

Depression

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“Many are giving up heart for the battle of life... as the showdown between good and evil approaches with its accompanying trials and tribulations.

Satan is increasingly striving to overcome the Saints with despair, discouragement, despondency, and depression.”



President Ezra Taft Benson

What is depression?

- A medical disorder that causes a person to feel persistently sad, low or disinterested in daily activities.
- Feeling sad or blue continues over an extended period of time.
- Symptoms are caused by an illness with complex genetic and environmental origins - not by flawed attitude or personality.

What does depression look like in children?

At Home:

- Persistent sadness, downcast expression, low mood
- Persistently decreased interest in activities
- Sleep & appetite disturbances
- Feelings of worthlessness
- Increased fatigue & irritability
- Increased physical complaints
- Preoccupation with death or hurting oneself
- Experimentation with alcohol or drugs

What does depression look like in children?

At School:

- Difficulty concentrating - forgetfulness
- Impaired ability to plan or use abstract reasoning
- Social isolation
- Problem behaviors
- Heightened sensitivity to perceived criticism
- Anxiety disorders
- Learning disorders

Depression & Suicide

- Major depression is the psychiatric diagnosis most commonly associated with suicide.
- About 2/3 of people who complete suicide are depressed at the time of their death.

American Association of Suicidology

Depressed individuals who exhibit the following are high risk for suicide:

- Extreme hopelessness
- Lack of interest in activities that were previously enjoyed
- Heightened anxiety - panic attacks
- Insomnia
- Talks about suicide - history of attempts
- Irritability - agitation

2007 Top 15 States for Suicide – All Ages

Rate per 100,000 Population

Rank	State	Age-adjusted Rate
1	Alaska	21.8
2	Montana	20.5
3	New Mexico	20.40
4	Wyoming	19.3
5	Nevada	18.4
6	Colorado	16.7
7	West Virginia	16.6
8	Arizona	16
9	Oregon	15.9
10	Kentucky	15.3
11	Idaho	14.9
11	North Dakota	14.9
13	Oklahoma	14.7
14	Maine	14.5
15	Utah	14.3

2007 Suicides in US – All Ages

Rates per 100,000 population

Ranking	State	Rate	Ranking	State	Rate
1	Alaska	149	27	Indiana	125
2	Montana	196	28	Louisiana	122
3	New Mexico	401	29	New Hampshire	158
4	Wyoming	101	29	South Carolina	530
5	Nevada	471	31	North Carolina	1,077
6	Colorado	811	32	Pennsylvania	1,441
7	West Virginia	1,016	33	United States	34,598
8	Arizona	16	33	Virginia	880
9	Oregon	594	34	Ohio	1,295
10	Kentucky	649	35	Michigan	1,131
11	Idaho	223	36	Delaware	95
11	North Dakota	95	36	Minnesota	572
13	Oklahoma	531	38	Iowa	322
14	Maine	191	39	Georgia	997
15	Hawaii	378	39	Hawaii	133
15	Vermont	89	41	Nebraska	181
17	Arkansas	402	41	Texas	2,433
17	Florida	2,587	43	California	3,602
19	Kansas	382	44	Maryland	518
20	Missouri	808	45	Rhode Island	96
20	Tennessee	844	46	Illinois	1,108
22	Massachusetts	396	47	Massachusetts	516
23	Washington	865	48	Connecticut	271
24	Wisconsin	729	49	New York	1,396
25	Alabama	592	50	New Jersey	596
25	South Dakota	102	51	District of Columbia	36

2007 Youth Suicides by States

Ages 15 -24 years Rate per 100,000 population

Rank	State	Rate	Rank	State	Rate
1	Alaska	30.0	26	Indiana	11.2
2	Idaho	21.5	27	Ohio	10.8
3	New Mexico	21.0	28	Louisiana	10.5
4	South Dakota	20.5	29	Arkansas	10.4
5	Wyoming	19.8	29	Iowa	10.4
6	Maine	18.6	31	Tennessee	10.3
7	North Dakota	16.6	32	Texas	10.1
8	Arizona	15.7	33	Florida	9.9
9	Utah	15.4	34	Pennsylvania	9.7
10	Montana	14.8	35	North Carolina	9.5
11	West Virginia	14.5	36	Michigan	9.3
12	Kansas	14.4	37	Virginia	9.0
13	Nevada	13.6	38	Illinois	8.8
14	Colorado	13.4	39	Maryland	8.6
14	Wisconsin	13.4	39	Hawaii	8.6
16	Kentucky	12.9	39	New Hampshire	8.6
17	Washington	12.2	39	South Carolina	8.6
18	Oregon	11.9	43	Delaware	8.3
19	Nebraska	11.8	44	Georgia	7.9
20	Alabama	11.5	45	Connecticut	7.0
21	Mississippi	11.4	45	Rhode Island	7.0
21	Minnesota	11.4	47	California	6.9
21	Vermont	11.4	48	New Jersey	5.3
24	Missouri	11.3	49	Massachusetts	5.6
24	Oklahoma	11.3	50	New York	5.3
			51	District of Columbia	2.1

