than you need to be and it often will stop you from trying new things you might enjoy.

mind-reading

You imagine that other people are criticizing or rejecting you, even when you don't have any real reason to think that. When you do this, you're acting as though you could read someone else's mind. If you're introduced to a new girl who doesn't say much, you immediately assume she doesn't like you or want to talk to you. But it's more realistic to check it out, to spend some time finding out what the other person really thinks. She probably doesn't feel about you as negatively as you imagine, maybe even feels positively about you. You don't really know until you check it out, and what you imagine is usually worse than the reality.

filtering

You only pay close attention to events that are disappointing or to critical comments from others. Negative events are given a lot of importance. When something positive happens, you ignore it. When someone praises you, it makes you feel uncomfortable and you treat it as unimportant ["he was just trying to make me feel better"]. But it's more realistic to pay attention to both kinds of events; in fact, positive events or positive feedback are often more important, because they tell you what you're doing right. Building on what you do right is a great strategy for making life better.

Notice what you are thinking, what you're telling yourself. Do you use one of these kinds of depressive thinking? If so, write a Depressive Thought you have.

Based on the list above, what type of depressive thinking is it?

1 Notice how depressive thoughts change your mood

Most of the time, you're not aware of the negative things you're telling yourself. Thoughts change quickly, so you need to pay close attention to spot depressive thoughts. Think about the last time you felt really down, irritable, or noticed that your mood dropped — what was going through your mind just then? Maybe you got home from school, sat down in your room to listen to a CD and suddenly just felt hopeless — what were you thinking about?

Write down any depressive thoughts that go along with your negative moods:

Realistic Thinking

Writing it down is really helpful when you're trying to understand how you got depressed. Seeing your thoughts on paper makes it easier to look at them clearly. A depressive thought that seems to make sense in your head ["my friend didn't show up for lunch, she must hate me now"] is much less certain when you see it written down.

Keep on writing your depressive thoughts and noticing how these thoughts change your mood. You'll probably find the same sorts of depressive thoughts again and again. Most depressed people have a few kinds of depressive thoughts repeating in different situations. After a while, you'll begin to recognize the patterns and start to catch depressive thoughts while you're in the situation. Remind yourself that it's just a depressive thought, not reality!

Also – don't criticize yourself for having depressive thoughts. Either your past experience taught you to think like this or being depressed made you think like this — either way, *it's not your fault*.

It's about change, not blame

Challenge these depressive thoughts and replace them with realistic ones

Challenging depressive thoughts means *rethinking* the situation where you felt so lousy. We use a special worksheet with three columns: the first is named Situation, the second is named Depressive Thoughts and the third is named Realistic Thoughts. Here's an example of a Realistic Thinking worksheet:

Situation	Depressive Thoughts	Realistic Thoughts
While I was talking to a couple of friends in the cafeteria yesterday, I found out they had gone out for coffee the day before without inviting me	I figured they were letting me know they don't want to hang out with me anymore [Overgeneralizing]	✹ I've been friends with these two for a couple of years, they still act friendly ✹ we're planning to go out together on the weekend ✹ maybe they were out talking about the school project they're doing together ✹ it looks like they still are my friends

To do this worksheet you start by briefly describing a situation where you felt your mood drop (during the situation or afterwards). Then, you write down the thoughts that went along with your low mood. Using the list of kinds of depressive thinking from Step 1, you decide what kind of depressive thinking you were using and write this down in the Depressive Thoughts column. (For example, "Overgeneralizing".) Finally, you try to come up with more realistic ways of thinking about the situation and write these in the last column.

Realistic Thinking

But when you're down or depressed, it's not easy to come up with realistic thoughts. Pick a depressive thought you've had and try coming up with realistic thoughts to replace it. Here are some questions that will help you.

Depressive Thought:

What proof do I have? Would most people agree with this thought?
If not, what would be a more realistic thought?

Can I get more proof, like asking someone about the situation?

What would I say to a friend in a similar situation?

What is a less extreme way of looking at the situation?

What will happen if I think this way? Is there another way of thinking that is more encouraging or useful?

Realistic Thinking

Now try using these questions to come up with more realistic ways of thinking about a situation that upset you.

Notice that it usually feels better to think realistic thoughts than depressive thoughts.

Situation	Depressive Thoughts	Realistic Thoughts

It won't be enough to come up with realistic thoughts just once. There are different kinds of situations where depressive thoughts make you feel miserable. Try using this worksheet for other situations as well. We've included a blank copy of this worksheet at the back of the guide.

Each time you try coming up with realistic thoughts, it becomes easier.

4 Practice realistic thinking

Certain kinds of situations can really start up (trigger) depressive thinking. Common triggers for teens may include going to a party, finding out about a scheduled exam, or family arguments. *Write down some of your trigger situations.*

If you find yourself in trigger situations, practice your realistic thinking. Talk back to the depressive thoughts! Don't allow depressive thinking to happen without fighting it: every time you talk back, you make the depressive thinking weaker and realistic thinking stronger. But it will take time before realistic thinking is stronger than depressive thinking.

