About 13% of adults of reproductive age experience clinical depression each year. We're not just talking about having a few down days or the postpartum "baby blues." We're talking about a serious diagnosable clinical depression. The rates are even higher for parents who are the primary caretaker, have children under 3, are low income or minorities, are an adolescent parent, or have more than one child (Kessler, 1994, Hendrick, 2000).

When a parent experiences clinical depression, his/her children are affected. The younger the child is when the parent becomes depressed, the greater the impact can be on the child (Beardslee et. al., 1998). Studies show that children of depressed parents run a higher risk not only of developing depression themselves, but also a higher risk of problems with bonding, anxiety, physical health, academic performance, problems with peers, poor self-esteem, attention deficits, aggressive behavior, and language delays (Downey and Coyne, 1990, Radke-Yarrow, 1985 and 1998, Weissman , 1987, Jaenicke., 1987, Hammen, 1988, Lyons-Ruth, 1997, Sharp, 1995).

Of course, risk of problems does not have to become problems. How depressed the parent is, how frequently they are separated from the child by hospitalizations, how long they stay depressed, and what other adults are there to take care of the child's needs all will influence how severely a given child will be affected. It is possible, although more difficult, to be clinically depressed and still be a very good parent. The quality of a parent’s relationship with their child or children plays the key role. Also, the more quickly a depressed parent recovers, the less likely their children are to be adversely impacted.

While it isn't possible to "immunize" a child from being affected by a parent's depression, there are lots of things that parents can do to help their child understand and cope. Children usually do well if the depressed parents are able to be supportive in spite of their depression, or if the child can receive support from another parent or caring adult. Being honest with the child, listening, and explaining depression and its symptoms in age-appropriate language are ways to communicate this important support.

Here are some messages children need to hear:

1. The depression is not your fault.
2. You can't fix it and you are not responsible for taking care of me.
3. I still love you, and I will make sure that if I can't take care of your needs, I will find another adult who can (be sure to be specific about what need and who will meet them).
4. You are not alone. Many adults care about you (it helps to make a list of who). You may talk to them when you need to.
5. It is OK to have whatever feelings you have about this (you may have to help a child identify and name the feelings, and find outlets for expressing them such as drawing or physical activity).
6. It is OK to ask for what you need.

It is also important to watch children for signs of depression. Clinical depression affects 2% of young children and 6% of all adolescents each year (Birmaher, 1998). Children sometimes show signs of depression differently than adults, and may act it out in their behavior more. They may be irritable, have an explosive temper, complain of lots of physical symptoms for which the doctor can find no medical cause, withdraw or lose interest in fun activities, talk about dying or hurting themselves or others, put themselves down, or just seem very sad and hopeless. In adolescents, starting to smoke or drug and alcohol use can be a symptom of depression. It is helpful to have your child evaluated by a mental health professional if he/she shows these symptoms.

If you are experiencing a clinical depression, the most important thing you can do to help your children is to take care of yourself. If you are on medications for your depression, take them consistently. Follow through on counseling and medical appointments even when you don't feel like it. Try to exercise and eat a healthy balanced diet. Don't use alcohol and drugs as a way of coping. And take breaks from your children to do something fun and relaxing for you. Remember, you are the most important person in your child's life and he/she needs you!
References:


Children usually do well if the depressed parents are able to be supportive in spite of their depression, or if the child can receive support from another parent or caring adult. Being honest with the child, listening, and explaining depression and its symptoms in age-appropriate language are ways to communicate this important support. Here are some messages children need to hear: The depression is not your fault. A Child's Book About Parental Depression, is designed to explain parental depression to children and help them cope with their feelings and reactions. It is available through Magination Press (800-374-2721). For more information or to schedule a speaking engagement, contact Ms. Andrews at BACOLO@comcast.net. Helping Someone with Depression. Parent's Guide to Teen Depression. Postpartum Depression and the Baby Blues. Seasonal Affective Disorder (SAD). Teenager's Guide to Depression. Divorce is never a seamless process, but these tips can help your children cope with the upheaval of a breakup and come out the other side more resilient, more understanding, and even with a closer bond to both parents. How can I help my child through divorce? A separation or divorce is a highly stressful and emotional experience for everyone involved, but children often feel that their whole world has turned upside down.