

# DEPRESSION - A MOOD SWING BEHAVIOURAL DISORDER

## **INTRODUCTION:-**

School going adolescents are vulnerable due to the major and psychological changes takes places during these periods. According to WHO, Adolescence is defined by the age group of 10-19 yrs. In India, the adolescence population constitutes a quarter of the country's population which is approximately 243 millions which is turn constituted 20% of world's 1.2 billion adolescents (UNICEF). Children and adolescents is low and middle in some countries constitute 35-50% of the population (Patel, Fishar, Nikapota and Malhotra, 2008). According to causes 2011, there are 364.66 million youngest in the 10-24 age group, making up 30.11 percent of the country's total population.

Adolescent suffer from psychological problems at one time or the other during their development. Many of these problems are of transient nature and are often not noticed. Further children may exhibit these problems in one setting and not in other (e.g. home, school). Several key transitional periods (moving from early elementary to middle school, moving from middle school to high school or moving from high school to college) can present new challenges for this adolescents and symptoms of dysfunction may occur. Depression is one of the major problem of school going adolescents. 3 to 9% of teenagers meet the criteria for depression at any one time, and at the end of adolescent, as many as 20% of teenagers report a lifetime prevalence of depression (Bansal V, Goyal and Srivastava, 2009).

## **DEPRESSION OF SCHOOL GOING ADOLESCENT CHILDREN:**

Depression or Depressive Disorder are mental disorder characterised by a profound and persistent feeling of sadness or despair and / or a loss of interest in thing that once were pleasurable and disturbance in daily activities, e.g. body, mood, thought, sleep, appetite etc. We all go through ups and downs in our mood. Sadness is normal reaction to life's struggles, setback, and disappointments. Many people use the word depression to explain these kind of feelings, depression is much more than just sadness.

Some people describe depression as living in a black hole or having a feeling of impending doom. However, some depressed people don't feel sad at all instead, they feel lifeless, empty, and apathetic.

Whatever the symptoms, depression is different from normal sadness it that it engulfs your day-to-day life, interfering with your ability to work, study, eat, sleep, and have fun. The feelings of helplessness, hopelessness, and worthlessness are intense and unrelenting with little, if any, relief.

We all feel sad but most of the time it is temporary. The intensity is also less. It does not affect our day to day activities and socialization. It disappears on its own.

But in some people this sadness becomes very intense and deep. Nothing gives pleasures. One does not feel like talking to others and becomes tearful on trivial matters. If noticed closely, signs of hopelessness and helplessness or vacant looks are prominent. Studying, playing, listening to music, watching a film – nothing gives any satisfaction. When something goes wrong one blames oneself only, at times even if the blame illogical. One feels worthless. He or she becomes touchy even in normal situation. Minor things cause irritation and anger. Thoughts, talk and activities become slower. Generally one becomes quieter and prefers solitude. One also tries to avoid people and feels despair very easily. At times thoughts of leaving everything and going away from the known world, even thoughts of suicide are prominent. If sadness is pretty intense and prolonged then we consider that depressive disorder. Depression not only influences the mind but also sleep and appetite. When somebody is depressed, sleep and appetite are usually not normal, either they will increase or they will decrease. Body weight fluctuates directly with fluctuation.

## **CAUSES OF DEPRESSION :-**

1. The death of loved one.
2. A divorce, separation, or break up of a relationship.
3. A serious illness.
4. A terminal illness.
5. A serious accident.
6. Loss of hope.
7. Intense emotional pain
8. Chronic physical pain
9. Being victimized (domestic violence, rape assault, etc.)
10. A loved one being victimized (child murder, child molestation, kidnapping, murder, rape, assault, etc.)
11. Physical abuse
12. Verbal abuse
13. Sexual abuse
14. Unresolved abuse (of any kind) from the past.
15. Feeling "trapped" in a situation perceived as negative.
16. Feeling that things will never "get better"
17. Feeling helpless.
18. Serious legal problems, such as criminal prosecution or incarceration.
19. Feeling "taken advantage of"
20. Inability to deal with a perceived "humiliating" situation.
21. Inability to deal with a perceived "failure"

22. Alcohol abuse
23. Drug abuse.
24. A feeling of not being accepted by family, friends, or society.
25. A horrible disappointment.
26. Feeling like one has not lived up to his or her high expectations otherwise of another.
27. Bullying. (adults, as well as children, can be bullied)
28. Low self-esteem.
29. Trouble at home and change in family dynamics
30. Difficulties at school / college and failure to getting a good grade
31. Previous suicide attempt.
32. Family history of suicide.
33. Social isolation and neglect from family.

### **TYPES OF DEPRESSION:**

There are several types of depressive disorders.