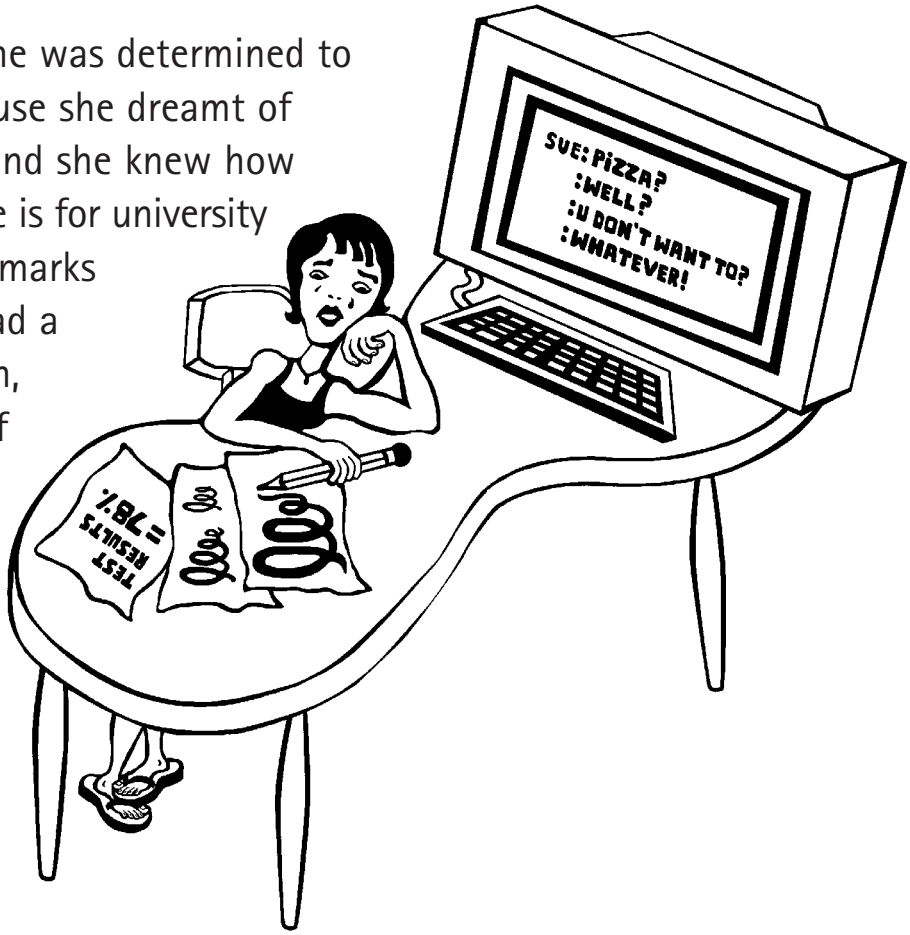
At first, realistic thinking might seem fake. It will seem as though you are just kidding yourself. But that's only because you've had so much practice with depressive thinking. Remember the first time you tried a new sport, took a new subject or got a new videogame – it felt a bit awkward at first but got easier as you kept at it.

As you keep practicing the skill of realistic thinking, you'll find that it begins to feel right for you. Eventually you'll be able to accept realistic thoughts.

Here is a story to show how **Realistic Thinking** can be used to help depression

The Perfect Girl

Amy was 16. She was determined to do well in school because she dreamt of becoming a scientist, and she knew how much competition there is for university science programs. Her marks were excellent. Amy had a perfectionistic approach, always expecting herself to do things to the highest standard. But her test result on the midterm math exam was very disappointing to her – **only 78.**



It was a hard test, and only one person got a better grade. But she told herself that she had *completely blown the test*. She was mad at herself: she called herself *stupid* and *loser*.

She imagined being turned away scornfully from University ["78 in math? And you want to enter Science?"]. This made her sad.

Because she was worrying so much she had trouble sleeping, so that when she did her next midterm, in English, she had trouble concentrating and again her mark was lower than usual. This *really* scared her and she began to think she had been fooling people, that she really wasn't very smart. She became sadder and scared about her future. After a couple of weeks thinking this way, all she could do was sit in her room and cry. And she was having lots of trouble with sleep.

Her friends called her, but she made excuses. She didn't feel like seeing a movie or even talking to her friends. She felt like she had nothing to say, like she was boring, and like she wouldn't enjoy doing things. She just didn't care. She was depressed.

The Perfect Girl

Amy wrote down what she was thinking when her mood dropped. This was her list:

I've totally blown this test.
I'm stupid and lazy.
I'll probably mess up all my other tests.

