

## Conference paper from Teacher Christian Fellowship of NSW : THE INVISIBLE PROBLEMS

Vicky Kasunic, School Links Program Manager, South-west Sydney Area Health Service, Liverpool.

The most common mental health problems amongst children often go unnoticed. This workshop provides teachers with the knowledge to recognise, refer and support children with signs of depression and anxiety, as well as ideas for talking to parents about these issues.

Depression will be the second largest health problem worldwide by 2020, after cardiovascular disease (WHO, 1996). The level of disability caused by depression is equal to that caused by blindness or paraplegia. Depression is a chronic condition.

Young people becoming depressed can expect to have 5-6 episodes of depression in a lifetime. Most episodes resolve within 7-8 months, however 20% of people continue to be depressed for up to 2 years. The younger the person is at their first episode of depression, the greater the likelihood of further and increasingly severe episodes. Depressed young people are six times more likely to kill themselves than those who are not depressed, and three times more likely to: use alcohol or drugs, have poor health and to perform below grade level at school.

With regard to prevalence, up to 24% of young people will have had one or more episodes of depression by the time they are 18. Ten to twenty percent of school-aged children will have anxiety problems and 20-30% of children with depression will also experience anxiety.

There are a number of factors that put children at risk for developing mental health problems. These include: unstable relationships with parents, the death of a parent, inadequate parenting skills, poor quality child care, family discord such as violence, parental separation, family breakdown, lack of peer support, bullying, abuse (physical, emotional, sexual), neglect, accidents or trauma, poverty, physical illness or disability, parents with mental health problems eg, depression, mental illness, drug & alcohol problems and lack of social support. Factors, which specifically put a child at risk for depression, are, having had a previous episode of depression, early onset of first episode, and anxiety. It is believed that anxiety might be involved in the developmental pathway of depression. There are a number of factors that can protect children from developing mental health problems. Many of these can be addressed via the school setting. These include: nurturing affectionate and secure relationships with adults, positive rewarding school environments, a sense of connectedness to school or community, social support, self-esteem or self-efficacy, positive personal achievements eg, sporting, academic, drama, involvement in pro-social peer groups, positive 'temperament', responsiveness to change and the child's own coping skills.

There is a considerable amount of overlap between the features or symptoms of depression and anxiety. With depression, the mood could be described as empty, sad, depressed, angry, irritable and "down in the dumps". With anxiety the mood is fearful, shy and nervous. Both depression and anxiety have worried and sensitive mood features. With regard to behaviour, depression is characterised by lethargy and suicidal acts, anxiety by shaking, avoidance, panic attacks, repeatedly asking questions and seeking reassurance. Crying, restlessness, fidgeting, pacing, social withdrawal, dependency, and clinginess are characteristic behaviours of both. Physical features of depression include appetite disturbance and subsequent weight loss or gain; those of anxiety are vomiting, diarrhoea, nausea, rapid heart rate, sweating, dizziness and rapid breath. Common to both are headaches, stomach aches, fatigue, and sleep disturbance. Both depression and anxiety feature poor concentration and negative thoughts; anxiety features a preoccupation with some perceived danger or threat. With depression there is a loss of interest, low self-esteem, indecisiveness, guilt, suicidal ideation, thoughts of worthlessness and helplessness and impaired memory.

Everyone at some time will experience features of depression and anxiety. Depression and anxiety are normal responses to some situations or events. Not all children who seem sad or worried have a mental health problem or need help. If a child displays a *significant number* of the features of anxiety and/or depression,

*most days* for 2 or more weeks, and you believe it is stopping them from doing something they want to do, or causing distress in the family or problems with school, or limiting the child's potential, you should refer them to the school counsellor or equivalent service.

If you are concerned about a child talk to them about it. Sometimes children won't answer questions. "What's wrong?" and "Why are you...?" questions may result in silence. Try making observations about the child's mood and behaviour. For example "You're taking a long time to finish that story. I wonder if you are feeling a bit sad today." Give children time and space to respond. Children may not respond. You may wish to say "Its OK if you don't feel like talking now. If you feel like talking later you can come and see me." Follow up with the child if they haven't spoken with you and you are still concerned.

When talking to parents about having noticed a problem organise a time when the child is not present. Describe the behaviours you are concerned about. Check with the parent if they have noticed any similar behaviours. Look out for any clues to problems at home. Be aware of any changes of routine for the child/family. Reassure parents that: there are services that can help, you are willing to work with the school counsellor; and you will support the child in class.

There are a number of ways to support these children in the classroom. Provide feedback to children about their strengths. Encourage the child to attempt new challenges. Help children realistically evaluate their own efforts. Remind children to praise themselves for their achievements. Break down tasks to simplify them. Approach the child and check how they are coping.