

Break Free from Depression



*20th Annual Conference
Advancing School Mental Health
New Orleans, Louisiana
November 7, 2015*



Boston Children's Hospital
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**HARVARD MEDICAL SCHOOL
TEACHING HOSPITAL**

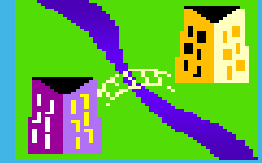
Agenda

- History of Break Free from Depression
- Overview of the Manual
- Module One- What Is Depression?
- Break
- Module Two- What Does Depression Look Like?
 - View documentary
- Module Three- What Can We Learn?
- Module Four- What Can We Do?
- Implementation Tips





Program Description



- Children's Hospital Neighborhood Partnerships
 - Department of Psychiatry
 - “Reaching children where they live & learn”

- Development of Break Free from Depression
 - Swensrud Depression Prevention Initiative

Rationale for a Depression Awareness Program

- ~~An estimated 2 million American adolescents will experience depression each year~~
- ~~1 in 20 adolescents will experience depression before the age of 18~~ False
- ~~Of those that are experiencing depression, approximately 60% are not receiving treatment.~~ False
- ~~Approximately 1 in 50 American adolescents will make a suicide attempt that requires medical attention~~
- 30% of youth in the United States reported feeling so sad or depressed daily for at least two weeks that they discontinued usual activities (CDC, Youth Risk Behavior Surveillance System, 2013)
- 17% of students in the United States seriously considered suicide in the past year, 13% made a suicide plan, and 8% made an attempt (CDC, Youth Risk Behavior Surveillance System, 2013)



Break Free from Depression

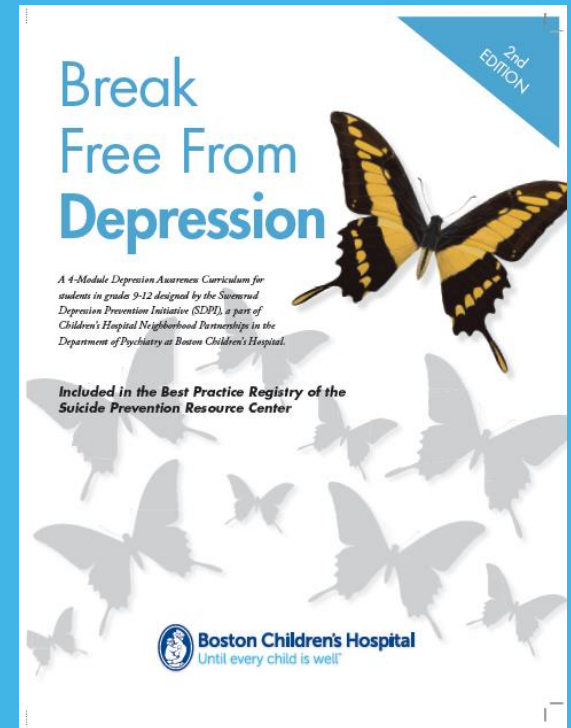
Aims of Curriculum

- Increase student **Knowledge** about depression and suicide
- Increase **Confidence** in students' ability to identify signs of depression and suicide in themselves and their peers
- Increase students' **Skills** in obtaining help for depressive and suicidal feelings in themselves and their peers
- Achieve high program **Satisfaction** among all participants

Break Free from Depression Program

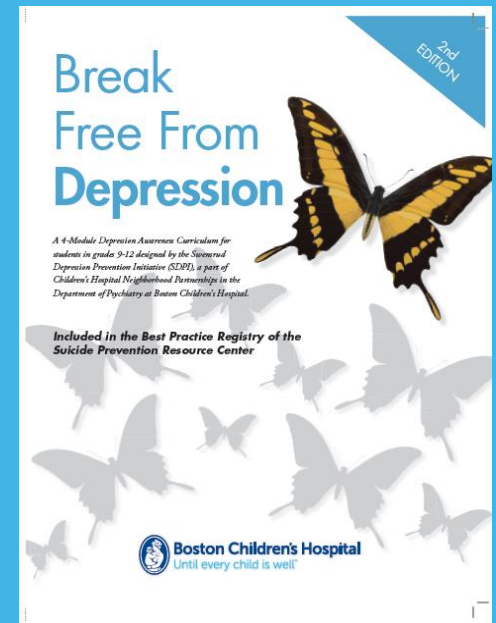
← Consultation and Support →

- Training
- Professional Development
- Parent Education
- Student Curriculum
- Evaluation



Overview of the Manual

- **Inside Back Cover**
 - Documentary
 - All presentations & handouts
- **Chapter Two**
 - Staff development
 - Parent outreach
- **Chapter Three**
 - Student Curriculum
- **Chapter Four**
 - Supplemental Activities
- **Chapter Five**
 - Evaluation



A View of the Manual Staff Development

Chapter 2

Using the Break Free From Depression Curriculum



Using the Break Free From Depression Curriculum

Step 1: Preparing the School for Implementation

This curriculum is meant for use as an educational tool. It should not be used as a crisis intervention and should not be used in a school where there has been a recent suicide. This is not a counseling intervention; rather, it is a universal program designed for depression awareness. The curriculum is designed for grades 9-12. It can be used with 8th graders, but only in small student groups and with more supervision. It is not recommended for students in the 7th grade and below.

It is important for the entire school staff to be aware of the curriculum so they can help provide accurate information to students, and can also direct them to resources within the building. We recommend a staff training, as a small number of students typically need additional support during implementation of this curriculum (for example, students may need more help for themselves, or for a peer, and they may have a hard time processing something in the curriculum). It is essential to have mental health support available in the school while the curriculum is being implemented.

The following points should be taken into consideration when preparing the school for curriculum implementation:

For the staff:

- Ensure that school administrators have approved the use of the curriculum.
- Identify staff who are responsible for implementing the curriculum. We recommend that the school's mental health team, guidance staff, or nurse coordinate the implementation of the curriculum.
- Determine the mental health resources that are available within and outside the school.
- Ensure that there is a proper crisis protocol in place. Such protocols can include, for example, when to bring a student who is in crisis, when to contact for support within the school, and what the process is for contacting families and outside agencies for support.
- Ensure that there is a process for referring a student to counseling services and supports.



A View of the Manual

Sample Slide from the Staff Workshop

If You Are Worried About A Student

- Observe and record behavior changes
 - Ask other teachers about their observations of this student
 - Keep records of concerns – who raised the concerns? Context? Was there any follow up?
- Communicate closely with guidance, nursing, and administration
 - Make sure you are familiar with school's referral protocols – maintain open lines of communication
- **You are not expected to “treat” student**



A View of the Manual

Parent Letter and Consent Forms

CONSENT FOR PARTICIPATION

Student Name: _____ Date of Birth: _____

Dear Parent/Guardian:

The Break Free From Depression curriculum is aimed at increasing knowledge and awareness of adolescent depression and suicide. We are presenting this curriculum to the _____ class. The curriculum consists of classroom lessons and the viewing of a documentary, and will be followed by group discussions. This curriculum is not a treatment or counseling program.

Your signature below gives your permission for your son/daughter to participate in this program.

I **AGREE** to have my son/daughter _____ participate.
I have read this consent and understand its terms. I sign it voluntarily and with full knowledge of its significance.

Parent/Guardian's Signature: _____ Date: _____

OR

I **DO NOT** wish for my son/daughter to participate in this program.

Parent/Guardian's Signature: _____ Date: _____

Address: _____

Telephone Number: Home: _____

Mobile: _____

Work: _____

Best Time(s)/Place to Call: _____

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BREAK FREE FROM DEPRESSION PARENT INFORMATION LETTER

(DATE)

Dear Parent/Guardian:

(INSERT CLASS/GRADE/GROUP) will be participating in Break Free from Depression, a program that educates teens about stress and depression. The program consists of four classroom lessons, a brief film, and guided group discussions. It is not a treatment or counseling program, rather an education program to increase students' knowledge of depression, their confidence in identifying signs and symptoms related to depression, and their ability to access resources.

Break Free from Depression will take place on (DATES/TIMES) and will be facilitated by (STAFF/MENTAL HEALTH CLINICIAN). If a student needs immediate assistance while participating in this curriculum, counselors will be available in the school.

The school has decided to use this program because we recognize that today's children are at risk for depression. Nearly one million American adolescents suffer from depression each year, and more than three quarters of these individuals will not be diagnosed and will not receive treatment. Left untreated, depression can lead to deteriorating school performance, strained relationships with peers and adults, high rates of absenteeism, school dropouts, and substance abuse. Our goal is for students to have accurate information on depression, be equipped with tools to readily identify signs and symptoms of depression in adolescents, as well as have the skills to access resources and supports in the school and community.

We encourage you to contact us with any questions you may have around this program. If you do not want your child to participate, please contact us before we begin the program.

Please contact us if you have any questions or need further information.