She decided this was All or Nothing thinking, very black and white. She worked on challenging these depressive thoughts. This is what she wrote:

Situation	Depressive Thoughts	Realistic Thoughts
I got 78 on the big exam when I expected to do much better	I've totally blown this test [All or Nothing, Perfectionism]	Even though it's less than I expected, I did pretty well compared to the average; this is nowhere near a failure.
	I'm stupid, I'm lazy [Labeling]	These labels aren't fair; I studied hard for this test. Just because I don't get a perfect score doesn't make me a loser. These are just insults, they don't actually mean anything and they're useless.
	I'm going to mess up all my other tests [Exaggerating]	It doesn't mean I'm going to fail all my tests – why would I? In fact, I've done pretty well in most other classes and not badly in these. I'm still okay to apply for Science, so long as I keep up my average, and I intend to.

The Perfect Girl

Amy practiced the realistic thoughts every time she noticed herself having gloomy and depressive thoughts. When the depressive thoughts began and she noticed her mood starting to go down, she practiced thinking the realistic thoughts and her mood went up a bit. She kept on practicing realistic thinking and it helped her to feel less down and discouraged. At first, it seemed fake to deliberately practice realistic thinking. But as she practiced, it began to feel normal to think realistically about herself.

Also, she made a point of calling up her friends to do things, even before she felt better. Being around her friends and becoming more active really helped raise her mood. Her mood steadily improved and so did her concentration and her sleep. She gradually became undepressed.

Problem Solving

In this section you will learn to:

- Better understand the problems you're dealing with
- Come up with several different solutions
- Find the best one and start solving problems

When you face big problems that you find very difficult to solve, it's not surprising that you might experience low mood. If these problems seem overwhelming and cause you a lot of stress and suffering, you might slip into a mild or major depression. Research has shown that some people who develop depression have experienced an unusual amount of stress, conflict or loss before the depression. So, helping a person to deal more effectively with life problems should help to prevent depression.

Not only that, a person who is already feeling depressed will have more trouble solving life problems. She or he might:

- See the problem as more difficult than it truly is.
- Have trouble coming up with different kinds of solutions, getting stuck in one way of reacting even though it isn't working.
- Find it hard to put a plan into action

But if the depressed person feels so overwhelmed that he or she stops trying to solve problems, the problems will get worse and make the depression worse. So learning how to solve problems better should help to overcome depression.

Problem Solving

We'll be using special problem-solving worksheets.

Here is an example:

The problem:	My teacher is always targeting me, I think it's unfair
People who can support me:	My parents; the school counsellor; my good friend in that class
What I want to happen:	I just want to be treated the same as everyone else in the class
3 things I could do:	1. I could give a sarcastic answer next time she picks on me 2. I could just stay quiet in class and hope she forgets about me 3. I could talk to the counsellor about the situation

Following are the steps of effective problem-solving

1 Choose a problem

The first step in problem solving is to choose a problem. After all, if you can't clearly identify a problem, it's hard to come up with a solution.

One way to identify problems is to pay attention to how your mood changes through the week. Notice what's happening when your mood goes down: what were you thinking about, where were you, what happened just before your mood changed? Your low mood can be a helpful guide to show you where the problems are.

Consider the problems that are bothering you the most. Some may be big problems (parents are separating) and some not-so-big (you've got a project due). Some may directly involve you (an argument with a friend) and some may be things that are happening to you (starting a new school).

Choose one to start with. Pick one of the smaller problems that directly involves you and is happening now; later, you can move up to bigger problems. Try to be specific and detailed.

For example "Things suck" isn't very specific or detailed: it's not clear what the problem is. "I don't want to get into so many arguments with my dad about homework" is more detailed and makes it clear what's going wrong and what needs to change.

The problem you choose is:

1 Understand the problem

- What supports do you have (friends, siblings, parents, other concerned adults)?
- Have you had this problem before? If so, how did you handle it?
- Do you need to find out more information?
- What would be different if the problem were solved? How would you feel? How would other people feel?

People who can support me:

Other ideas about this problem:

3 Think of things you might do to solve the problem

Write down 3 actions you might take to help solve the problem. Consider things you can do that don't depend on somebody else. Don't try to decide which one is best: just come up with different actions you might do. Don't worry if you've tried something before and it didn't work – situations change.

1.

2.

3.

4 Compare these different solutions

Consider which is most likely to help the problem. Look at the good and bad points for each action. The teen who felt targeted by a teacher did the worksheet like this:

Action	Good Points	Bad Points
1. I could give a sarcastic answer next time she picks on me	She would know how I felt	I'd get in more trouble. The class would be even more stressful for me.
2. I could just stay quiet in class and hope she forgets about me	I might be able to 'disappear' in class, then she wouldn't bug me.	It's pretty boring not to say what you think. She might target me even more.
3. I could talk to the counsellor about the situation	The counsellor can talk to the teacher privately. The counsellor might suggest other solutions.	I can't think of any.

4 Compare these different solutions, continued

Now you try it. **For each of your 3 actions, write down the good and bad points:**

Action	Good Points	Bad Points
1.		
2.		
3.		

4 Compare these different solutions, continued

Here's a tip on how to compare different actions. There are three kinds of actions: Passive, Aggressive and Assertive.

