## Myths & Facts about Teen Depression

**MYTH** Teens who claim to be depressed are weak and moody and just need to pull themselves together.

**FACT** Depression is not a weakness, but a serious health disorder. Both young people and adults who are depressed need professional treatment.

**MYTH** There is nothing anyone can do to help people who are depressed – they just need to work through it.

**FACT** A trained therapist or counselor can help them learn more positive ways to think about themselves, change behavior, cope with problems or handle relationships. Also, a physician can prescribe medications to help relieve the symptoms of depression. For many people, a combination of psychological therapy and medication is beneficial.

**MYTH** Only adults can get truly depressed.

**FACT** Depression is epidemic among teens today. Up to 20% of young people will experience clinical depression during their teenage years. That’s one out of every five teenagers.

**MYTH** People who are depressed mostly feel sad.

**FACT** Other symptoms of depression can be irritability, lack of energy, change in appetite, substance abuse, restlessness, racing thoughts, reckless behavior, too much or too little sleep, or otherwise unexplained physical ailments.

**MYTH** Telling someone to cheer up usually helps.

**FACT** Trying to cheer someone up might make them feel even more misunderstood and ashamed of their thoughts and feelings. It is important to listen well and take them seriously.

**MYTH** Most people with depression cannot be helped.

**FACT** Depression can be effectively treated in 90 percent of cases with a combination of medication and therapy. Unfortunately, only 1 in 3 people with depression will get help.

**MYTH** Depression does not run in families.

**FACT** Children with depression are more likely to have a family history of depression.

**MYTH** Once depression is treated, it goes away.

**FACT** Almost 75% of teenagers who experience an episode of clinical depression will experience another one in their lifetime.
Myths & Facts about Suicide

**MYTH**  Only depressed kids attempt suicide.

**FACT**  Although the number one contributing cause of suicide is depression, teens don’t have to be clinically depressed to have suicidal feelings or to attempt suicide. Even feeling extremely “bummed out” for a relatively short period of time can lead to impulsive suicide attempts.

**MYTH**  Teens who talk about suicide don’t kill themselves.

**FACT**  Teens who are thinking about suicide usually find some way of communicating their pain to others – often by speaking indirectly about their intentions. Most suicidal people will admit to their feelings if questioned directly.

**MYTH**  There is really nothing you can do to help someone who’s truly suicidal.

**FACT**  Most people who are suicidal don’t really want their lives to end – they just want the pain to end. The understanding, support, and hope that you offer can be their most important lifeline. Teenage suicide accounts for 12% of all teenage deaths (almost 2,000 teens kill themselves each year, and many more attempt suicide.) Many of these deaths could be prevented with intervention.

**MYTH**  Discussing suicide may cause someone to consider it or make things worse.

**FACT**  Asking someone if they are suicidal will never give them an idea that they haven’t thought about already. Most suicidal people are truthful and relieved when questioned about their feelings and intentions. Doing so can be the first step in helping them to choose to live.

**MYTH**  Most teens who are clinically depressed do not actually consider suicide.

**FACT**  Most teenagers who are clinically depressed do think about suicide – and between 15% to 30% of those teenagers who think about it, attempt suicide. About 2,000 teenagers kill themselves each year, making suicide the 3rd leading cause of death among teenagers.

**MYTH**  Most suicide attempts occur without any warning signs or clues.

**FACT**  According to research studies, up to 75% of those who die by suicide, communicate their suicidal intentions to others either directly or indirectly in the weeks before their death.