

I. Brief Overview

D. Why this problem is important to schools

Excerpt from: *Consequences and Correlates of Adolescent Depression*

by Sherry Glied, PhD; Daniel S. Pine, MD

In *Archives of Pediatrics & Adolescent Medicine*, Vol. 156 No. 10, October 2002

<http://archpedi.ama-assn.org/cgi/content/full/156/10/1009>

...Depression may lead girls and boys to miss school or to fall behind in school. Education is a critical determinant of adult earnings, so if school attendance and performance are substantially affected by depression, adolescents may lose earnings in the future. Depression may inhibit school performance of children and adolescents, just as such symptoms reduce work performance among adults.³⁻⁵ Second, depression may affect other aspects of well-being. Such effects could occur through a connection between depression and dangerous behaviors, such as alcohol and drug use, bingeing, and smoking. Children with emotional and behavioral disorders in general are significantly more likely to experience substance use and are at higher risk of involvement with the juvenile justice system.^{6,7} ...

It is difficult to assess the consequences of depressive symptoms because depression in adolescents is often associated with many other factors that also raise the risk of undesirable behaviors and outcomes. Mental health problems in adolescents tend to be concentrated in the most disadvantaged groups—children from minority groups, from single-parent families, and from low-income families. Furthermore, family studies suggest that the prevalence of depression is higher among adolescents from families that include a parent with depression, and these children may be at risk for other poor outcomes as well.¹²

Adolescent depression may also be associated with environmental adversity. The relationship between depression and extreme stress has been demonstrated in children subjected to natural disasters, children who are homeless, and children subjected to physical or sexual abuse.¹³⁻¹⁵ While these studies consistently note associations between depression and extreme adversity, the findings are limited by the nature of the generally nonrepresentative samples in most studies...

Depressed adolescents are at much higher risk of poor performance at school, of using drugs and alcohol, and of bingeing. Together, these findings suggest that depression is an especially serious problem among children who live in risky environments and that depression is, in turn, associated with other serious risks.

The results of this study show that school attendance, smoking, bingeing, and suicidal ideation are significantly

correlated with depression. Information about these indicators and behaviors as well as the presence of traumatic life events could be powerful tools for physicians in the difficult task of identifying adolescent depression and initiating treatment. Overall, studies show that about 1 in 20 adolescents currently suffers from depression, suggesting that routine screening for depression has considerable merit. In this study, among adolescents who missed more than 10 days of school in the preceding month, smoked, engaged in bingeing, or had suicidal thoughts, rates of elevated depressive symptoms were more than twice as high. Thorough screening for depression in this group is critical.

References:

- Greenberg PE, Stiglin LE, Finkelstein SN, Berndt ER. The economic burden of depression in 1990. *J Clin Psychiatry*. 1993;54:405-418.
- Ryan ND, Puig-Antich J, Ambrosini P, et al. The clinical picture of major depression in children and adolescents. *Arch Gen Psychiatry*. 1987;44:854-861.
- Puig-Antich J, Kaufman J, Ryan ND, et al. The psychosocial functioning and family environment of depressed adolescents. *J Am Acad Child Adolesc Psychiatry*. 1993;32:244-253.
- Koyanagi C, Gaines C. *All Systems Failure*. Washington, DC: National Mental Health Association and the Federation of Families for Children's Mental Health; 1993.
- Lewis DO, Shanok SS. Medical histories of delinquent and nondelinquent children: an epidemiological study. *Am J Psychiatry*. 1977;134:1020-1025.
- Rende R, Weissman M, Rutter M, Wickramaratne P, Harrington R, Pickles A. Psychiatric disorders in the relatives of depressed probands, II: familial loading for comorbid non-depressive disorders based upon proband age of onset. *J Affect Disord*. 1997;42:23-28.
- Fergusson DM, Horwood LJ, Lynskey MT. Childhood sexual abuse and psychiatric disorder in young adulthood, II: psychiatric outcomes of childhood sexual abuse. *J Am Acad Child Adolesc Psychiatry*. 1996;35:1365-1374.
- Goenjian AK, Pynoos RS, Steinberg AM, et al. Psychiatric comorbidity in children after the 1988 earthquake in Armenia. *J Am Acad Child Adolesc Psychiatry*. 1995;34:1174-1184.
- Zima BT, Wells KB, Benjamin B, Duan N. Mental health problems among homeless mothers: relationship to service use and child mental health problems. *Arch Gen Psychiatry*. 1996;53:332-338.