Passive Actions:

you don't state your own point of view because you don't think it's worth saying or you don't do what you want because you think what other people want is more important.

Aggressive Actions:

you don't listen to others' points of view and just try to do what you want, no matter how it affects people around you.

Assertive Actions:

you strike a balance between what you want and what others want, stating your own view and listening to the views of others.

As you've already guessed, Passive and Aggressive actions aren't usually the best ones. When you're judging a possible action, make a note if it seems either Passive or Aggressive.

5 Pick the best one

Look over the good and bad points for each action and decide which one is best.

Then you will make a plan to carry out this action. In the next skill section, Goal Setting, we're going to explain how to make really effective plans and carry them out.

Here is a story to show how **Problem Solving** can be used to help depression

The girl with angry parents

Ingrid's parents were always mad at each other (at least, that's how it seemed). Arguing with each other, trading sarcastic putdowns, sometimes calling each other names. It made her feel horrible – scared and angry.

Even after they stopped fighting, when they were just glaring at each other and slamming doors, Ingrid would hide in her room, crying and miserable. She was only 14 and she didn't know what to do.

She felt trapped and alone – who could she tell? She thought that she couldn't bear it if her friends found out how pathetic her family was and she couldn't imagine talking about this stuff with a doctor or counsellor. Really, she didn't think she could talk to anyone... she would have to live with it.

But she couldn't live with it. She got sadder and she had trouble concentrating on school-work because she kept imagining her parents fighting and maybe getting divorced. And that made her even sadder, and she had trouble sleeping so she felt tired in school, so she couldn't concentrate on schoolwork, and that made her feel bad about herself.

A teacher noticed that Ingrid seemed tired and unhappy much of the time. He asked her to see the school counsellor, and she agreed. The counsellor got her to open up about how difficult things were at home and arranged to meet with her every few weeks. Also, the counsellor gave her a copy of this guide. Ingrid decided that the Problem Solving skill was the most important one for her.

The Girl with Angry Parents

The problem she chose was, of course, her parents arguing. She wrote it down like this:

The problem:	My parents argue a lot, 2 or 3 times a week and it makes me feel really sad, angry and scared they might get divorced
People who can support me:	school counsellor, family doctor, my favorite aunt, my 2 best friends
What I want to happen:	I want them to stop arguing or at least not so often, also they should think about my feelings more
3 things I could do:	1. learn to live with it, keep it a secret 2. run away from home 3. tell my parents how I feel about their arguing, ask them to change

Then she evaluated each of these 3 possible actions:

Action	Good Points	Bad Points
1. learn to live with it, keep it a secret	✹ my friends won't find out	✹ it won't change and I'll keep on being miserable
2. run away from home	✹ I won't have to hear my parents arguing again ✹ it might be an adventure	✹ I would miss them ✹ I might end up on the street and that would be horrible ✹ it would really frighten my parents, and they love me
3. tell my parents how I feel about their arguing, ask them to change	✹ at least I'm trying to make it better ✹ maybe they'll argue less if they know how much it upsets me	✹ I'm nervous about telling them, maybe they'll get angry at me

The Girl with Angry Parents

Ingrid decided that #1 was too passive, it would leave her in the same lousy situation and that #2 was too aggressive, it would really hurt her parents besides being dangerous for her. So, she decided to try #3, talking to her parents about how upset she was. One weekend, she asked to talk to her parents and told them about her feelings and that she wanted them to argue less. Her parents didn't get mad at her for talking about this, and they admitted that they'd been fighting a lot lately. They said that they would really try to keep things more calm and argue less.

This helped, they did argue less often. But they still argued too much and it still made Ingrid unhappy. So, she decided to do something else as well: she started spending more time at the home of her favourite aunt – things were peaceful over there. With her parents arguing less and spending one evening a week with her aunt, things were a lot better for Ingrid. Her mood improved, as did her sleep, and she began to feel like herself again.

Goal Setting

In this section you will learn to:

- Set goals that are important to you
- Make goals that are likely to succeed
- Move on to new goals

Goal setting is about moving from knowing what you should do to planning how you're going to make it happen. It's about taking action. You might have great ideas about how to solve a problem, but never get around to actually doing it: setting clear and realistic goals is the most powerful way to make sure that you actually do it.

When people become depressed, they find it hard to set goals or do them. They:

- feel a lack of motivation
- don't feel they have the energy to carry out goals and
- often set goals that are too big.

Not only that, people who aren't very skilled at goal setting are less likely to solve problems or get into enjoyable activities, so they're more likely to become depressed.

