What does it mean when a health care professional says “depression”? 

Hearing a health care professional say you have depression can be confusing. The good news is that the emotions and behaviors you have been concerned about are actually symptoms of a treatable disorder. By getting treatment and entering recovery, people with depression can manage their symptoms, feel better, and go on to lead productive, meaningful lives. Recovery does not necessarily mean a cure. It does mean that people are actively moving toward wellness.

It is important to talk with a health care provider about treatment options and additional information. Your provider may be a child and adolescent psychiatrist, general psychiatrist, psychologist, pediatrician, social worker, or other health care provider. If you are concerned that you may have depression, it is important to seek a thorough evaluation. The evaluation includes talking about your symptoms, blood and urine tests, and perhaps other tests to ensure that there is no underlying medical condition that could be causing the symptoms. It is also important to ensure that you can tolerate medication, if recommended as part of the treatment plan.

What do we mean by recovery?

Recovery is a process of change through which individuals improve their health and wellness, live a self-directed life, and strive to reach their full potential. 

Recovery focuses on wellness and resilience, encouraging [people] to participate actively in their own care.

My advice is to find out as much information as you possibly can about your diagnosis, treatment options, and supports around you. Information can give you power.

—Haley, Youth
What is depression?

When you have depression, you feel sad, empty, helpless, or hopeless almost every day, and the feelings generally last all day long for at least two weeks. Everyone feels sad or anxious from time to time, but the feelings that come with depression are much stronger and long lasting than the “ups and downs” of everyday life.

Feelings of significant depression usually interfere with day-to-day activities with your family, school, at work, or in other social situations. Sometimes depression involves irritability. Depression may also involve physical symptoms such as fatigue, sleep difficulties, and weight changes. Depression can also cause hopelessness, guilt, and suicidal thoughts.

Depression may happen in a single episode or be a recurrent condition through youth and adulthood. An individual could be diagnosed with major depression (which can be mild, moderate, or severe) or persistent depression. Treatment that involves medications and other elements of an individualized treatment program can help you to be more resilient, manage your symptoms, improve your everyday functioning, and achieve your personal goals. An individualized treatment program can include positive family or peer support.

What caused this?

Researchers and health care professionals do not completely understand the causes of depression. It is unlikely that a single factor causes depression. It is most likely caused by a combination of things such as genetics (i.e., family history of someone having depression), chemical changes in the brain, and/or environmental factors. Traumatic experiences can also add to the development of mental disorders. If you have experienced a traumatic incident, it is important to share that information with your mental health specialist and pediatrician.

How common is this disorder?

Data from Substance Abuse and Mental Health Services Administration show that 11.4% of youth, ages 12-17, had at least one major depressive episode in the past year.4

What do we mean by resilience?

Resilience is the ability to respond to stress, anxiety, trauma, crisis, or disaster. It is critical in recovery [from mental disorders].3
Depression can be best managed by one or more of the following interventions: medication(s), behavioral therapy, and family or peer support. If you are of consenting age, you may need to provide written consent for parents or caregivers to participate on the treatment team. It is important to talk to your health care providers about other types of treatment, such as complementary medicine, as well as programs that can provide additional support related to education, employment, housing, and vocation and career development. It is also important to have good self-care, such as a healthy diet, exercise, sleep, and abstinence from illicit drugs. You should collaborate with your family and health care provider to consider treatment options. Decisions should be made that fit your own priorities and goals.

**Medications**
Medications help relieve symptoms and can play an important role in preventing recurrence of depression. Each person reacts differently to these medications. For that reason, the prescribing health care professional may recommend different kinds or dosages of medication before finding the most effective approach for you. Most medications must be taken every day in order to be effective. Sometimes longer-acting medications are used. Be candid with your prescriber about use of any drugs or alcohol, and be patient—it can take several weeks to feel improvement from anti-depressant medication. It is important not to stop using medication as soon as it seems to be working. Most people need to stay on anti-depressant medication for at least several months, and often a year or longer, after recovery from a depressive episode in order to prevent a relapse or a recurrence of depression. For some people who have mild symptoms of depression, medication may not be necessary, and initial treatment with therapy can help. You and your mental health care provider, and trusted family members, should work out a personalized treatment plan that will best help your own recovery from depression.

**Therapy**
Behavioral therapy, cognitive behavioral therapy, or other forms of psychotherapy can help you develop skills for coping with situations that make you feel depressed or helpless.

**Support**
Your supportive family or peers that have managed similar challenges can also be an important part of your treatment team for depression. Talking with peers lets you learn from others who are further along in recovery. As part of your treatment team, these individuals can help you recognize mood changes before they become a greater problem. These partners can provide valuable support and encouragement so you can stay focused on your recovery and life goals.

---

I learned that I must understand what they [professionals] understand and become empowered, engaged and encouraged.

—Darrin, Youth
It is important to tell your health care professional about all of your symptoms, such as any particular fears or phobias, including social situations, or persistent low mood that may be bothering you. Be sure to report any problems or changes to your prescriber, including any use of drugs or medications, smoking, excessive caffeine (energy drinks), or alcohol. Sometimes when people try to self-medicate their depression with alcohol or drugs, it can get worse. If you have thoughts or plans to harm yourself or others, contact your prescriber or the National Suicide Prevention Lifeline, 1-800-273-TALK (8255) or via the web chat function at http://www.suicidepreventionlifeline.org immediately.

EDUCATION + TREATMENT + SUPPORT = RECOVERY AND RESILIENCE
Where can I learn more and get support?

SAMHSA would like to thank the American Academy of Child and Adolescent Psychiatry, the American Psychological Association, the American Psychiatric Association, and the Caring for Every Child's Mental Health Campaign Family and Young Adult Councils for their collaboration in developing and disseminating this fact sheet. This report was prepared for the Substance Abuse and Mental Health Services Administration (SAMHSA) under contract number HHSS280201500007C, with SAMHSA, U.S. Department of Health and Human Services. Lisa Rubenstein served as the Project Manager and Eric Lulow served as the Government Project Officer.

**REFERENCES:**


**Disclaimer**

The views, opinions, and content of this publication are those of the authors and do not necessarily reflect the official position of SAMHSA or HHS. The information presented in this document should not be considered medical advice and is not a substitute for individualized patient or client care and treatment decisions.