Thank you,

(NAME)

(TITLE)

(SCHOOL)

(CONTACT INFORMATION)

If you do NOT want your child to participate, please complete and return this form.

If you have any questions, please contact: (NAME AND CONTACT INFORMATION)

I **do not** wish for my child to participate in Break Free from Depression.

Student

Parent/Guardian

Date

Phone

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A View of the Manual

Sample Slide from the Parent Workshop

What to do if you are concerned about your teen

- Approach your teen in a gentle, non-judgmental way
- Give your teen specific examples of behaviors that are worrying you (e.g., avoids having dinner with the family when he/she used to do so on a regular basis, no longer plays basketball with the neighbors after school); share your observations
- Talk about your teen's good qualities and strengths
- Offer caring statements like "I love you and I am here for you. My job is to keep you healthy and safe"
- Discuss and clarify treatment options



A View of the Manual Student Modules

Module One

Module 1. What is Depression?

Components of Module One:

- Time required: 5-10 minutes
- 1. Student Pre-Survey
- Time required: 40 minutes
- 3. PowerPoint Presentation
- Time required: 5 minutes
- 4. Closing Activity (optional)

Description of Module

This module provides students with an overview of depression and suicide, including specific facts and statistics, opportunities for discussion to dispel myths, and information about signs and symptoms of depression. While students might already have general ideas about the disorder, they may have inaccurate information, or they may not realize the extent of the statistics associated with depression and suicide. The information in this section can be used to initiate conversations, provide accurate facts, and to respond to particular student questions. This module should be presented to students prior to viewing the documentary, in order to create a foundation of knowledge before they are introduced to the real-life narratives of other adolescents.

During each module, students should be given the opportunity to ask for individual assistance if it is needed. The sample Student Assistance Request Form provided on the last page of this module (page 33) should be given to students at the beginning of each class. As a facilitator, it is important to establish an environment where

Module Two

Module 2. What Does It Look Like?

Components of Module Two:

- Time required: 2 minutes
- 1. Introduction to the Documentary
- Time required: 35 minutes
- 2. Viewing the Documentary
- Time required: 15 minutes
- 3. Student Check-in

Description of Module

During this module, students will view the documentary "Break Free From Depression." The documentary covers the following topics: risk factors, symptoms of depression, thoughts, suicide, and coping. The documentary features adolescents and young adults who either have struggled or are currently struggling with depression; these individuals are not and their words are not scripted. Remember to distribute the Student Assistance Request at the beginning of the module and collect it at the end.

While we strongly recommend that you teach Modules Two and Three consecutively on the same day, we recognize that many schools may not be able to accommodate this type of schedule. If this is the case at your school, we strongly recommend you teach Module Three as soon after Module Two as the schedule allows. See sample schedules on page 13. We also highly advise that the student check-in activity described at the end of this chapter to be conducted at the end of Module Two, especially if your school schedule cannot support the teaching of Modules Two and Three on the same day.

Tips for Implementation: When preparing the handout "Speak Up, Take Charge, Get Help", we recommend that the facilitator fill in the section that asks for names of professionals in the school that students can talk to if needed (names of guidance counselor, nurse, social worker, psychologist, etc.). It is important to add details about how to contact the professionals (phone call, email, drop-in, office hours, etc.).

Module Three

Module 3. What Can We Learn?

Components of Module Three:

- Time required: 45-55 minutes
- 1. Group Debriefing
- Time required: 10 minutes
- 2. Warning Signs of Suicide
- Time required: 15 minutes
- 3. True/False Discussion

Description of Module

This module offers a suggested debriefing session to help students process the information from the documentary and engage students in a discussion of the facts of depression and suicide. Facilitators are encouraged to use this as a sample for the students' questions and concerns. Given the breadth of topics to be discussed, we recommend devoting a full class period to this module, as well as a review of the help.

During the debriefing, allow students to share their thoughts and questions. They will feel comfortable doing so. If

Tip for Implementation: In this module, students will participate in small groups. It may be helpful to divide the class into these groups prior to facilitating the module. This will decrease the time spent assigning students to groups and will allow the facilitator to consider beforehand which students work best in groups. Be sure to have extra copies of the handout "Speak Up, Take Charge, Get Help" for students who may need them. Also, leave time at the beginning of this module to address any questions that were unanswered in the debriefing activity in Module Two.

Module Four

Module 4. What Can We Do?

Components of Module Four

Option 1	Option 2	Option 3
Power Point Presentation 20 minutes	Power Point Presentation 20 minutes	Deep Breathing Exercise 5 minutes
RolePlay activity for how to approach a trusted adult and/or a friend 25 minutes	Read out loud and discuss the tip sheet "Helping Your Friends Through Tough Times - Dos and Don'ts" aloud 20 minutes	Power Point Presentation 20 minutes
Student Post-Survey 5-10 minutes	Student Post-Survey 5-10 minutes	"Compliments" Supplemental Activity Chapter 4 20 minutes
		Student Post-Survey 5-10 minutes
Total Time: 50-55 minutes	Total Time: 45-50 minutes	Total Time: 50-55 minutes

Description of Module

In this module, students will learn how to:

- Access help and/or treatment in the school or community
- Approach a trusted adult
- Approach someone about whom they are concerned
- Identify healthy coping skills to manage mood on a daily basis

Tips for Implementation: Teachers report that the brainstorming session and subsequent discussion in this module are very animated, productive, and helpful to the students. As a result, they recommend that facilitators allow students the time, space, and opportunity to think and to generate solutions about how to get help for themselves and for others, and how to sustain prevention efforts initiated by the curriculum and better cope with feelings of stress, sadness, and anxiety.

A View of the Manual

Chapter Four- Supplemental Activities



Supplementary Activities for Building Coping Skills

Supplemental Lessons

This chapter offers a variety of activities focused on building students' coping skills. While these skills are often components of treatment for people struggling with mood disorders, the skills are helpful to everyone, regardless of whether or not they are struggling emotionally. The activities range from individual-based skill building, to communication-based skills, to group activities that can be part of the schools overall mission to raise awareness of depression and decrease stigma related to mental illness.

Activities for Building Coping Skills

Introductory Activity: Introduction to Journaling

Estimated Time:

- 10-15 minutes

Description of Activity

- Journals can be helpful tools for students, both for the therapeutic effect of journaling, and for recording their progress with various coping skills/techniques. This activity offers an opportunity for students to assess their stress management techniques and daily coping skills. While prompt questions are provided below, teachers and students are also encouraged to generate some prompt questions that best fit the needs of their classroom.

Materials Needed

- Journals
 - Pens/Pencils
 - 5 Questions (see below) written on the board.
1. What kinds of situations have been most stressful for me?

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2. How have those events typically affected me?
3. Have I found it helpful to seek help from others? Who has been helpful?
4. What have I learned about myself and my interactions with others when I get stressed?
5. What has helped me feel more hopeful or successful?
4. Problem Solving
5. Challenging Negative Thoughts

Activity 1: Deep Breathing Exercise

Estimated Time:

- 5 minutes

Description of Activity:

- In this activity, students will learn a deep breathing technique used for relaxation and stress management.

Materials Needed:

- Script (see on next page)

Presenter Instructions:

1. Ask students to sit comfortably in a chair. Give students the option to close their eyes, look down at their desk, or look down at the floor while doing this exercise. Guide

Individual-Based Activities

While the activities in this section will be presented to the class (or group of students) as a whole, each activity focuses on skills that students can work on and practice individually. Below are the five skills that will be introduced:

1. Breathing Exercise
2. Muscle Relaxation
3. Imagery/Visualization



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A View of the Manual

Chapter Five- Evaluation

Chapter 5 Evaluation

Break Free From Depression: Evaluation Chapter

As described in the introduction to this manual, the broad objective of the Break Free From Depression curriculum is to **raise awareness** about depression among adolescents.

The specific aims of the curriculum are to 1) increase **knowledge** among participants about depression and suicide; 2) increase **confidence** in participants' ability to identify signs of depression and suicide in themselves and their peers; 3) increase participants' **skills** in obtaining help for depressive and suicidal feelings in themselves and their peers; and 4) achieve high program **satisfaction** among the participants.

To date, the Break Free From Depression curriculum has gone through two rounds of evaluation. The first pilot study included an evaluation of safety, feasibility, and effectiveness of the curriculum. The second study was an attempt

to replicate the findings with a larger sample of schools. An overview of findings from each of these components is presented below.

1) Safety

The goal of the safety evaluation was to verify the accuracy of curriculum content, and to ensure, to the extent possible, that the sensitive and potentially distressing content of the curriculum would not cause unintended harm.

The first step of the safety evaluation was to solicit expert review of curriculum content. The qualifications of the expert reviewers are presented in Table 1 below. After careful examination by the experts, a number of modifications were made in the curriculum to ensure the accuracy of curriculum content and to reduce the possibility of unintended distress among participants.

