

## High incidence of depression among children - The Times of India

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MUMBAI: Blame it on the high levels of competition or the struggle to keep up the Joneses, but our children have never faced such an assault on their senses. The natural corollary, say doctors is the growing incidence of Big D— as the epidemic of depression is called—among youngsters.

According to the National Crime Records Bureau, the under-14 age group comprises 2% of all suicides. But in this age of "affluenza" and unlimited access to the internet, the Big D will only increase, fear doctors. Consider the 16-year-old who recently confided in her psychiatrist about the reason of her depression: getting half a mark less than the student who stood first.

It was perhaps the depression at work when three children — all minors under 18 years of age— took their lives within a span of three days. Parents of these children are perplexed that their seemingly happy child could commit suicide, but doctors point out that childhood depression is difficult to decipher.

According to Dr Samsah Soonawala, associate director of psychiatry research at Jaslok Hospital, "Children face all kinds of pressure at school as well as socially. They have to keep up with school curriculum as well as with the peer pressure of acquiring the latest gadgets or dating."

Students don't eat or sleep adequately. As their stress factors are different from adults, its manifestation is also different (the incidence, however, is the same: Like men, 10% of the teenaged boys will be depressed in their lifetime and, like women, 20% of the teenaged girls will face depression in their lifetime).

"Children don't exhibit sadness like older people do. They are not going to tell their peers that they are depressed about something," says Dr Vishal Sawant, head of psychiatry at Cooper Hospital in Juhu.

Children are more likely to change completely. "For instance, a child who is silent by nature could suddenly start exhibiting signs of attention deficit hyperactive disorder (ADHD)," adds Dr Sawant.

Dr Soonawala says, "Adults can talk about feeling blue or experiencing aches and pains, but children will suddenly develop school phobia or academic decline or behaving differently. He\she may become irritable, for instance."

Social psychiatrist Dr Harish Shetty sees the increasing incidence of depression as a sign of the times. "The age of onset of violence has gone down, the age of onset of substance abuse has gone down, the age of onset of sexual offence has also gone down. Hence, it is not surprising that the age of onset of depression has also gone down," he says.

He blames the "shifting environment" for the change. "We are trying to live a century within a lifespan. While the physical orchestra of the body has changed, the mental software has not kept pace. So depression and suicidal thoughts are bound to occur."

What can society and parents do to help out? Dr Shetty says parents have

what can society and parents do to help out? Dr Shetty says parents have to daily repeat a three-point formula to their children: "We have to tell our children that they are fantastic. We have to tell them that exams are easy. The third point to reiterate is that life is beautiful." Parents have to ensure that children play – even if it is alone – for a few hours every day. "Joint activity should be cherished and parents should ensure that children are not sacrificing joy for performance."

Says Dr Sawant: "Our schools have devised a good formula to help children with learning disability. Now, we have to use the same method to screen children for depression at schools."

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