

# HOLIDAY-RELATED DEPRESSION: IMPLICATIONS FOR YOUTH

BY

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WHEN HOLIDAY SEASONS APPROACH US, ESPECIALLY MAJOR HOLIDAYS THAT ARE TRADITIONALLY CELEBRATED AMONGST A LARGE PORTION OF THE POPULATION, IT MAY BE A TIME FOR REFLECTION ON THE MYRIAD OF ISSUES RELATED TO THESE SEASONS. FOR MANY PEOPLE, THE HOLIDAYS BRING A PLETHORA OF GOOD CHEER, FAMILY TOGETHERNESS, THE EXCHANGING OF GIFTS, FOND REMEMBERING OF TIMES GONE BY, AND THE REKINDLING OF OLD FRIENDSHIPS AND RELATIONSHIPS. IT IS A TIME FOR FAMILY, LOVED ONES, FRIENDS, AND POSITIVE SELF-AFFIRMATION. IN SHORT, IT IS A TIME TO POSITIVELY REFLECT ON WHAT HAS BEEN, WHAT IS, AND WHAT MIGHT BE.

THERE IS A LARGE PORTION OF BOTH THE ADULT AND YOUTH POPULATION, HOWEVER, FOR WHICH THIS IS NOT THE CASE. PARADOXICALLY, IT IS QUITE THE REVERSE FOR THEM. THEIR HOLIDAYS ARE, INSTEAD, FILLED WITH LONELINESS, ANXIETY, DESPAIR, HELPLESSNESS, ANGER, SADNESS, SELF-DEPRECATATION, GUILT, AND A HOST OF OTHER SO-CALLED "NEGATIVE", SELF-DEFEATING, OR SELF-LIMITING EMOTIONS. THIS IS NOT A TIME FOR POSITIVE SELF-ENHANCEMENT, BUT A TIME TO "GET THROUGH IT" THE BEST THAT THEY CAN. FOR THIS GROUP, THE HOLIDAYS CAN BE VERY DIFFICULT ORDEALS TO BE ENDURED AND OVERCOME. WHILE THE AFOREMENTIONED SCENARIO MAY NOT BE ALL TOO SURPRISING FOR THOSE AWARE OF ADULTS WHO SUFFER HOLIDAY-RELATED DEPRESSIVE ISSUES, IT MAY COME AS A SURPRISE TO KNOW THAT THIS IS ALSO THE CASE FOR MANY CHILDREN AND ADOLESCENTS.

YOUTH WHO SUFFER FROM HOLIDAY-RELATED DEPRESSION, AS WELL AS OTHER SELF-DEFEATING EMOTIONS, OFTEN HAVE A VARIETY OF ACCOMPANYING FACTORS. IT STANDS TO REASON THAT THE MORE OF THESE CO-EXISTING OR PRE-EXISTING FACTORS THAT ARE PRESENT, THE MORE "AT RISK" ARE THE YOUTH TO DEVELOP HOLIDAY-RELATED DEPRESSION OR OTHER EMOTIONALLY RELATED DISORDERS DURING THESE TIMES. ALSO, THE LONGER IN DURATION AND THE MORE INTENSE IN SEVERITY OF THESE FACTORS, USUALLY THE MORE SEVERE THE PATHOLOGY. THESE FACTORS CAN INCLUDE YOUTH WHO: (A) ARE LIVING CURRENTLY OR HAVE COME FROM A SEVERELY DYSFUNCTIONAL FAMILY (I.E., PHYSICAL, EMOTIONAL, AND/OR SEXUAL ABUSE, SUBSTANCE ABUSE OR ADDICTION, PRIMARY PARENT OR GUARDIAN SUFFERING FROM PSYCHOLOGICAL DISORDERS), (B) ARE ALREADY SUFFERING FROM SOME EMOTIONAL DIFFICULTIES (I.E., LOW SELF-ESTEEM, LOW SELF-EFFICACY), CHRONIC PHYSICAL DISABILITIES, SEVERE LEARNING DISORDERS, OR PROMINENT PSYCHOLOGICAL DISORDERS (I.E., MAJOR DEPRESSION, BIPOLAR DISORDER, PERSONALITY DISORDERS), (C) HAVE EXPERIENCED THE LOSS A SIGNIFICANT FRIEND, RELATIVE, OR FAMILY MEMBER THROUGH DEATH, PARENTAL DIVORCE, OR SOME FORM OF ABANDONMENT WITH WHOM THEY EITHER HEAVILY IDENTIFIED OR GREATLY DEPENDED UPON FOR LOVE, ESTEEM, ROLE MODELING, AND/OR SUPPORT (ESPECIALLY IF THE LOSS WAS FAIRLY RECENT OR OCCURRED DURING A HOLIDAY SEASON), (D) ARE IN THE MIDST OF A FAMILY EXPERIENCING A VARIETY OF CRISES (I.E., LOSS OF EMPLOYMENT, FINANCIAL CRISES, DIVORCE, DEATH, SEPARATION, ABANDONMENT, CHRONIC ILLNESS OF ANOTHER MEMBER), (E) ARE THEMSELVES IN THE PROCESS OF SOME LIFE AND/OR DEVELOPMENTAL CRISIS (I.E., FAILING GRADES, LOSS OF EMPLOYMENT, REJECTION BY PEER GROUP, RUNNING AWAY FROM HOME, BREAKING UP WITH A LONG-TIME DATING PARTNER), (F) HAVE A HISTORY OF PRIOR SUICIDE ATTEMPTS (WITH THE GREATER THE LETHALITY OF ATTEMPTS AND THE INCREASED NUMBER OF ATTEMPTS BEING BOTH CORRELATED WITH GREATER RISK FOR FUTURE SUICIDE ATTEMPTS), (G) ARE IN A GREATLY DISADVANTAGED SITUATION WITH NO