Check the next few pages to see how you go about setting goals to solve problems and make your life more interesting

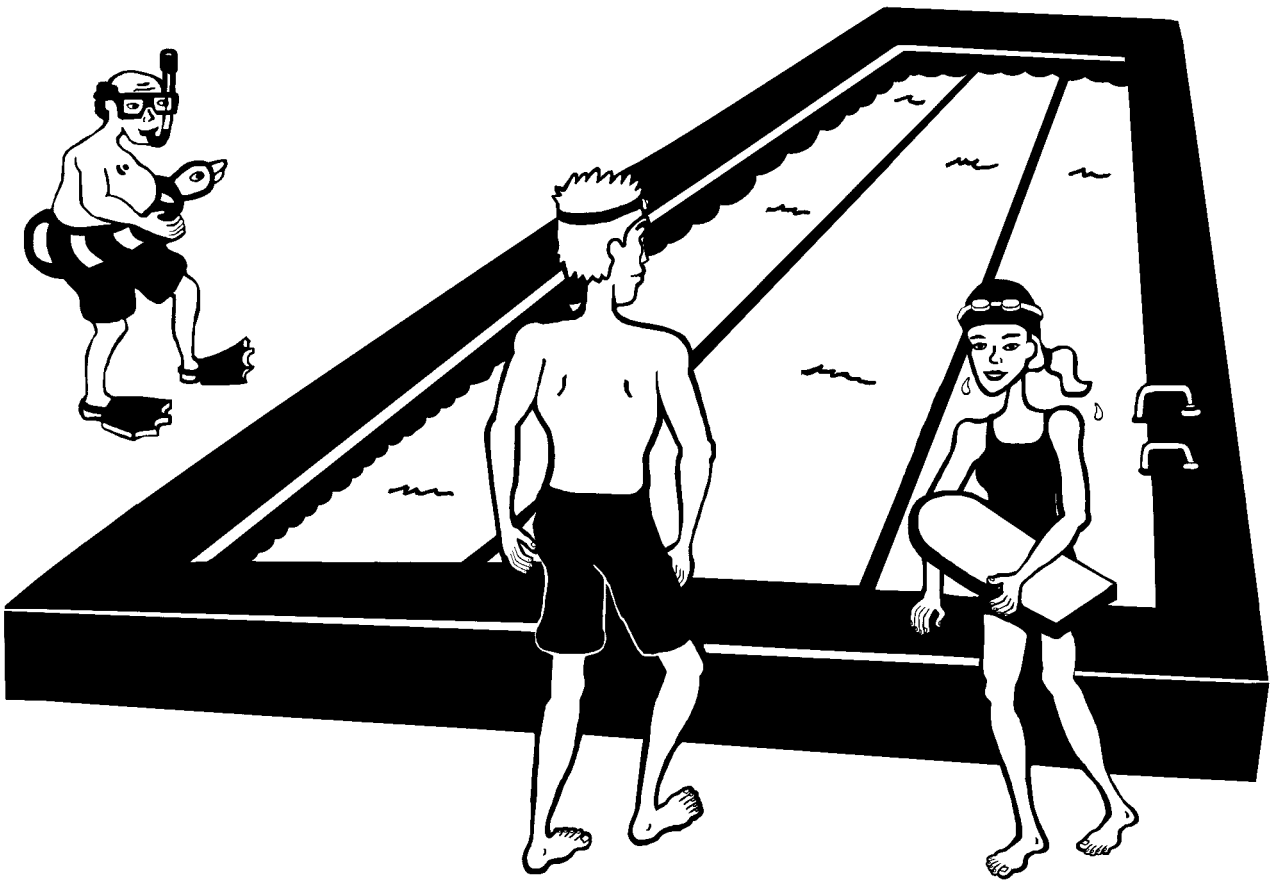
1 Choose a goal for the next week

What would be a helpful action to try in the next week? Let's say you're having a problem with poor marks in English, and you decide that the best solution is to spend more time studying. So goal setting would involve deciding just how much time you want to study and when you'll do it.

Or, let's say you've been feeling lonely and bored, so your goal is to spend more time with other people doing something fun. A good starting goal would probably be to collect some information about the kinds of group activities available in your school or community. Activity goals are important for people who are dealing with depressed mood: depressed people often withdraw from social activities, stop doing sports, or stop going to movies and concerts. Their world becomes smaller and emptier, worsening the depression. Activity goals increase your involvement in social or other rewarding activities and make your world a larger, more rewarding one.

Here is an example of a goal:

Exercise more – start swimming at the community centre



Goal Setting

Now you pick a goal to start working on:

2 Make this goal specific, realistic, and scheduled

Researchers have studied which kinds of goals are most likely to be carried out.