The second step of the safety evaluation was to assess reactions to the documentary (DVD)

Table 1. Break Free From Depression Expert Review Panel

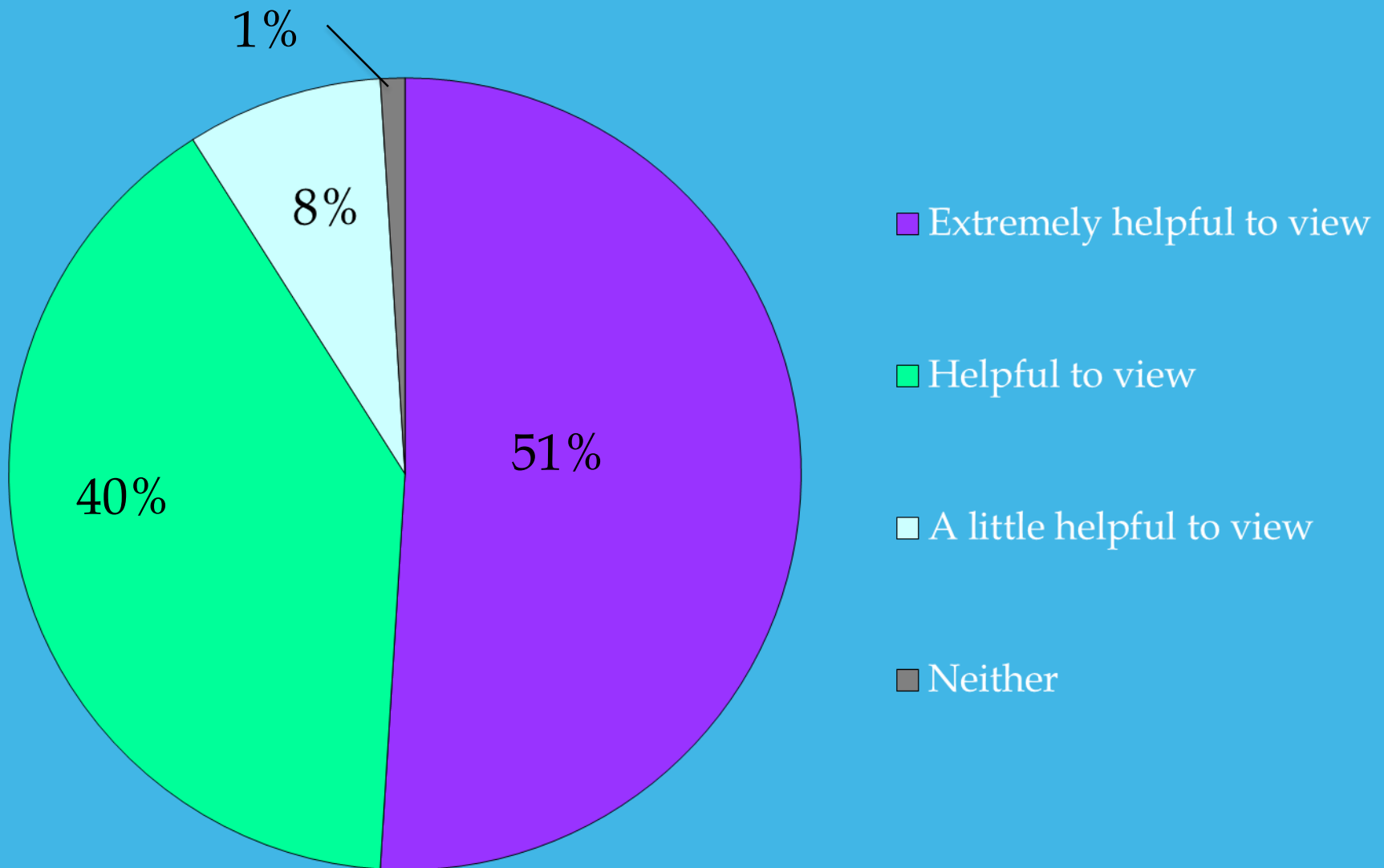
EXPERT REVIEWER	QUALIFICATIONS
William Beardslee, MD	Senior Associate in Psychiatry, Boston Children's Hospital; Professor of Psychiatry, Harvard Medical School
Richard Bourne, PhD, Esq.	Associate General Counsel, Boston Children's Hospital
Marcus Cherry, PhD	Staff Psychologist, Boston Children's Hospital; Instructor in Psychology, Harvard Medical School
Eugene D'Angelo, PhD	Chief, Division of Psychology, Boston Children's Hospital; Associate Professor of Psychology, Harvard Medical School
Stuart Goldman, MD	Senior Associate in Psychiatry, Boston Children's Hospital; Associate Professor of Psychiatry, Harvard Medical School
Edie Rosenberg, MBA	Administrator, Department of Psychiatry, Boston Children's Hospital
Elizabeth Wharff, PhD	Director, Emergency Psychiatry Service, Boston Children's Hospital; Assistant Professor of Psychiatry, Harvard Medical School



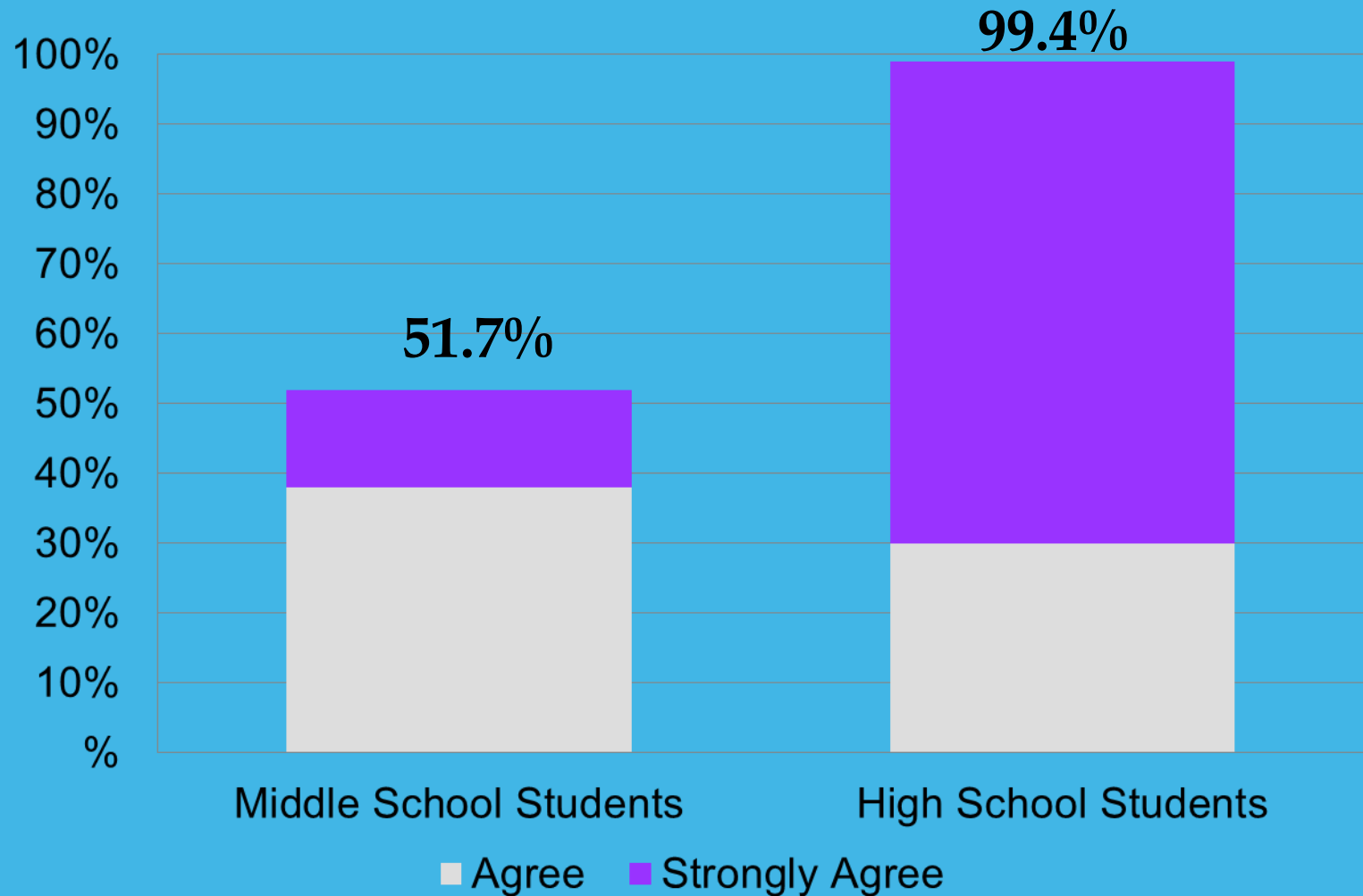
Safety Evaluation and Pilot Study

- Verified accuracy of curriculum content
- Ensured that sensitive and potentially distressing content of the curriculum would not cause unintended harm
- Tested effectiveness of curriculum on students' knowledge about depression and suicide and their skills for seeking help for themselves and others
 - 6 High Schools throughout MA
 - 1246 students

Overall, I found viewing this documentary to be.....