EXPECTATIONS FOR RELIEVE OR IMPROVEMENT IN THE NEAR FUTURE, AND/OR (H) HAVE LITTLE TO NO SOCIAL SUPPORT, PERSONS UPON WHICH THEY CAN RELY, OR CONFIDANTS WITH WHOM THEY CAN SHARE THEIR PAIN.

WHILE MOST PERSONS ARE ABLE TO SPOT DEPRESSION AND DEPRESSIVE-LIKE DISORDERS IN THEIR ADULT SIGNIFICANT OTHERS, IT MAY BE MORE DIFFICULT TO RECOGNIZE THESE DISORDERS IN THE CHILD OR ADOLESCENT. THIS IS PRIMARILY DUE TO THE FACT THAT WHILE SOME OF THE SO-CALLED "VEGETATIVE SYMPTOMS" (I.E., LOSS OF INTEREST IN PREVIOUSLY ENJOYED ACTIVITIES, LITTLE TO NO ENERGY OR MOTIVATION, CHANGES IN EATING AND/OR SLEEPING PATTERNS, WITHDRAWAL FROM SOCIAL CIRCLES AND FRIENDS) ARE OFTEN PRESENT IN BOTH OLDER YOUTH AND ADULT DEPRESSION SUFFERERS, CHILDREN AND ADOLESCENTS TEND TO SOMETIMES DISPLAY OTHER BEHAVIORS AND EMOTIONS THAT ARE NOT OFTEN THOUGHT OF AS BEING PART OF A DEPRESSIVE DISORDER. THESE "EXTRAS" MAY INCLUDE SUCH THINGS AS EXCESSIVE ACTIVITY (IN ORDER TO DIVERT THEMSELVES FROM THE ACTUAL, UNDERLINING DEPRESSION) AND ACTING-OUT BEHAVIORS (WHICH MAY BE DUE TO FRUSTRATION OR ANGER ISSUES AND COULD INCLUDE SUBSTANCE USE AND/OR ABUSE ABOVE AND BEYOND THAT RELATED TO THE HOLIDAY SEASON).