They have found that effective goals are:

specific

Be very clear about what you are planning to do. Unclear goals are much less likely to be carried out: a goal like "study my Math textbook more" likely won't make a difference in your studying. You probably won't set aside a specific time for it and you won't know when you are meeting your goal. People who set unclear goals often feel like they're failing even when they're doing well: after all, no matter how much you're studying, you could always be studying "more". A better goal would be: "study Math Monday and Wednesday evenings for 1 hour".

realistic

Teens often set goals that are very ambitious, like someone who hasn't been doing any exercise sets the goal of "working out every day for an hour" starting next week. This goal is not realistic and almost nobody makes that kind of change so quickly. Even if she does it for one or two weeks, she will soon stop exercising every day, get angry at herself for "failing" and then might stop exercising. If you set goals that are too big, you're setting yourself up for discouragement. It's also worth remembering that depressed people have more difficulty carrying out goals and have to set modest ones to begin with. The goal you set should be easy enough to carry out even if you feel depressed over the next week. At first your goals must be small ones, and they can gradually become more ambitious as you have success.

scheduled

You have to know exactly what you're going to do, where you're going to do it, for how long and when. The more exact you are in stating your goal, the more likely that you're going to carry it out. So, a poor goal would be "go swimming"; a better goal would be "go swimming at the community center Thursday around 5 p.m. for 20 minutes". The best way to schedule goals is to write your goal into a planner; when you complete the goal, check it off. Then, you know exactly what you've done and what you plan to do.

2 Make this goal specific, realistic, and scheduled, continued

Here's an example of how to write a goal:

My Goal	How often?	When exactly?
Swim at the community centre, 20 minutes	Once a week to start	Thursday after school

Now write your goal:

My Goal	How often?	When exactly?

Think of your goal as an appointment with yourself. Treat it as carefully as you would an appointment with your doctor. If you must cancel this appointment with yourself, reschedule immediately and then don't miss it.

3 Carry out your goal

After you've completed your goal, remember to check it off in your planner or notebook. Also, remember to congratulate yourself for having carried out the goal — it's important to recognize what you've accomplished. When people are depressed, they have trouble recognizing their own accomplishments. Instead, they see what they've done as ridiculously easy or unimportant: but the fact is that *carrying out any goal when you're depressed is very difficult* and takes a lot of determination. Don't ignore small victories or think they don't count. They *do count*, especially during depression.

It's often helpful to share your goal with a friend or trusted adult. When you've done the goal, check-in with that person.

But what if you didn't complete your goal? Give yourself credit for trying and for what you have learned. What got in the way? What can you do to make the goal easier? You might find yourself starting to get into self-blame. But that's not very helpful and it's not fair — there are different reasons why you might not complete a goal. Sometimes it's because the goal is set too high. Sometimes it's because you need more help to carry out the goal: for example, maybe you need to arrange for a friend to swim with you. Sometimes it's because there was an unexpected obstacle: maybe there was a family crisis the night you planned to study. Whatever the reason for not completing a goal, reset the goal for next week or change the goal so that it's more likely to happen. Generally, think about reducing the goal (e.g., start with half an hour of study) or having someone else help you with it (e.g., arrange to study with a friend or join a study group).

4 Review your goal

Some goals are one-time things. After you've found out the fitness schedule at your Community Center, that goal is finished. But most goals involve ongoing activities, like changing study habits, meeting new people or starting fitness programs. When you've completed a goal, keep it at the same level for a few weeks. Then decide whether you want to increase the goal a little or keep doing it at the same level until it seems easy. This is your choice. But once the goal feels easy and you've been doing it for at least a few weeks, increase the goal or maybe add a new one.

If you're adding a new goal, write it into your schedule along with the continuing goal. Remember, check off the goal as you do it and praise yourself for doing it. It's not usually a good idea to work on more than three goals: that gets confusing and it's hard to focus your effort.

After awhile you get used to doing these goals and they become habits. Then, they're not like goals at all, just things you're used to doing.

Here is a story to show how **Goal Setting** can be used to help depression

The Shy Guy

Joe first had problems

with other kids when he went into Grade Three. Up till then, he never really thought about how he got along with other people or what they thought of him. But that year, his family moved to another neighborhood and he had to start a new school. In his first week there, a couple of other kids made fun of him, teasing him. This was horrible, so he started to feel nervous and kept to himself.

When a girl in class approached him and said Hi, he felt so tense that he just stared at the ground and mumbled something. She walked away. He became more shy and stayed away from the other kids.

Eventually the other kids started to see him as unfriendly and this made it harder for him to talk to them. By Grade 7, he had no friends and spent all of his time after school by himself. He did well in his schoolwork, and he liked to read science-fiction, but he felt lonely and sad. Whenever another kid talked to him, he would think "she's just being polite", "she'll soon see how boring and weird I am". Then he would feel tense, his stomach would seize up and he would go blank. He'd stare at the floor and mumble something until she went away, and then he would feel mad at himself for missing the chance to make a friend.

He felt sad and discouraged. He slowly became depressed. His grades began to slip because he couldn't get motivated to study. He told himself he was weak and weird for not having friends, but calling himself names just made him feel more discouraged and hopeless.

The Shy Guy

By Grade 10, Joe was failing some courses and it was clear that things were not OK with him, so his parents insisted that he visit the family physician, who realized that Josh had become mildly depressed and referred him to a psychologist for a type of treatment called CBT (cognitive-behavioural therapy). The physician realized that Joe didn't need medication for this kind of depression, but help in connecting to other people. Also, the physician gave Joe a copy of this guide. Because he couldn't get to see the psychologist right away, Joe worked on his own at first to begin making changes in his life. He used Goal Setting to make a couple of activity goals, aiming to increase his time with other people.