Is this documentary appropriate for middle school and high school students?



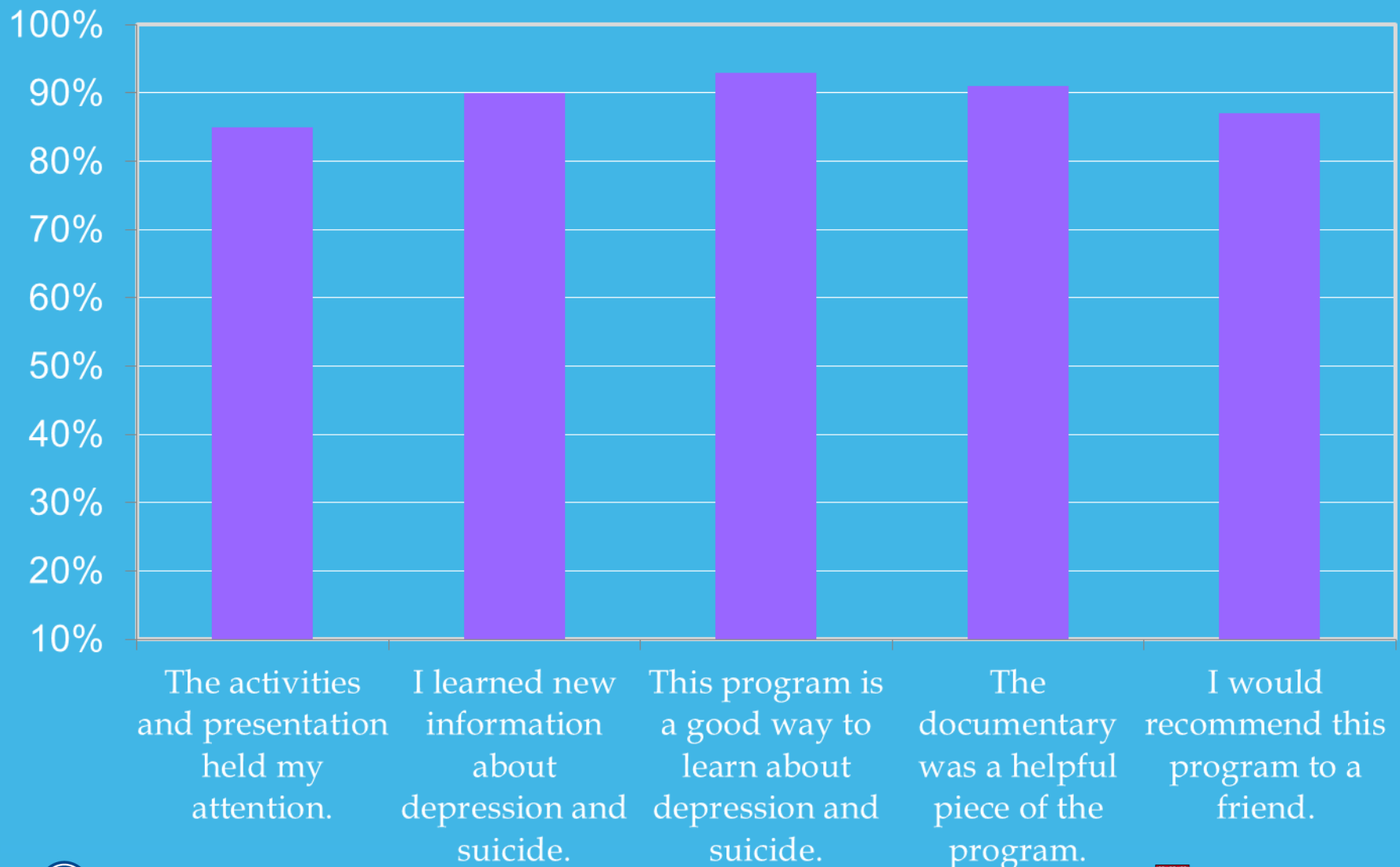
Implementation Update

- Over 16,000 students have participated in the Break Free from Depression curriculum
- Data consistently indicates that the goals of the program are being met:
 - Increase in knowledge
 - Increase in confidence to identify signs & symptoms in self and others
 - Increase in skills to access help for self and others
- Increasing access to training nationwide through webinar platform

Quotes from Students

- *I liked how moving and informational this program was. I feel if more people sat through this they would have a new perspective on life and how to treat others.*
- *[I liked] that it showed me everyone has a chance to overcome depression.*
- *I liked talking about this because people just try to ignore depression and that's not okay. We need to talk about it and I think raising awareness is great.*
- *My friend and I were able to realize that he was suffering from depression.*
- *I really enjoyed this program, the documentary was incredible. I also learned the signs of suicide. I just really wish I was aware of those 5 months ago when my cousin committed suicide... but now I am more informed and can help others.*

Student Satisfaction Survey



Before You Get Started...

Module 1

Staff
Awareness

Parent
Outreach

Scheduling

Mental Health
Supports

Counseling
Referral and
Crisis Protocols

Checking in
with specific
students

Space for
immediate
intervention

Student
Assistance
Request Form

Pre Survey

A View of the Manual Student Assistance Request Form

Student Assistance Request Form


Student Name: _____ Grade: _____

- ☐ I would like to talk to someone right away.
- ☐ I would like to set up an appointment to talk to someone.
I can be reached at: _____
- ☐ I do not need any help right now.



A View of the Manual

Pre-Survey for Module One



Break
Free From
Depression

Student Pre-Survey

My Birthday: _____ Gender: _____ Date: _____

True or False?

1. Depression is a biological illness.	True	False
2. Depression is treatable.	True	False
3. Approximately 1/3 of teens with depression also have another mental illness.	True	False
4. Almost all teens who kill themselves are depressed.	True	False
5. Depression looks different for people from different backgrounds.	True	False
6. Talking to someone about suicide puts ideas into his/her head.	True	False
7. All people who struggle with depression need medication.	True	False
8. Being depressed changes the way you think.	True	False
9. You cannot tell someone is depressed just from looking at them.	True	False
10. Some teens who are depressed appear to be irritable, angry, or violent.	True	False

How much do you agree with each statement?

	Strongly Disagree	Sort of Disagree	Sort of Agree	Strongly Agree
1. Talking about depression or suicide makes things worse.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Teens who are depressed are just being dramatic.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. People like me don't get depressed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. I would tell someone if I was feeling really down or depressed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. I would tell someone if I was thinking about killing myself.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. I would tell someone if I thought a friend was going to kill himself/herself.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. I would know how to talk to a friend if I thought s/he was depressed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. I would know how to talk to a friend if I thought s/he was having suicidal thoughts.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. I would know where to find help for myself or for someone else who was depressed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. I know different strategies I can use to help myself deal with sad or stressful situations.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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Module 1

What is Depression?

- Dispelling myths
- Accurate information
 - Biopsychosocial model
 - Signs and Symptoms
 - Differences between stress and depression
- Opportunity for discussion



Break Free from Depression



Student Module 1: What Do We Know?



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Depression

What Do We Know?

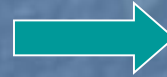
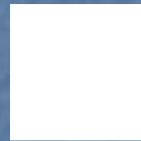


Why Are We Talking About Depression?

- Stigma
 - What is stigma?
 - What are some examples of stigma surrounding mental illness?
 - How do you think this influences how teens think about mental illness?
- Research estimates that approximately 2 million American teenagers experience depression each year
- Of those that are experiencing depression, only about 40% are receiving treatment.
- An estimated 1 in 5 adolescents will experience depression before the age of 19
- Every year, approximately 2% (1 in 50) American teenagers will make a suicide attempt that requires medical attention



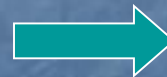
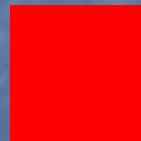
White, Yellow or Red?



Nothing out of the ordinary; no big concerns



A little worried, need more information...



Very concerned!



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Depression is a
medical illness.

TRUE



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Before puberty, boys and girls are equally likely to experience depression. After age 15, girls and women are twice as likely as boys and men to experience depression.

TRUE



Approximately 1 out of 10
adolescents will experience an
episode of depression before
age 18.

FALSE



Children and adolescents from all over the world suffer from mental health disorders.