**Major depression:** Severe symptoms that interfere with the ability to work, sleep, study, eat, and enjoy life. An episode can occur only once in a person's lifetime, but more often, a person has several episodes.

**Persistent depressive disorder:** A depressed mood that lasts for at least 2 years. A person diagnosed with persistent depressive disorder may have episodes of major depression along with periods of less severe symptoms, but symptoms must last for 2 years. Some forms of depression are slightly different, or they may develop under unique circumstances. They include:

**Psychotic depression,** which occurs when a person has severe depression plus some form of psychosis, such as having disturbing false beliefs or a break with reality (delusions), or hearing or seeing upsetting things that others cannot hear or see (hallucinations).

**Postpartum depression,** which is much more serious than the "baby blues" that many women experience after giving birth, when hormonal and physical changes and the new responsibility of caring for a new born can be overwhelming. It is estimated that 10 to 15 percent of women experience postpartum depression after giving birth.

**Seasonal affective disorder (SAD):** which is characterized by the onset of depression during the winter months, when there is less natural sunlight. The depression generally lifts during spring and summer. SAD may be effectively treated with light therapy, but nearly half of those with SAD do not get better with light therapy alone. Antidepressant medication and psychotherapy can reduce SAD symptoms, either alone or in combination with light therapy.

**Bipolar disorder:** is different from depression. The reason it is included in this list is because someone with bipolar disorder experiences episodes of extreme low moods (depression). But a person with bipolar disorder also experiences extreme high moods (called mania)

### **DEPRESSION AND SUICIDE:**

Depression is the major cause of suicide. Sometimes a severely depressed person contemplating suicide doesn't have enough energy to attempt it. As the disease lifts they may regain some energy but feelings of hopelessness remain, and the increased energy levels contribute to acting on suicidal feelings. Another theory proposes that a person may "give in" to the disease because they can't fight it anymore. This relieves some anxiety, which makes them appear calmer in the period preceding a suicide attempt.

For a person determined to attempt suicide the desire to live is overshadowed by the seeming hopelessness of the disease. The decision to attempt suicide is really a desire to stop suffering. Never give up on someone just because they say they've made up their mind. Depression is a crisis and intervening to help the person regain fight the disease can help reverse the downward trend toward suicidal thoughts or attempts. As depression deepens and takes over the body and mind, the pain of depression often becomes overwhelming. The chemical imbalance and deep despair can lead the brain to try and find ways to end the pain. This is when suicidal thinking begins. Depressive illnesses can perspective and aggressively distort thinking such that a person can't think clearly or rationally. The illness can cause thoughts of hopelessness and helplessness, which may lead to suicidal thoughts. Education about the depression and the warning signs of suicide help people understand that depression and related depressive illnesses are both preventable and treatable.

Although most people who are depressed do not kill themselves, untreated depression can increase the risk of possible suicide. It is not uncommon for depressed individuals to have about suicide whether or not they intend to act on these thoughts. Severely depressed people often do not have the energy to harm themselves, but it is when their depression lifts and they gain increased energy that they may be more likely to attempt suicide.

Suicide is considered a possible complication of depressive illness in combination risk factors because suicidal thoughts and behaviour can be symptoms of moderate to severe depression. These symptoms typically respond to proper treatment, and usually can be avoided with early intervention for depressive illness. Any concerns about suicidal risk should always be taken seriously and evaluated by a qualified professional immediately

### **SUICIDE IN INDIA:**

About 800000 people commit suicide worldwide every year (Suicide prevention (SUPRE) World Health Organization (2016) of these 135,000 (17%) are residents of India in 2016, Tamil Nadu (12.5% of all suicides), Maharashtra (11.9%) and west Bengal (11.0%) had the highest proportion of suicides (Suicides in India the Registrar General of India, Government of India (2016),

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## **IDENTIFICATION CRITERIA OF DEPRESSION AMONG THE SCHOOL GOING ADOLESCENTS :**

Depression not only happens with adult people but also affects children children and adolescents. But the expression are a bit different. Grown up adults can communicate the depression more directly at times. But children usually are unable to tell that they are depressed. Rarely children will say that they are psychologically unwell or one is feeling down in his or her mood. Depression varies from person to person, but there are some common signs and symptoms. Young people will express their depression in various ways. Here is a list of few examples:

Increased anger and frustration, misbehaviour with others.

Irritability or restlessness.

Easily becomes tearful.

Prefers loneliness and avoids others.

Self neglects

Feeling of helplessness and hopelessness.

## **DSM-IV CRITERIA**

Two weeks depressed mood or marked loss of interest or pleasure in normal activities +4 of the following:

1. Significant change in weight.
2. Significant change in sleep pattern.
3. Retardation or Agitation.
4. Fatigue or loss of energy.
5. Worthlessness or guilty.
6. Can't concentrate or make decisions.

