Understanding Mood Disorders in Children and Teens

Learning about your child’s symptoms empowers you to successfully advocate for, and effectively participate in your child’s mental health care. Just like a physical health condition, a mental health condition can be treated once identified.

Conversely, ignoring warning signs you may be observing in your child will not make those concerning behaviors go away. Early detection and intervention will contribute to a better longterm outcome for your child.

Mental health is a component of holistic health, and experiencing mental health symptoms is no one’s fault. The most important things you can do are educate yourself, partner with qualified professionals, and remember that you, and your family, are not alone in this process.

Screening and Diagnosis

If you’ve noticed your child or teen has undergone a change in mood lasting several weeks or more, you may want them to get a mental health screening.

A mental health screening is as important as a regular physical check-up and can be performed at your pediatrician’s or family physician’s office.

Results of a mental health screening don’t necessarily lead to a diagnosis, but they can help determine if additional care might be needed. If so, your primary care physician will be able to help make a referral to a mental health professional, who in turn can make a diagnosis.

What You’ll Learn in this Brochure

- How mood disorders are diagnosed and when to get a screening
- How to find a provider
- What questions to ask your provider
- What treatment options are available
- How to plan for future safety
- How to receive support for yourself as a parent or caregiver
- How to talk to your child about their emotions
- How the Depression and Bipolar Support Alliance can support you
Before Meeting with a Mental Health Professional

Talk to your child about how they are feeling. Maintaining open communication with your child can help put them at ease if they are feeling distressed. Speaking about emotions also gives children permission to speak about feelings or issues bothering them.

Additionally, you can work with your primary care physician to rule out physical health concerns that may be impacting their behavior. Identifying physical ailments that could be contributing to the observed symptoms can help form an accurate mental health diagnosis.

Diagnosis of Depression

Adults aren’t the only ones who can experience depression. Children and teens can also be diagnosed with depression.

Symptoms of depression in children and teens can include:

- Frequent irritability, sadness, or crying
- Loss of interest in activities that were once enjoyable
- Lack of energy, difficulty concentrating or making choices
- Feelings of hopelessness, worthlessness, or guilt
- Withdrawing from friends and family
- Marked increase or decrease in appetite or weight
- Complaints of stomach aches and/or headaches when no physical cause can be found
- Change in school performance or concentration
- Sleeping too little or too much during the day
- Thoughts of death or suicide and/or self-harming behavior

Diagnosis of Bipolar

Bipolar disorder is a condition marked by two discrete periods of change in mood, energy, or thinking and behaviors—periods of mania (or hypomania) and depression. Symptoms may emerge gradually or suddenly.

**BIPOLAR I**

In this condition, the individual experiences one or more episodes of mania, though depression symptoms typically occur at different times. Symptoms of mania reflect a distinct change from your child’s usual functioning, and include:

- Elevated mood or euphoria
- Grandiosity
- Flight of racing ideas or thoughts
- Talking more than usual or pressure to keep talking
- Extreme irritability or hostility
- Excessive distractibility
- Decreased need for sleep without fatigue
- Increased involvement in pleasure-seeking activities or risky activities
- Impaired judgement
- Hearing or seeing things others don’t hear or see
- Highly odd, unusual thoughts

**BIPOLAR II**

Individuals experience periods of depression and periods of hypomania. Hypomanic symptoms are the same type as manic symptoms, but are briefer and/or less intense.

**CYCLOTHYMIA**

Individuals experience recurrent periods of less severe, but definite mood swings that persist for a year or longer. These symptoms cause impairment in the child’s life.

**OTHER SPECIFIED BIPOLAR AND RELATED DISORDER (OSBARD)**

This was previously referred to as Bipolar Disorder-Not Otherwise Specified (BP-NOS). This diagnosis is used when individuals have clear manic and depressive symptoms that wax and wane but do not fit Bipolar I, Bipolar II, or Cyclothymia.
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Risk Factors

While there is no one ‘reason’ for a mood disorder, certain factors put a child or teen at higher risk. Some of these risk factors can include:

- Having a first-degree relative, such as a parent or sibling, with bipolar disorder
- Periods of high stress
- Adverse Childhood Experiences (ACES), such as abuse (emotional, physical, or sexual), neglect, witnessing or experiencing violence, poverty, and systemic discrimination.
- Drug or alcohol abuse

Finding a Provider

If your primary care physician recommends your child could benefit from mental health care services, they can make a referral to a mental health provider.