TRUE



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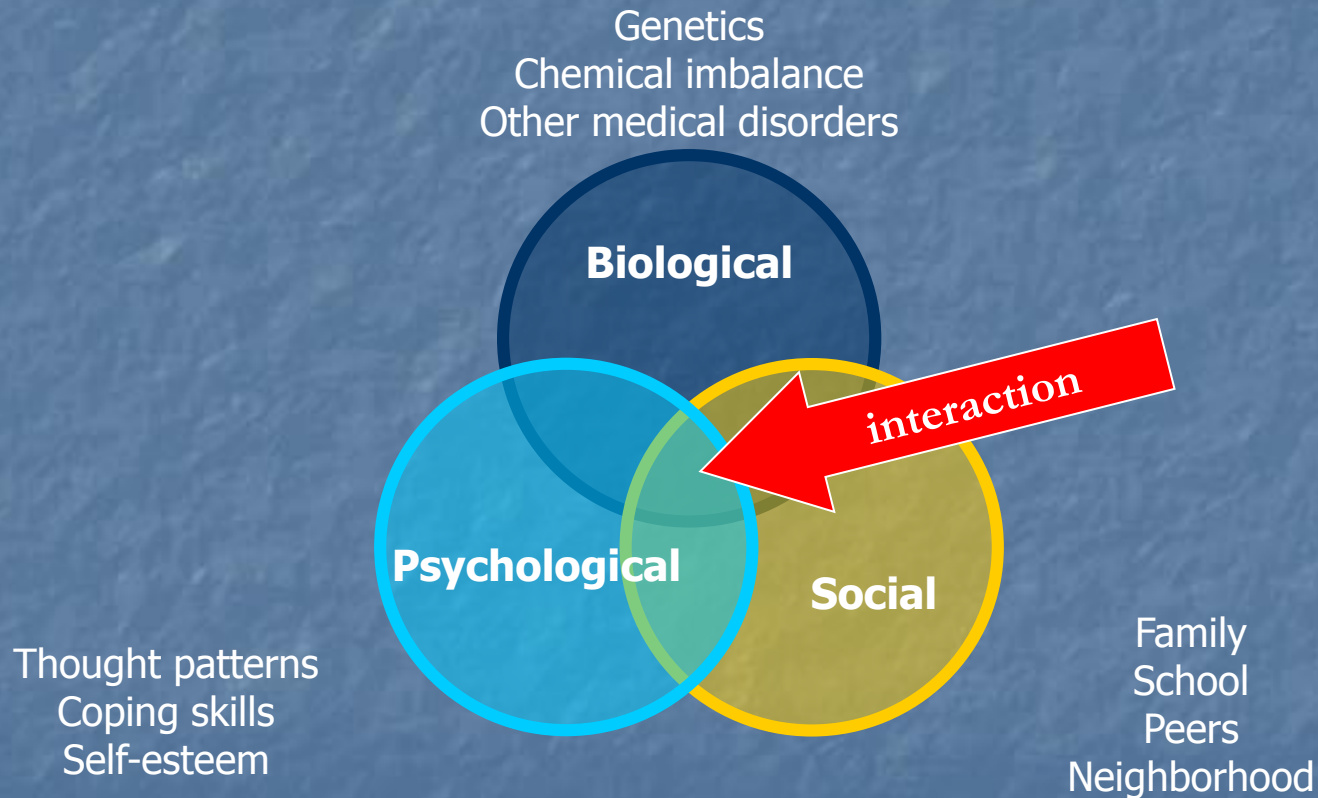
I've heard these things about adolescents and depression...

- “They’re doing it just to get attention”
- “They’re just being dramatic”
- “It’s a phase – they’re just being teenagers”
- “They have so much, what do they have to be depressed about?”



How Does Depression Happen?

Biopsychosocial Model of Depression



What Are The Symptoms?

- Depressed or **irritable** mood most of the day, nearly every day
- Decreased interest or pleasure in all or almost all activities
- Significant weight loss or gain
- Sleeping too much, or sleeping too little
- Agitated, can't stay still, restless
- Fatigue or loss of energy
- Worthlessness or excessive or inappropriate guilt
- Difficulty concentrating or thinking
- Recurrent thoughts of death

Clinical Depression



Symptoms are happening every day, last most of the day, and are too intense for the person to manage on his/her own

Other Things You Might Notice



- Anxiety (frequent worries and fears, racing heart, sweaty palms, nervousness, nightmares, panic attacks)
- Physical symptoms (headaches, stomachaches, numbness, difficulty breathing, heart pounding, etc.)
- Change in day to day behavior (example – perhaps someone who is typically outgoing and participates in lots of activities becomes more silent and withdrawn)
- Acting out behavior (being rebellious, breaking rules, being defiant, threatening to run away, delinquent acts)



Internal Thoughts

- People who suffer from depression have negative thoughts about themselves, the world, or their future
- May say things like “nobody loves me,” “I’m no good, I’m not as smart as everyone else,” or “I’m such a disappointment”
- May describe themselves as “broken,” “empty,” “damaged,” or “hollow”



MILD

Able to function in many ways

All symptoms are not always present

Treatment can include: counseling, support from trusted adults, active coping skills

MODERATE

Symptoms interfere with several areas (school, home)

Greater number of symptoms and more persistent on a daily basis

Treatment can include: individual counseling, group counseling, possibly medication

SEVERE

Symptoms interfere with every area of life

Symptoms are frequent, intense, and may include suicidal thoughts

Treatment can include: individual counseling, group counseling, medication, day treatment, possible hospitalization



Continuum of Depression



How is Depression Different from Stress?

Typical changes in mood = 



Clinical Depression =

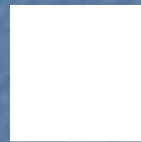
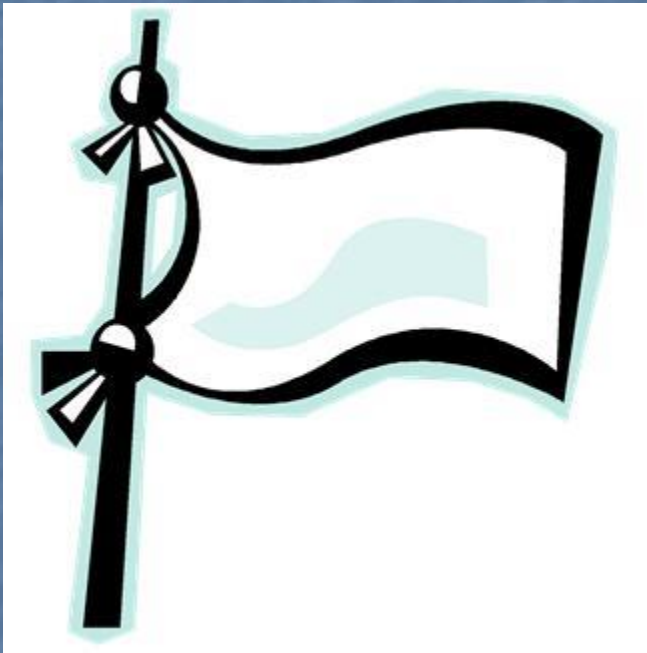


Symptoms are happening every day, last most of the day, and are too intense for the person to manage on his/her own

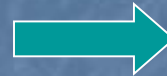
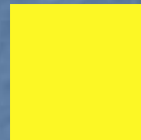
Race, Culture, and Depression

- Depression impacts people of all cultures, races, and ethnicities
- Experiences of racism, discrimination, identity issues, as well as cultural values and expectations can have an impact on symptoms of depression
- Depression in different cultures can be expressed as headaches, stomachaches, aggression, substance abuse, etc

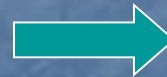
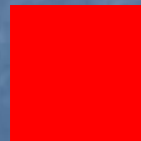
White, Yellow or Red?



Nothing out of the ordinary; no big concerns



A little worried, need more information...



Very concerned!



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Depression is **not** your fault - it is a medical illness.

Teens do not
"create"
their
depression.

Sometimes
it's hard to
accept you
have
depression



Depression
is not a
sign of
weakness.

You can't just
"get over it,"
no matter how
much willpower
you have.

Anyone can develop depression -
it does not matter who you are
or what you look like.



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Next Steps

- Closing Activity
 - What was one thing you learned today?
 - What is one question you have?
- Module Two
 - Watching the documentary
- Any other questions?



A View of the Manual Student Assistance Request Form

Student Assistance Request Form

Student Name: _____ Grade: _____

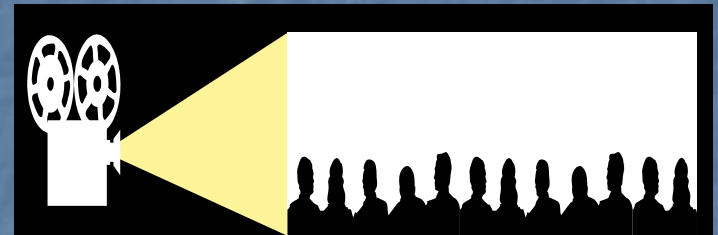
- ☐ I would like to talk to someone right away.
- ☐ I would like to set up an appointment to talk to someone.
I can be reached at: _____
- ☐ I do not need any help right now.



Module 2

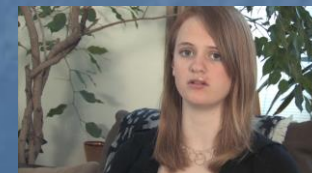
What Does Depression Look Like?