School problems, family history of suicidal behavior and poor parent/child communication were the most notable among adolescent completers.



Many adolescent suicides occur in the context of a stressful life event, such as a loss, a disciplinary action or romantic breakup.

While these stressors are experienced by most teens, they may be the final straw for teens at risk for suicide.



What to watch for: Is Path Warm

- I Ideation: threatening to hurt self; seeking access to weapons; writing, talking or drawing about death
- S Substance abuse: increased
- P Purposelessness: no reason for living
- A Anxiety: agitation, too much/little sleep
- T Trapped: there's no way out
- H Hopelessness
- W Withdrawal: from friends, family & society
- A Anger: rage, uncontrolled anger, seeking revenge
- R Recklessness: engaging in risk activities
- M Mood Change: dramatic mood changes

"Suicide is a sin - a very grievous one, yet the Lord will not judge the person who commits that sin strictly by the act itself.

The Lord will look at that person's circumstances and the degree of his accountability at the time of the act."



Elder M. Russell Ballard
Ensign, Oct. 1987

Provo City School District Statistics

Year	Attempts & Threats	Hospitalized	Completions
1999-2000	75		9th grade student & 1 male teacher
2000-2001	Elementary Middle Secondary	3 46 62	No completions
2001-2002	Elementary Middle Secondary	16 33 61	4th grade student & 8th grade student
2002-2003	Elementary Middle Secondary	13 7 23	No completions
2003-2004	Elementary Middle Secondary	15 17 21	9th grade student & 11th grade student
2004-2005	Elementary Middle Secondary	33 13 88	9th grade student

Provo City School District Statistics

Year	Attempts & Threats	Hospitalized	Completions
2005-2006	Elementary Middle Secondary	8 18 30	No completions
2006-2007	Elementary Middle Secondary	19 8 43	No completions
2007-2008	Elementary Middle Secondary	10 6 16	No completions
2008-2009	Elementary Middle Secondary	0 8 16	No completions
2009-2010	Elementary Middle Secondary	6 3 14	No completions
2010-2011	Elementary Middle Secondary	2 7 30	No completions

Verbal Warnings

- "I don't want to be a burden."
- "I'm going to end it all."
- "I can't stand it any longer."
- "People would be better off without me."

When to get help...

Call 9-1-1 or seek immediate help from a mental health provider when you hear, say or see any one of these behaviors:

- ♦ Someone threatening to hurt themselves
- ♦ Someone looking for ways to kill themselves: seeking access to pills, weapons, or other means
- ♦ Someone talking or writing about death, dying or suicide

Call 1-800-273-TALK (8255)
for a referral if person exhibits one or more behaviors.

Where to get help...

- School Counselor/Psychologist
- Family Doctor
- Local Therapist
 - Clergy
- Emergency Room
- Wasatch Mental Health

Utah County HOPE Task Force Support Programs

- Educational presentations
- School programs - HOPE Squads
- Survivor group
- Nondenominational clergy training
- Statewide suicide prevention conference
- Annual suicide awareness walk
- Media training

What is Utah doing?

- Developed statewide plan to deal with suicide prevention
- Organized state task force to implement plan and provide statewide training and support
- Organized statewide crisis team to respond to school suicides or shootings
- Researched national school-based programs and implemented:
 - Peer to peer school-based program – HOPE Squads
 - Mental health school-based program – Hope for Tomorrow

What is Utah doing? Cont.

- Implemented mental health assessment pilot program at Juvenile Court in Davis County
- Community-based training
- Annual statewide suicide prevention conference for professionals working with adolescents
- Support groups for families affected by suicide
- Mental health groups for adolescents who have attempted suicide
- Statewide blood test and hair follicle sample collected on completers

