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YOUTHMENTAL HEALTH

Depression and anxiety looks much different in children and adolescents than in adults





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Intervention Center and the Group CEO for McDowell Center for Children in Dyersburg, TN. Lisa has been at Compass for 9 years, initially as the Clinical Director and then moved into the CEO role. Lisa has been instruin development the trau

moved into the CEO role. Lisa has been instrumental in development the traumacompetent program at Compass, and she is invested in promoting these principles within the Mid-South Community. Over the last four years, Lisa has expanded the services at Compass to include a robust outpatient program, which will soon include the addition of an inpatient acute program, to meet the growing mental health needs in the community.



What issues have been presenting themselves more so over this past year?

How does mental health affect

emotional ups and downs. Recent

concerns and stressors can evoke

emotions including shock, fear,

Children and adolescents have normal

events compounded with day to day

anxiety, worry, confusion, and anger.

with academic stresses and physical,

emotional, and social changes, can

Normal childhood development, along

make adolescents vulnerable to mental

health problems. With late childhood

and adolescences being a significant

developmental periods can be a time

when many mental disorders, such as

bipolar disorder, and eating disorders,

can emerge. The parent or caregiver

overall mood, behavior, and attitude.

notice changes in their willingness or

motivation to engage in day to day

peers. In addition, other key players

in the child's life, such as teachers or

coaches, may identify changes in the

activities at school, home, or with

youth's behavior.

may notice changes in your child's

The parent or caregiver may also

anxiety, substance use, depression,

period of brain development, these

children and adolescents?

This past year has been impactful on individuals and families in multiple ways. It has been an unprecedented time that has been difficult for parents and caregivers to navigate. At the

same time, children and adolescents have struggled to acclimate to the challenges that has been brought by the pandemic. For many youth, the last year has been a period of increased isolation and transitions. Families have isolated from other family members and youth from their peers. Youth have struggled with loss of traditional hallmarks and milestones and loss of that daily routine. Probably the most significant transition children have had to deal with is the changes in attending school daily. Movement to distance learning from classroom based learning has created anxiety around separation from peers. Also, families have had to learn to navigate distance learning and hybrid schedules. For some youth, the transition has exacerbated already existing learning or social issues, such as anxiety disorders, ADHD, or a learning disability.

Why are adolescents at risk for mental health issues?

Over the last year, we have seen an increase in number of families that are reaching out for additional supports for their child. Many children with mild or underlying mental health issues have seen the protective factors and resiliency skills that have been effective in the past less impactful with managing their emotional distress. For many children, the last 12-14 months have been one of the most impactful times in their lives

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and the lives of their family thus far. The emotional distress of the transitions and challenges has created experiences that are traumatic for them because it has been scary and out of their control. Many children are resilient and cope well, but some may have continuing difficulties as uncertainty has continued. Traumatic responses are not the same for every person. These reactions vary with age:

 Pre-school/toddler age children traumatic response may present as regressive behavior (bedwetting, not talking, lack of independence or clingy behavior), sleep of their family.

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disturbances/nightmares. They also present with a general fear.

School Age children traumatic response may present as difficulty concentrating, difficulty regulating emotions, aggression, nightmares, and somatic complaints (headaches, stomach aches). They also have preoccupation with their safety and safety

Adolescent traumatic response may be present as personality change, withdrawn. difficulty regulating emotions, high risk behaviors. They present with a radical shift in how they perceive the world.

When it comes to the trauma, it's all about how the individual responds or internalizes the experience. An event one person perceives as scary or stressful maybe perceived differently by another person. Trauma can exacerbate existing mental health needs including anxiety, depression, learning disabilities, ADHD, and substance use. Trauma symptoms manifests and impact children in multiple environments.

What are common mental health issues for youth?

Especially over the last year, anxiety and depression has become even more evident in many youth. Depression and anxiety looks much different in children and adolescents than in an adult. Often times, it can be misdiagnosed or misinterpreted for defiance disorders, anger issues, or ADHD. Many times the youth may only be able to verbalize intense anger and agitation when there are much more complex emotions underlying. Along with depression and anxiety. youth can sometimes struggle with substance use. Often, substance use is a means to manage underlying depression, anxiety,

What signs should parents watch for indicating a problem or

and mood instability.

Sadness is something everyone experiences. It is a common reaction to a loss or a setback, but it usually reduces with time. Depression is different. Symptoms a parent or caregiver should look for in youth:

- Is your child overwhelmingly sad for long periods?
- Does your child have difficulty concentrating?
- Is your child restless and trouble sitting still?
- · Does your child have excessive or more than usual irritability?
- Does your child have aches or pains,

headaches, cramps, or stomach problems without a clear cause?

• Does your child struggle to handle daily activities, such as sleeping, eating, or managing school work?

> For youth that struggle with anxiety, the symptoms will look different depending on developmental age. At an early age, children with a predisposition to anxiety have a childhood temperament characterized by high levels of cautious, fearful. and avoidant responses to

unfamiliar people, objects, and situations. School-Aged children present with social wariness and dysregulated worry. Adolescents struggle with managing worry and displaying inappropriate expressions of worry.

It is important to recognize that everyone experiences some level of anxiety at some point. At times, anxiety can be just as frustrating for the parent or caregiver. For children and adolescents with anxiety, it is likely something that they have been sensitive to from an early age that has centered around daily activities such as bedtime or drop off at school or daycare. Often, anxiety becomes impactful to a family when it exacerbates or begins to influence the child's overall ability to function day to day. Behaviors, such as defiance and aggressive outburst, can be a result of severe anxiety in a child that is seeking control over their environment.

What techniques or interventions are most effective?

The important thing for parents and caregivers to understand is that most children innately have the skills they need to work through their needs. Some youth just need some

additional support recognizing and employing those skills. Ironically, the most effective intervention for children and adolescents is that they have individuals that support them and promote overall mental health. The role of therapy and treatment focuses on developing enhancing resiliency and coping skills as well as engaging the family to provide that needed support. Resiliency is the ability to bounce back from, or to successfully adapt to, adverse conditions such as personal or community problems or loss. External Factors that build resiliency are caring and supportive relationships, high expectations for success, and opportunities for meaningful participation. Internal factors that build resiliency are social competence, problem-solving skills, autonomy, and sense of purpose and future. Therapy

promotes resiliency skills that increase "bounce back" by promoting social, emotional, and cognitive skills.

When is outpatient or inpatient the more appropriate course of treatment?

Understanding what services are appropriate for a youth and where to look can be extremely daunting and overwhelming. Often, ongoing crisis and struggles in multiple settings, such as the school or home, can create difficulty on families having clarity on next steps needed for the youth. In addition to inpatient, there are multiple outpatient options that can provide supports including full-time outpatient day programs (PHP), part-time outpatient programs (IOP), individual therapy, and medication management. In addition, families can seek out services to address both mental health and substance use needs (dual diagnosis). Families should consult their provider or pediatrician to determine the appropriate level of care and identify potential resources for services. Some indicators of potential need for additional

treatment options could be:

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- · Behaviors are beyond the ability of the family to maintain the safety of the child, family, and home.
- Behaviors are not responding to less intensive measures of current services or interventions.
- Continuous crisis that promotes the constant involvement of law enforcement, crisis services. additional school supports, or medical professionals.



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