- Introductory script
 - Included in manual
- View the documentary
 - 37 minutes
- Transitional activity
 - Breathing exercise
- Student check-in activity
 - Guided de-brief of the documentary
- Student Assistance Request Forms



Break Free from Depression Documentary

- Consists of real adolescents talking about their experiences of depression
- These are not actors and it is not scripted
- Covers stigma, symptoms of depression and anxiety, suicidal ideations and how they have coped with depression and thrived in their lives



A View of the Manual Script for Introducing the Documentary

"Today we will be viewing a documentary titled "Break Free From Depression." It features a group of students who share their experiences with depression and suicidal thoughts. None of these students are actors. They discuss stigma and risk factors associated with depression, their own symptoms of depression, their internal thoughts, their suicide attempts, and the coping strategies they have used to best manage their depression. We wanted to highlight this topic because we know that depression can and does impact adolescents. What you will see in the documentary may touch upon the personal experiences for some or all of you. Someone you know might be struggling with depression, or perhaps some of the feelings expressed by the people featured in the film may ring true for you. It has also been the experience of many teachers that when students watch this documentary, some may express their discomfort with the content by laughing, whistling, talking to neighbors, texting, putting their heads down or other distracting behaviors. While these are normal reactions to being exposed to emotional material, we encourage you to try your best to show respect and not act in ways that may distract and/or embarrass your peers. If at any time during the film you become overwhelmed and feel you need individual help, please let me know. If you choose to leave during the documentary, someone will offer assistance and take you to _____.

After we watch the documentary, we will participate in small group discussions. If after viewing the documentary and participating in the groups you feel that some of the symptoms are true for you or someone you know, it is important to speak to someone about it. As part of our discussion, we will talk about different options for people you can talk to at school and in the community."



Questions....

- What did you think (like/dislike)?
- What were your thoughts/feelings while watching the documentary?
- What did you learn from the documentary?
- What questions do you have after watching the documentary?



What did you think about the documentary (like/dislike)?

It was actual people and not just doctors

I liked it. It helped me realize that some people need someone to be there for them and I want to be that person.

It was a wake up call and a motivator to go do something.

I liked how they had their friends and family talk about how someone else's depression affected them

I thought the documentary was powerful. I liked how people were completely honest and didn't hold anything back.

I liked how it said even though it's not perfect, they are getting better

It was sad, but it's good for us to be exposed to this because some people don't understand how serious it is. It's not a joke.

I liked the diversity in the background of everyone's story, but how they are all connected

People weren't afraid to express themselves and weren't afraid to get help

I thought the documentary was helpful- not just for teens but for adults too



What were your thoughts/feelings while watching the documentary?

I'm surprised that a football player is depressed

My thoughts while watching the documentary were sad just thinking that someone close to me could go through this and I wouldn't know

I was continuously thinking of people that I know...

I felt hopeful and not alone

The personal stories really touched me and showed me depression is extremely serious and it's hard to both open up and go through treatment

I felt their pain because I went through it too

I have a friend with depression and at first I didn't really believe her about all of the stuff she said, but now I see what she goes through

My thinking was that people should not wait to get help

I can't believe people go through such pain. It's so real when you see the actual people what have experienced it

I felt inspired to help anyone if they need it

I felt sad and could understand what they were going through



What did you learn from the documentary?

It's not just a feeling—
it's more than that

*I learned that it is
important to
recognize depression
early and not wait
until it's a crisis*

I learned that
people may seem
happy on the
outside, but
suffering inside

After seeing this, it
changed how I see
depression, changed
the negative stigma

People can recover stronger
than before

I learned that
depression doesn't
depend on gender

I learned that
depression can
happen to
anyone, not
just certain
kids

*Asking for help is
always the right
thing*

Depression is something that
is serious and not just a
stage, but an illness that can
be helped.

You can get help.
Never give up.

Depression is more
real than I knew

I learned different ways
to deal with depression
and notice symptoms in
myself and others

What questions do you have after watching the documentary?

How long does treatment take?

Who did they tell to get help?

How can I help someone if I think they are suicidal?

Where do you find a therapist?

What if you don't have anyone to talk to?

Does depression work the same way with adults?

What if I want to go to counseling, but my parents don't want me to go?

Are more kids now developing depression?

Can depression return after treatment?

How do I talk to my friend if I am worried that he may be depressed?



A View of the Manual Speak Up, Take Charge, Get Help! Handout



Speak Up, Take Charge, Get Help!

- If you are worried about possible depression in yourself, a friend, or a family member, here are some key things to look for:
 - Change in mood for more than two weeks
 - Isolation from other people
 - Not doing things he/she typically likes to do
 - Change in eating and/or sleeping habits
 - Seeming sad, withdrawn, angry, or irritable
 - Talking about death or suicide
 - Picking fights; getting into trouble; using drugs
- If you want to find out more information about depression in adolescents, here are some helpful websites:
 - www.suicidepreventionlifeline.org
 - www.afsp.org
 - www.hopeline.com
 - www.thetrevorproject.org
 - www.jedfoundation.org
 - www.halfofus.org
 - www.yourlifeyourvoice.org
 - www.familyaware.org
 - www.save.org
 - www.thebalancedmind.org
 - www.findtreatment.samhsa.gov
 - www.helpguide.org
- If you are experiencing a crisis or an emergency, here are the numbers to call:
 - **Emergency services:** 911
 - **Suicide hotline:** 1-800-273-TALK
 - **Teen help line:** 978-688-TEEN
- If you want to talk to someone in your school about anything that is concerning you (does not have to be just about possible depression!), here are the people to visit right away:
 - Name:** _____
 - Office number:** _____
 - Name:** _____
 - Office number:** _____
 - Name:** _____
 - Office number:** _____
- If you are outside of school, and need to talk to an adult right away, here are the important phone numbers to have:
 - Parents/guardians:** _____
 - Phone number:** _____
 - Physician:** _____
 - Phone number:** _____
 - Other:** _____
 - Phone number:** _____

A View of the Manual Student Assistance Request Form

Student Assistance Request Form

Student Name: _____ Grade: _____

- ☐ I would like to talk to someone right away.
- ☐ I would like to set up an appointment to talk to someone.
I can be reached at: _____
- ☐ I do not need any help right now.



Module 3

What Can We Learn?

- Case based group discussion
 - Small group (4-6 students)
 - Four case studies outlined in the manual
 - Brainstorming about treatment
 - Begin discussion on how to approach a friend
- Warning Signs of Suicide
 - Facilitator notes
- True/False Slides
 - Slides related to topics from the documentary



A View from the Manual

Case Study Guides for Students

Case Study Guide for Students



CASE STUDY: JAHCOBIE

1. Why do you think some people might not have believed that Jahcobie was diagnosed with depression?
 2. What were some of Jahcobie's main symptoms?
 3. Why do you think Jahcobie says he has "so many strikes" against him? How do you think this relates to stigma?
 4. Do you think Jahcobie's depression would be categorized as mild, moderate, or severe? Why? What kind of treatment do you think he had to manage his depression?
 5. If Jahcobie was your friend and you were worried about him, how would you approach him?
-



CASE STUDY: IGOR

1. Why do you think some people might not have believed that Igor was diagnosed with depression?
2. What were some of Igor's main symptoms?
3. Do you think Igor's depression would be categorized as mild, moderate, or severe? Why? What kind of treatment do you think he had to manage his depression?
4. How do you think Igor went from feeling suicidal to feeling more hopeful?
5. If Igor was your friend and you were worried about him, how would you approach him?

Case Study Guide for Students



CASE STUDY: CAROLINE

1. Why do you think some people might not have believed that Caroline was diagnosed with depression?
 2. What were some of Caroline's main symptoms?
 3. How did Caroline describe her symptoms of anxiety?
 4. Do you think Caroline's depression would be categorized as mild, moderate, or severe? Why? What kind of treatment do you think she had to manage her depression?
 5. If Caroline was your friend and you were worried about her, how would you approach her?
-