Review your insurance policy to determine what providers are in-network. Some employers offer Employee Assistance Programs (EAPs) that can help connect you with a mental health professional. Different providers have different specialties:

- Psychiatrists can help with medication and prescribing for a mood disorder
- Social workers and psychologists help with outpatient therapy services
- Certain practices offer group therapy and family therapies

Important Questions to Ask a Mental Health Provider

- Ask if they are familiar with mood disorders in youth
- Ask what type of therapy they use and have them explain their approach to evaluation and treatment
- Establish how you will define progress in treatment
- Determine the anticipated timeline for treatment

Creating A Safety Plan

- Once you’ve identified treatment providers and a treatment team, it can be helpful to create a safety plan for your child.
- Safety plans can include important phone numbers, the name of your child’s providers, and specific instructions to follow in case of an emergency.
- They also include information that describes what warning signs of self-harming behavior may look like for your child or teen, as well as potential triggers, persons who can be supportive, and coping strategies.

Support for Caregivers

- As a caregiver, creating a support system for yourself is an essential part of raising a child living with mental health challenges. In addition to the benefits you receive, modeling good self-care is a gift you give to your child. It can teach them to do the same, which will contribute to their well being.
- Find support from your own therapist or from peers who may understand what you are going through.
- Connect with our parent and caregiver online support community to find connection, resources, and hope. This family-focused community provides reliable information to caregivers about mood disorders, treatment, school accommodations, research, and more. Learn more at DBSAlliance.org/Parents.
- Connect with one of our DBSA support groups. Whether you live with a mood disorder or are caring for someone who lives with depression or bipolar, our in-person and online support groups give people a welcoming place to share experiences, discuss coping strategies, and offer each other hope. For more information, visit DBSAlliance.org/ParentSupport.
Talking to Your Child

Talking to your child about their emotions is a great way to help them build lifelong emotional literacy.

The term ‘emotional literacy’ refers to the ability to understand one’s own emotions as well as the emotions of others. Regardless of the challenges of living with depression or bipolar, everyone needs skills to understand and talk about their feelings.

Modeling that it is okay to talk about feelings and challenging situations is especially important for children and teens who live with depression or bipolar. Talk to your child about their experiences and emphasize that just as we care for our physical health, we also need to care for mental health.

Meet the DBSA Mood Crew®

A great tool to help teach your child to recognize their emotions is the DBSA Mood Crew.

Ideal for children ages 4–10, the DBSA Mood Crew is an emotional literacy program that can help parents and caregivers (as well as educators and clinicians) work with children to understand emotions and express their feelings.

Through a combination of worksheets, stories, games, and activities, the DBSA Mood Crew gives you and your children a fun, active, and creative way to talk about the (often hard-to-talk-about) world of emotions.

Find out more DBSAAlliance.org/Parents

About DBSA

WHO WE ARE

The Depression and Bipolar Support Alliance (DBSA) is the leading peer-focused mental health non-profit whose mission is to provide hope, help, support, and education to improve the lives of people living with mood disorders. DBSA, at the national level, supports more than 500 support groups and over 120 local affiliate chapters. Each year, DBSA reaches more than a million individuals with support, educational resources, and tools to help individuals living with mood disorders lead productive and fulfilling lives. Additionally, through our advocacy efforts, we amplify peers’ voices and work toward systemic change in the delivery of mental health care.

DBSA offers peer-based, wellness-oriented support, empowering services, and resources. These are available when people need them, where they need them, and how they need to receive them. DBSA is available online 24/7, in local support groups, in audio and video casts, in printed materials, and in mental health care facilities across America.

OUR VISION

The Depression and Bipolar Support Alliance (DBSA) envisions wellness for people living with mood disorders (depression and bipolar disorder).

OUR MISSION

DBSA provides hope, help, support, and education to improve the lives of people who have mood disorders.