Joe's goal was to join a chat room of people interested in science fiction.

My Goal	How often?	When exactly?
Join a science-fiction chat room and read some of the messages	Once per week, for half an hour	Either Monday or Wednesday evening

The result of Joe's first goal was pretty good: at first he just read others' posts, then he tried sending a few of his own, and was pleased when other people answered in a friendly way.

Joe chose for his second goal to *talk more to people in my class*, so he set himself this specific goal: Ask a question about the lesson once every 2 days and thank that person for the information.

My Goal	How often?	When exactly?
Ask a classmate a question about the lesson	Twice each week	In English class

The Shy Guy

The result of the second goal was also a good one: asking about school work was easier for him than other kinds of talking. His classmates were surprised to hear Joe asking questions and even thanking them – they mostly responded in a positive way. These small successes made him feel more hopeful and less depressed.

When he began treatment with a psychologist, he learned to overcome anxiety, how to change his thinking to be more supportive of himself, and how to slowly increase his contact with other people. He learned to be more comfortable in group situations. He kept making small changes, felt more connected to other people and gradually came out of his depression.

Useful Stuff

The next section includes information that is helpful for teens dealing with depression.

There is information about:

- Reasons to change
- Dealing with relapse
- Drugs, alcohol and depression
- Diet, exercise and depression

Reasons to change

Change is difficult, even when it is change to something better like a new home, a new sport or a new friendship. Why? Because it means doing things that are less familiar, getting new information and skills, and having experiences you haven't had before. When you are feeling stressed or down, it is particularly hard to change because you don't feel you have the energy or ability to try new things.

For this reason it is important to give yourself a pep talk, to remind yourself why change is worth the effort.

Change allows you new experiences

Not doing anything or doing what you have always done won't make you feel any different. And this can be boring. New experiences are a bit strange at first, but they are also exciting, interesting and fun. You deserve these things.

Change helps you to learn new skills

Doing things the same old way, especially if it isn't working, makes it hard to learn anything new. It makes you feel like you don't have choices and things will always be the same. Trying something new gives you choices. Remember when you learned a new video game, sport or subject in school. It may have been awkward or hard as you were learning but it became easier with practice.

Sometimes you can't do much to change a problem, but you can change how you think about it and in this way you can change how you feel...

The Dalai Lama

Change gives you power

Not doing anything often comes from feeling that a situation or problem is someone else's responsibility or fault. This makes you feel powerless and helpless. But you have choices in what you think and do. Working to change takes back your control and makes you stronger.

Okay, so you agree, change is worth it but it's still hard. So here are a couple of tips to help you get started:

Get the information you need

You've already begun by reading this far! Keep going and figure out what you need to know to make changes. Some of the information may come from guides like this; some may come from the Internet, from books or magazines, or from other people. Remember to get good information – if you aren't sure about some information you've found, check it out with a teacher, parent, or someone else you trust. Don't be afraid to ask questions.

Get useful support

Talk to friends, siblings, parents or other trusted adults. Remember that you are looking for people you trust who will support you in making changes. They can help you think of new strategies, give you helpful feedback and cheer you on for your efforts. People who don't listen, who just agree with you that a situation is lousy, or who tell you to 'get over it' aren't likely to be helpful and could make you feel worse.

Be patient with yourself

Don't expect things to be different overnight. Set realistic goals and allow time. Give yourself credit for trying something new. Remember that things don't always work the first time and learn from mistakes.

If you want things to be different, do something

The difference between deciding and doing is, well, doing. Once you take a small step you have changed from inaction to action – and then things are already a bit different. You've taken a step by reading this far; now see if you can make that difference bigger.

Drugs, alcohol and depression

Most teens find themselves in situations where alcohol or drugs are being used. But teens who are dealing with depression need to use extra caution in making decisions about alcohol and drug use.

People who are depressed may say they feel better (more relaxed or improved mood) when under the influence of alcohol or drugs. There are a couple of problems with this:

- they might start to believe that they can only be relaxed when using drugs or alcohol *(unrealistic thinking)*
- being high or drunk makes it harder to learn and use new skills to deal with situations *(poor problem solving)*.

This guide is all about developing realistic thinking and the ability to successfully solve problems.

Alcohol and drugs affect how people think, feel and behave. Depression also affects how people think, feel and behave, for the worse. So combining substance use and depression is a double whammy. It may lead to impulsive and poorly thought-out decisions. At the least, it may result in awkward or embarrassing situations that you have to deal with later, creating problems instead of solving them. At worst, it may result in serious outcomes where depressed teens do things to hurt themselves or those they care about.

Drugs, Alcohol and Depression

Alcohol and drugs can bring on depression or make it worse. Also, if a person is taking medication for depression, drugs and alcohol can stop the medication from working or cause a serious side effect.