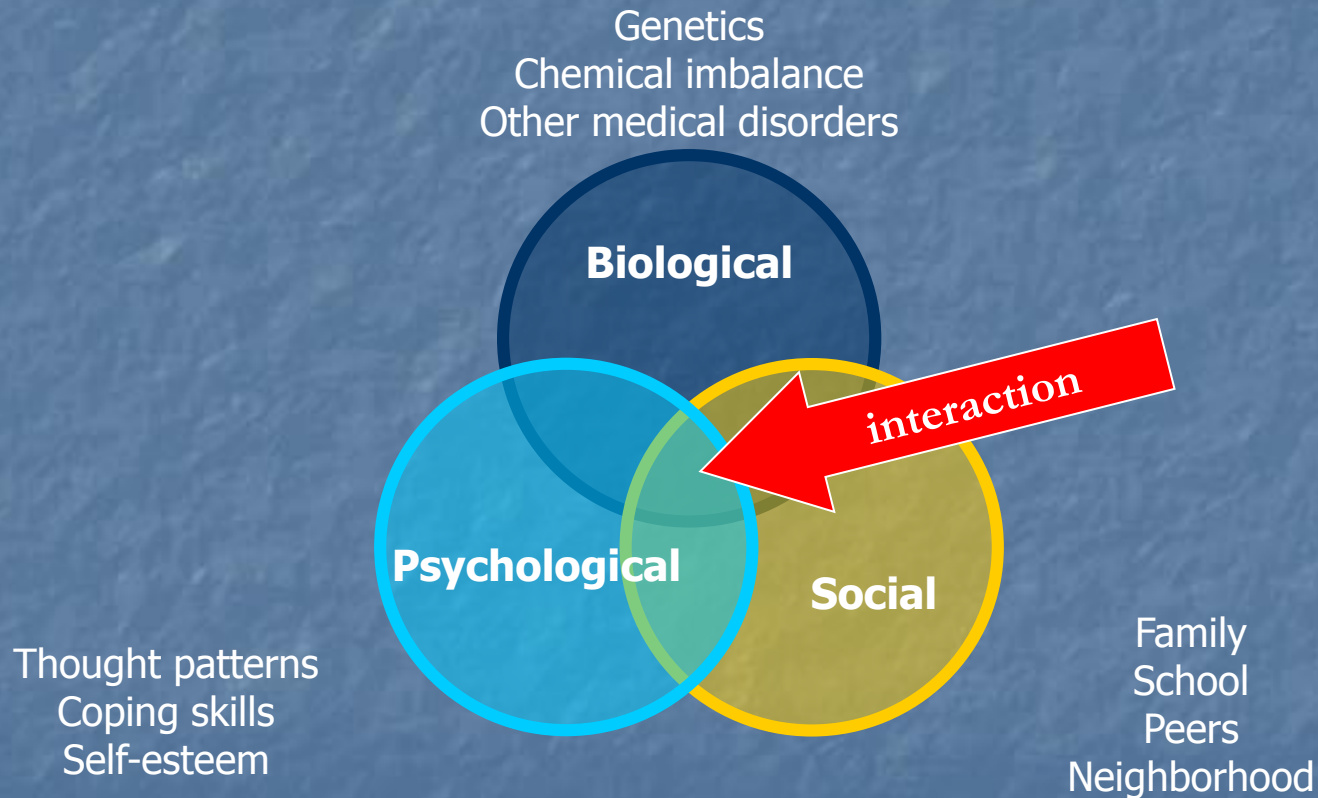
CASE STUDY: ALYSON

1. Why do you think some people might not have believed that Alyson was diagnosed with depression?
2. What were some of Alyson's main symptoms?
3. What do you think Alyson referred to when she talked about the "physical pain" as part of her depression?
4. Do you think Alyson's depression would be categorized as mild, moderate, or severe? Why? What kind of treatment do you think she had to manage her depression?
5. If Alyson was your friend and you were worried about her, how would you approach her?



How Does Depression Happen?

Biopsychosocial Model of Depression



What Are The Symptoms?

- Depressed or **irritable** mood most of the day, nearly every day
- Decreased interest or pleasure in all or almost all activities
- Significant weight loss or gain
- Sleeping too much, or sleeping too little
- Agitated, can't stay still, restless
- Fatigue or loss of energy
- Worthlessness or excessive or inappropriate guilt
- Difficulty concentrating or thinking
- Recurrent thoughts of death

Clinical Depression



Symptoms are happening every day, last most of the day, and are too intense for the person to manage on his/her own

A View of the Manual Case Studies- Facilitator's Guide

Case Study Guide for Presenter



CASE STUDY: JAHCOBIE

1. Why do you think some people might not have believed that Jahcobie was diagnosed with depression?
2. What were some of Jahcobie's main symptoms?
3. Why do you think Jahcobie says he has "so many strikes" against him? How to stigma?
4. Do you think Jahcobie's depression would be categorized as mild, moderate, or severe? What kind of treatment do you think he had to manage his depression?
5. If Jahcobie was your friend and you were worried about him, how would you approach him?

MAIN DISCUSSION POINTS:

1. Jahcobie often acted out, got into fights, and was addicted to drugs and alcohol. He misinterpreted such behaviors as those of someone who is being delinquent. Quite often people do not consider that these behaviors are occurring in someone with a mood disorder; this is especially so for boys, and in particular for boys of color.
2. Substance use, irritability, anger, hopelessness, crying, thoughts of suicide.
3. Jahcobie says he is "obese, black, and gay"—he counts these as three strikes. He believes that the stigma associated with these qualities lead to discrimination and lack of understanding about who he is as a person.
4. Jahcobie's depression would be categorized as being moderate-to-severe. He has been in treatment since a very young age, and still continues to need more intensive interventions to manage the substance abuse and to have a combination of outpatient therapy, ongoing mental health support and medication.
5. Ask the students about possible differences in communication when a boy talks to another boy, or a girl talks to a boy. Refer to the handout "Helping Your Friends through Tough Times - Dos and Don'ts" at the end of Appendix C on page 115 and page 116 to provide students with tips on how to approach friends about whom they have concerns.

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Case Study Guide for Presenter



CASE STUDY: IGOR

1. Why do you think some people might not have believed that Igor was diagnosed with depression?
2. What were some of Igor's main symptoms?
3. Do you think Igor's depression would be categorized as mild, moderate, or severe? What kind of treatment do you think he had to manage his depression?
4. How do you think Igor went from feeling suicidal to feeling more hopeful?
5. If Igor was your friend and you were worried about him, how would you approach him?

MAIN DISCUSSION POINTS:

1. Igor is popular, the captain of the football team, participates in other sports, and is a "tough". People often incorrectly believe that teens who are popular are not depressed.
2. Anger, irritability, withdrawal, changes in eating and sleeping, not going to school, suicidal thoughts, suicide attempt.
3. Igor's depression would be categorized as severe due to the fact that it was a part of his life and he had made a suicide attempt. Igor went through a lot of treatment, including medication, therapy, and hospitalization. Encourage students to think about what this may mean for them.
4. Emphasize that an interaction of factors such as seeking treatment, support and validation from peers, teachers, coaches, etc., and finding healthy coping strategies to help him better deal with the emotional pain can be responsible for Igor's transition from feeling suicidal to feeling more hopeful.
5. Ask the students about possible differences in communication around a boy talks to a boy, or a girl talks to a boy. Refer to the handout "Helping Your Friends through Tough Times - Dos and Don'ts" at the end of Appendix C on page 115 and 116 to provide students with tips on how to approach friends they are concerned about.



CASE STUDY: CAROLINE

1. Why do you think some people might not have believed that Caroline was diagnosed with depression?
2. What were some of Caroline's main symptoms?
3. How did Caroline describe her symptoms of anxiety?
4. Do you think Caroline's depression would be categorized as mild, moderate, or severe? Why? What kind of treatment do you think she had to manage her depression?
5. If Caroline was your friend and you were worried about her, how would you approach her?

MAIN DISCUSSION POINTS:

1. Caroline is popular, has many friends, is an athlete, and goes to a good school. Sometimes people think that if you have not gone through something "really bad" in your life, you cannot develop depression. Caroline talks about the fact that depression can happen to anyone.
2. Sadness, hopelessness, conflicts at home, irritability, lack of interest in activities, sleeping too much, self-injurious behaviors, negative thoughts, suicidal thoughts, suicide attempt.
3. Panic attacks, feeling unable to "stop her thoughts", worry, helplessness.
4. Caroline's depression would be categorized as severe due to her suicidal thoughts, her suicide attempt, and the fact that her symptoms affected every part of her life. Caroline has been in treatment for years, including individual and family therapy, and has been on medication. The hardest components of her treatment were dealing with the suicidal crisis and the self-injurious behavior.
5. Ask students about possible differences in communication around expressing concern when a boy talks to a girl, or when a girl talks to a girl. Refer to the handout "Helping Your Friends through Tough Times - Dos and Don'ts" at the end of Appendix C on page 115 and 116 to provide students with tips on how to approach friends about whom they are concerned.

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Case Study Guide for Presenter



CASE STUDY: ALYSON

1. Why do you think some people might not have believed that Alyson was diagnosed with depression?
 2. What were some of Alyson's main symptoms?
- do you think Alyson was referring to when she talked about the "physical pain" as part of her depression?
- do you think Alyson's depression would be categorized as mild, moderate, or severe? Why? What kind of treatment do you think she had to manage her depression?
- Alyson was your friend and you were worried about her, how would you approach her?