## **TOOLS OF THE DATA**

It is important for a study to gather data to test the hypotheses or answer the research questions. Tools are distinctively used to collect information and data to describe and quantify the data according to the study design. In the present study, the researcher used Beck Depression Inventory (BDI-II) adopted in Bengali version by the help of his own guide originally developed by Aaron T. Beck (1996). The original tool consists of 21 items, presented in multiple-choice format, which measure presence and degree of depression in adolescent and adult consistent with the "Diagnostic and Statistical Manual of Mental Disorders Fourth Edition" (DSM-IV:1994). The 21 items cover sadness, pessimism, past failure, loss of pleasure, guilty feelings, punishment feelings, self-dislike, self-criticalness, suicidal thoughts, crying, agitation, loss of interest, indecisiveness, worthlessness, loss of energy, changes in sleeping pattern, irritability, changes in appetite, concentration difficulty, tiredness or fatigue and loss of interest in sex.

To adopt this tool in Bengali version the researcher minutely study each items of the tests. Then researcher translated all the items along with the instruction in Bengali language. While translating the items in Bengali language, the researcher taken care of maintaining the meaning and theme or content of the test as same as that of the original test. For doing this, she also took assistance and advice of some experts in the field including her own guide. The Bengali version of this tool includes the same items with same content and same meaning as it is in the original Beck Depression Inventory (BDI-II, see appendix III & IV).

**Information sheet:** along with the becks inventory questionnaire, an information sheet was provided to each of the students participating in the study to collect information about their family structure i. e. joint or nuclear type of schools govt or pvt (appendix V).

**BDI-II Scoring:** Each of the 21 items corresponding to a symptom of depression is summed to give a single score for the BDI-II. There is a four point scale for each item ranging from 0-3. On two items (16 and 18) there are seven options to indicate either an increase or decrease of appetite and sleep. Cut score guidelines for the BDI-II are given with the recommendation that thresholds be adjusted based on the characteristics of the sample, and the purpose for use of the BDI-II. Total score of 0-13 is considered minimal range, 14- 19 is mild, 20-28 is moderate and 29-63 is severe. Table shows the value of the scores:

Value of BDI-II Scoring

Depression Level	Score
Considered minimal range	0-13
Mild	14-19
Moderate	20-28
Severe	29-63

**Note:** Value (Meaning) of ratings considered

Considered minimal range - **Normal**.

Mild - **Minor problem**

Moderate - **Borderline**; may have problems in future, if not taken care.

Severe - **Abnormal**; definite problem, requires interventions

## **DISCUSSION:**

According to WHO, "Children and adolescents with good mental health are able to achieve and maintain optimal psychological and social functioning and well being. They have a sense of identity and self worth, and ability to be productive and to learn, and a capacity to tackle developmental challenges and use cultural resources to maximize growth the good mental health of children and adolescents is crucial

for their active social and economic participation", (WHO, 2001). Depression is an illness where the feelings of depression persist and intervene with the child or adolescent's functional abilities. Depression is often, chronic and recurrent. It can begin from mild to severe or even bipolar disorder. Untreated depression can last for seven to nine months and depressive episodes are likely to recur and persist after adulthood. Depression affects school going adolescents daily activities, studies, social relationship, school performance and overall well being, as well as putting them at risk for suicide.

There are variety of factors which influence the mental health of children and adolescents. Their mental disorder manifests themselves in many areas and in different ways which are poorly understood and the affected children are mistakenly viewed as not a trouble-makers. It is further made worse by the stigma and discrimination in our society today (WHO, 2001).

About 8,00,000 people commit suicide worldwide every year (Suicide prevention (SUPRE) world Health Organization (2012) of these 1,35,000 (17%) are residents of India. In 2012, Tamil Nadu (12.5% of all suicides), Maharashtra (11.9%) and West Bengal (11.0%) had the highest proportion of suicides (Suicides in India the Registrar General of India, Government of India (2012). Suicide was the leading cause of death among youngsters aged 10-24 in the country, with 62,960 such deaths reported in 2013, as per findings of the Lancet Commission on Adolescent Health and Well-being report. Globally too, accidents, self-harm (suicides), violence, and tuberculosis accounted for most deaths in this age-group. According to the findings of several studies, depression is the major cause of suicide.

## **CONCLUSION-**

DEPRESSION is a mood changing disorder which occurs in the living being in any time any place. Not only in the human being but also in the living being has the effect of DEPRESSION. If the master of the pet dog is out of the own house for 2/3 days, then we see that the dog feel morose and deny to take food properly. So we all came to know that DEPRESSION is a mood swing behavioural disorder. Proper medication, positive therapy that is cognitive behaviour therapy, behaviour therapy is useful for depressive people and other living beings.

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