Feelings of depression

Throughout their development, young people may encounter various troublesome events that can affect one aspect of their lives or another, such as repeated academic failures, romantic breakups, rejection by peers, difficult family circumstances (e.g., economic instability, divorce of parents, loss of a relative). Depending on a youth's resilience and whether or not they are equipped to adapt and solve problems, such events can lead to episodes of depression of varying intensity. In addition, the structural effects on brain development, as well as mental health problems including depression, can affect a young person's motivation at school and, as a result, their school perseverance.

What the research says

A longitudinal study conducted by a research team at CRIRES in three regions of Quebec identified depression as the second-most important variable in predicting dropout in the first year of high school, just after poor grades in mathematics and French.\(^1\) Moreover, it is estimated that about 16 percent of Quebec high school students of all grades—10 percent of boys and up to 25 percent of girls—have symptoms of depression that are intense and frequent enough to warrant intervention.²

problems, young people with depression are less disruptive and attract less attention from teachers and other

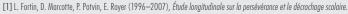
Because they are less disruptive than hyperactive students or those who have behavioural problems, youth suffering from depression often go unnoticed at school. Among the risk factors mentioned in the research are age, gender, socioeconomic status, family history of depression, mental health problems among parents, conjugal conflicts, divorce of parents, stressful life events, despair, cognitive distortion (e.g., dramatization, overgeneralization, negativity), attributional style (causes attributed to events), low self-esteem, and poor arades.34

Some individual characteristics have also been identified as factors that protect against depression. Those most often listed are good grades, motivation, feelings of personal and social competence, and positive relationships with adults outside the

family. These are more related to depression than other protective factors such as positive body image, intellectual competence, popularity, and presence of adequate social support.5

For more information

Depression in young people http://www.douglas.qc.ca/info/depression-jeunes?locale=en Children, youth and depression http://www.cmha.ca/mental_health/children-and-depression



[2] D. Marcotte (2000), La prévention de la dépression chez les enfants et les adolescents. In F. Vitara and C. Gagnon (Eds.), Prévention des problèmes d'adaptation chez les jeunes (Vol. 1) 221–270, Quebec City: Presses de l'Université du Québec.

[3] M. Windle and P. Davies (1999), Depression and heavy alcohol use among adolescents: Concurrent and prospective relations, Development and Psychopathology, 11, 823—844. Downloaded at:

http://www.researchgate.net/publication/12689021 Depression and heavy alcohol use among adolescents Concurrent and prospective relations

[4] K. R. Merikangas and J. Angst J. (1995), Comorbidity and social phobia: evidence from clinical, epidemiologic and genetic studies, Archives of Psychiatry and Clinical Neuroscience, 244, 297—303. [5] Ibid.



Taking effective action

Feelings of depression manifest themselves first by poor motivation at school, feelings of low personal competence, and poor grades. To take action on feelings of depression, and ultimately on the student's school perseverance, one must consequently take action on these "intermediaries."

Given the difficulty in effectively identifying depressed adolescents in school and the high dropout rate of these students, two types of priority action can be considered. First, implement systematic screening mechanisms and ensure good information flow between partners and front-line workers. Then roll out accessible and effective intervention programs, especially those that make use of cognitive behavioural therapies, meaning interventions based on practical exercises that focus on the observed behaviours.

Schools and the community should also undertake universal prevention measures to ensure that the primary protective factors are preventing depression and are promoting the mental health and well-being of youth and their feelings of personal and social competence. While some of these measures can take place directly in schools, many of them can also take place through community and institutional partnerships.

Avenues for effective action related to feelings of depression

Organize universal prevention activities for ALL youth, especially among adolescents:

- to promote dialogue about the issue of depression,
- to reduce isolation and demystify the topic,
- to promote youth mental health and well-being,
- to inform youth about the issue and make them aware of resources and emergency services they can use for themselves or a peer,
- to encourage youth participation in activities with peers while enhancing protective factors (e.g., motivating their interest, building on their strengths and skills),
- to support families in guiding youth, in particular by creating positive and rewarding relationships.

Organize targeted interventions for vulnerable youth by partnering with organizations in various networks:

- to implement systematic screening and intervention mechanisms for targeted youth (e.g., screening applications, individualized monitoring programs),
- to ensure good information flow between partners and various stakeholders working with young people and their families,
- to build positive connections with families in order to determine the best ways to intervene with troubled youth,
- to offer specialized services to youth in need (e.g., social workers, psychologists, psychiatrists).