DURING THE HOLIDAY SEASONS, MANY OF THE ENVIRONMENTAL "CUES" (I.E., DECORATIVE LIGHTING IN RETAIL STORES AND HOMES, CHRISTMAS TREES, HOLIDAY-RELATED ADVERTISEMENTS ON THE TELEVISION AND RADIO, VARIOUS RELIGIOUS/SPIRITUAL ICONS THAT ARE DISPLAYED, HOLIDAY-ORIENTED MUSIC PLAYING AT THE MALLS, SOCIAL GATHERINGS WITH A FESTIVE THEME) THAT ARE INTENDED TO PUT PEOPLE IN A FESTIVE MOOD CAN BE SOURCES OF DISCOMFORT FOR DEPRESSED CHILDREN AND/OR TEENS. SINCE THESE ARE ALMOST IMPOSSIBLE TO EVADE UNLESS THE INDIVIDUAL IS ALMOST COMPLETELY RECLUSIVE, EACH ENCOUNTER WITH A HOLIDAY-RELATED ITEM CAN BE A PAINFUL REMINDER OF HOW UPSET THE YOUTH FEELS AND, THEREFORE, BECOME "RETRAUMATIZING" CUE EVENTS. THIS IS ESPECIALLY TRUE WHEN THE SUFFERER LOOKS AROUND TO SEE

OTHERS WHO APPEAR JOYOUS AND CONTENT DURING THE SEASON, WHILE THE NEGATIVELY AFFECTED PERSON SUFFERS (OFTEN TIMES, IN SILENCE).

PARENTS, SIBLINGS, TEACHERS, COACHES, FRIENDS, DATING PARTNERS, RELIGIOUS LEADERS, AND SIGNIFICANT OTHERS WHO ENCOUNTER A VARIETY OF YOUTH DURING THIS SEASON COULD BE THE PRIMARY PERSONS TO NOTICE THESE PATTERNS. WHILE ADULTS SHOULD BE WARY OF "OVER-DIAGNOSING" THE AFOREMENTIONED SIGNS, THEY SHOULD ALSO BE CAUTIOUS WHEN NOTICING CHRONIC PATTERNS OF SEVERAL OF THESE DEPRESSIVE SIGNALS OCCURRING SIMULTANEOUSLY. IF A PARENT, DATING PARTNER, OR GOOD FRIEND NOTICES THESE PATTERNS, A SINCERE, NONJUDGMENTAL, CARING, UNCRITICAL, ONE-TO-ONE TALK WITH THE AFFECTED INDIVIDUAL MIGHT BE IN ORDER. TRY TO LISTEN TO WHAT YOUR SON, DAUGHTER, BOYFRIEND/GIRLFRIEND, OR FRIEND HAS TO SAY AND THE WAY IN WHICH HE/SHE DELIVERS THE MESSAGE. BODY LANGUAGE, FACIAL EXPRESSIONS, AND TONE OF VOICE OFTEN TIMES CONVEY MESSAGES THAT A PERSON IN DISTRESS MAY NOT OPENLY REVEAL, EVEN TO THE MOST TRUSTED OF PERSONS. IF A GIRLFRIEND/BOYFRIEND OR TRUSTED FRIEND NOTICES THESE PATTERNS IN SOMEONE HE/SHE CARES FOR, THAT INDIVIDUAL SHOULD ENCOURAGE THE YOUTH TO DISCUSS IT WITH A TRUSTED ADULT WHO MIGHT BE ABLE TO HELP. IF SUICIDE IS SUSPECTED, THE CONCERNED INDIVIDUAL SHOULD EITHER STRONGLY ENCOURAGE THE YOUTH TO SEEK PROFESSIONAL HELP OR CONVEY THIS CONCERN DIRECTLY TO AN APPROPRIATE ADULT. PARENTS WHO ARE MADE AWARE OF SUICIDAL TALK, GESTURES, OR PATTERNS IN THEIR DEPRESSED OFFSPRING SHOULD GENTLY, BUT DIRECTLY, DISCUSS THEIR CONCERNS AND, IF NEED BE, TAKE APPROPRIATE ACTION. WHEN IN DOUBT, A TIMELY REFERRAL TO AN APPROPRIATE MENTAL HEALTH PROFESSIONAL MIGHT MAKE THE HEALTHY DIFFERENCE AND HELP ENSURE THAT THE HOLIDAYS ARE A TIME FOR THANKSGIVING, LOVE, HAPPINESS, FAMILY CLOSENESS, AND POSITIVE SHARING BETWEEN ALL PERSONS.