Depending on how much is being used, and how much it interferes with your life, use of alcohol or drugs may become an addiction. At that point addiction is the biggest problem and it becomes harder to overcome depression.

If you are depressed and using alcohol or drugs then you need to think it through carefully. If you are seeing a counsellor, doctor or mental health professional, be honest and tell them. If you're not seeing a professional, consider talking with your parents or a trusted adult. If alcohol or drug use is interfering with your life, deal with it along with the depression.

Diet, exercise and depression

We all know that exercise and proper diet are good for you. Proper nutrition and diet give you lots of energy and provide you with the ingredients for a healthy body. Regular exercise helps your body to stay fit and helps with sleep. People who eat well and exercise regularly feel more confident, more energetic, and better able to cope with stress.

A healthy diet and regular exercise are especially important for people with depression. Taking care of your body can help to shift your mood. One research study suggested that, for some people, regular exercise is as effective as antidepressant medication in reducing depression.

If you're currently depressed, paying attention to your body and starting some form of exercise can be tough. The problem is trying to stick to fitness and nutrition plans when you can barely stick to your daily schedule! Depression takes away your motivation to do things: the less you do, the less you feel like doing... and so on.

Just as you learned in the goal-setting section, it is important to set small goals and gradually work up to a better level of fitness and health. If you've spent most of your free time sleeping or vegging in front of the TV, you have to change slowly.

A study found that college students who showed risk signs of depression and received cognitive behavioral treatment had better physical health, fewer visits to their doctors and improved patterns of diet and exercise than similar students who didn't have the training.

Buchanan, Rubenstein-Gardenswartz & Seligman. Prevention & Treatment, Volume 2, 1999

Things to remember:

be specific

"I'm going to eat better" sounds good, but it's too vague to be useful.

be consistent

Try to stick to your plans and don't let the excuses win.

the little things count

Try walking up some stairs instead of the elevator or get off one bus stop early and walk it.

find an exercise buddy

Doing it alone can be difficult. See if you can convince a friend or family member to join you and help each other stick to it.

Dealing with Relapse

Many people have successfully dealt with depression by using good coping skills like those in this guide, or by using outside help and professional treatment. But sometimes depression comes back. This is called *relapse*.

You can deal with the possibility of relapse in three ways.

1 Try to *prevent depression relapse* by using the antidepressant skills described in this guide: we're not saying these skills will always prevent depression, only that they're likely to be helpful. If you know that a situation is coming up, such as an exam, a move or a change in relationships, plan for it. Take things gradually and keep looking after yourself. If something stressful you didn't expect pops up, use realistic thinking, problem solving and goal setting to manage it. Also, make a list of useful strategies from this guide. What kind of realistic things did you say to yourself that worked? What kind of problem-solving choices were most effective? What goals made you feel better and kept you active? Write them down. You may need new strategies for new situations but it's a good idea to start with things that worked before.

Dealing with Relapse

2 *Notice the early warning signs of relapse.* Pay attention to yourself and your situation. Notice if your mood, or thinking or behavior is changing in a way that you don't like. If you detect those warning signs, respond quickly: talk to others you trust; use the antidepressant skills that worked last time; seek professional help if needed. The crucial thing is to make a plan for responding to these warning signs: we call this an *emergency mood plan*. It's a kind of first aid kit for your mood. Just having such a plan can lessen the chances you'll need it. If you are taking on too much, give yourself a break and 'de-stress'. But remember that keeping active in rewarding ways is good for you. In particular, try to stay involved with people and activities that help you to feel good about yourself.

3 Once a depression is underway, *think about what worked for you last time*. Was there a particular kind of professional help that was especially useful? Was there a particular antidepressant skill that really made a difference? For example, if it helped you before to 'Exercise 2 times per week', review whether you have been continuing to meet this goal; if not, maybe it's a good place to start. If you've handled depression once you can do it again. In fact, you probably have knowledge, skills and supports that you didn't have the first time. If you've been seeing a counsellor, doctor or mental health professional, contact them, especially if you are having thoughts of harming yourself.

Congratulations!

You've read through the information and skills sections, maybe you've done some writing or filling in the worksheets and maybe you've been trying out these skills in your life. Whatever stage you've reached, you understand depression better. If you keep on learning the antidepressant skills (reading over the skills section, filling in the worksheets and practicing the skills in your life), you will continue to get better at fighting depression.

This guide is easier to use if you write things down.
The following worksheets are designed to help with this.

Worksheet: Challenging Depressive Thoughts

Situation	Depressive Thoughts	Realistic Thoughts

Worksheet: Problem Solving 1

The problem:	
People who can support me:	
What I want to happen:	
3 things I could do:	

Worksheet: Problem Solving 2

Action	Good Points	Bad Points
1.		
2.		
3.		

Worksheet: Goal Setting

My Goals	How often?	When exactly?

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This book is meant to provide teens with accurate information about depression. It is not a psychological or medical treatment, and is not a replacement for treatment where this is needed. If expert assistance or treatment is needed, the services of a competent professional should be sought.

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