MAIN DISCUSSION POINTS:

- Caroline is popular, a dancer and an artist. While not mentioned in the documentary, she had also participated in beauty pageants and was Miss Key Largo, Florida. Again, people believe that teens who are talented and popular, and exhibit very outgoing and sociable behavior, cannot at the same time be struggling with depression.
- Caroline's symptoms included excessive crying, lack of sleep, hopelessness, worries, and thoughts of suicide. She describes a "pain in her stomach" and a "pain in her chest" related to her depression and anxiety. Often people who struggle with depression experience true pain as a part of their symptoms. This pain can be in the form of headaches, stomachaches, back pain, etc. This pain is real and not just "in your head."
- Caroline's depression would be considered moderate as she did not have any suicidal thoughts nor make any suicide attempts, and was able to function in many areas of her life. Alyson has been in treatment for years, with a combination of individual therapy and medication. While she does not currently have a regular weekly treatment schedule, she always schedules "check-in" appointments when she begins to feel sadder or more anxious than usual.
- Ask the students about possible differences in communication when a boy is talking to a girl or a girl is talking to another girl. Refer to the handout "Helping Your Friends through Tough Times - Dos and Don'ts" at the end of Appendix C on page 115 and 116 to provide students with tips on how to approach friends about whom they are concerned.

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A View of the Manual Warning Signs of Suicide- Facilitator's Notes

Break
Free From
Depression



Warning Signs of Suicide Facilitator Notes

The following behaviors have been shown to be warning signs of a possible suicide attempt:

- Preoccupation with death related topics
 - Talking about suicide
 - Erratic behavior changes
 - Sudden changes in personality
 - Giving away special things
 - Taking excessive risks
 - Increased drug/alcohol use
 - Decreased interest in usual activities
 - Increased isolation
 - Excessive feelings of guilt
 - Getting weapons
- Warning signs are behaviors that happen either minutes or hours before a suicide attempt.
 - Research shows that warning signs are evident in more than 80% of cases of suicide.
 - Such warning behaviors are dramatically different from the adolescent's normal behavior, and occur in the context of someone who is having emotional difficulties. For example, with regard to "taking excessive risks": if you know someone who is typically a "daredevil", is known to be more of a risk-taker than others, and if this risk-taking is not severe and occurs in context of a person who is not struggling emotionally, then it is not a warning sign of suicide. However, when someone is taking excessive risks where harm is likely or expected, and when such behavior occurs in the context of other behaviors that indicate emotional distress, then the behavior would be a warning sign of suicide.
 - In the documentary, suicidal ideation is discussed by three of the young people. It is important to note that they all received help, which enabled them to take measures to stay safe.
 - It is also important to note that most people who attempt suicide do not want to die, but due to their depression (which clouds their judgment) they see it as the only option to end their emotional pain. It is crucial for people in this state to get assistance right away, as they are not thinking clearly and need help in staying safe. In the event of an emergency, call 911.
 - When someone is in emotional crisis, nothing seems to make it better.
 - **If you notice any of these signs, it's crucial to get help right away.**



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Break Free from Depression



Student Module 3: What Can We Learn?



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Approximately 1/3 of adolescents with major depressive disorder also suffer from another mental disorder.

FALSE



Only cyberbullying is
significantly associated with
increases in adolescents'
suicidal ideation.

FALSE



Once people are
diagnosed with a mental
illness, they will never
recover.

FALSE



Research indicates that gay,
lesbian, bisexual, and
transgender youth are at
higher risk for suicide than
their heterosexual peers.

TRUE



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Suicide is the third leading
cause of death for people
ages 15-24, and the second
leading cause of death
among college students.

TRUE



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If you ask someone about
suicide, you will be putting
ideas in his/her head.

FALSE



A View of the Manual Speak Up, Take Charge, Get Help! Handout



Speak Up, Take Charge, Get Help!

- If you are worried about possible depression in yourself, a friend, or a family member, here are some key things to look for:
 - Change in mood for more than two weeks
 - Isolation from other people
 - Not doing things he/she typically likes to do
 - Change in eating and/or sleeping habits
 - Seeming sad, withdrawn, angry, or irritable
 - Talking about death or suicide
 - Picking fights; getting into trouble; using drugs
- If you want to find out more information about depression in adolescents, here are some helpful websites:
 - www.suicidepreventionlifeline.org
 - www.afsp.org
 - www.hopeline.com
 - www.thetrevorproject.org
 - www.jedfoundation.org
 - www.halfonus.org
 - www.yourlifeyourvoice.org
 - www.familyaware.org
 - www.save.org
 - www.thebalancedmind.org
 - www.findtreatment.samhsa.gov
 - www.helpguide.org
- If you are experiencing a crisis or an emergency, here are the numbers to call:
 - **Emergency services:** 911
 - **Suicide hotline:** 1-800-273-TALK
 - **Teen help line:** 978-688-TEEN
- If you want to talk to someone in your school about anything that is concerning you (does not have to be just about possible depression!), here are the people to visit right away:

Name: _____

Office number: _____

Name: _____

Office number: _____

Name: _____

Office number: _____
- If you are outside of school, and need to talk to an adult right away, here are the important phone numbers to have:

Parents/guardians: _____

Phone number: _____

Physician: _____

Phone number: _____

Other: _____

Phone number: _____

A View of the Manual Student Assistance Request Form

Student Assistance Request Form

Student Name: _____ Grade: _____

- ☐ I would like to talk to someone right away.
- ☐ I would like to set up an appointment to talk to someone.
I can be reached at: _____
- ☐ I do not need any help right now.



Module 4

What Can We Do?

- Students will learn strategies for:
 - Approaching a trusted adult in the school
 - Accessing help and/or treatment in the community
 - Approaching someone about whom they are concerned
 - Daily coping skills

Option 1	Option 2	Option 3
Power Point Presentation <i>20 minutes</i>	Power Point Presentation <i>20 minutes</i>	Deep Breathing Exercise <i>5 minutes</i>
Role-Play activity for how to approach a trusted adult and/or a friend <i>25 minutes</i>	Read out loud and discuss the tip sheet "Helping Your Friends Through Tough Times - Dos and Don'ts" aloud <i>20 minutes</i>	Power Point Presentation <i>20 minutes</i>
Student Post-Survey <i>5-10 minutes</i>	Student Post-Survey <i>5-10 minutes</i>	"Compliments" Supplemental Activity Chapter 4 <i>20 minutes</i>
		Student Post-Survey <i>5-10 minutes</i>
Total Time: 50-55 minutes	Total Time: 45-50 minutes	Total Time: 50-55 minutes

- Student Post-Survey



Break Free from Depression Curriculum

Student Module 4:
What Can We Do?



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Depression



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Now That We Know About Depression, What Can We Do About It?

- What is stigma?
- How does stigma prevent teens from asking for help?
- What are some ways to lessen stigma associated with mental illness and help-seeking?



MILD

Able to function in many ways

All symptoms are not always present

Treatment can include: counseling, support from trusted adults, active coping skills

MODERATE

Symptoms interfere with several areas (school, home)

Greater number of symptoms and more persistent on a daily basis

Treatment can include: individual counseling, group counseling, possibly medication

SEVERE

Symptoms interfere with every area of life

Symptoms are frequent, intense, and may include suicidal thoughts

Treatment can include: individual counseling, group counseling, medication, day treatment, possible hospitalization



Continuum of Depression



Who are the adults you trust when you feel very stressed,
sad, or distressed?

Mom

Family Friend

Therapist

Coach

My cousin

Guidance
Counselor

Teacher

Grandmother

School Nurse

Dad

mentor

Uncle/Aunt

Older brother/sister



What words would you use to talk to these adults in order to get help?

I've felt upset and unmotivated for a while. I think I need help.

There are just so many things going on- I just need someone to talk to.

I think I need help because I haven't been able to focus in school lately no matter what I try.

I have a lot on my mind lately- do you have some time to check in?

I haven't been feeling like myself lately, can I talk to you?

I've been so tired and overwhelmed - do you have some time to talk with me?

I just can't stop being sad and stressed out lately. I am worried about myself- what can I do?



If You Are Concerned About Yourself

- If you feel like something is different, or bothering you, don't ignore it until it becomes too difficult to handle.
- Talk to someone you trust:
 - Parent
 - Family member
 - Family friend
 - Teacher
 - Guidance counselor
 - Doctor
 - School nurse
 - Clergy
- What words would you use when asking for help?



What words would you use to approach a friend that you are worried about?

You can always come talk to me.

You've been avoiding me and haven't come to basketball in a week- I'm worried about you.

I'm your friend and want you to know that I'm here to try to help.

No matter what, I'm here for you.

You seem angry all the time- what's up?

You haven't been yourself lately- is everything okay?

You seem depressed.

I've noticed that you've been acting differently lately. Do you need to talk about something?

I haven't seen you in class or at lunch- I've missed you- is everything okay?

You seem really down. What's wrong?



Sometimes friends might not like it when you approach them about your concerns. What can you do if this happens? How else could you try to be helpful?

Just try to hang out with them more

Keep trying to talk to them

Offer to go with them to get help- walk with them to guidance or the nurse

Be nice to them – do something nice for them

Be understanding and patient

Tell someone you trust

Talk to someone at school who knows about depression- adult/counselor/nurse

Keep inviting them places

Talk to a parent (yours or theirs)

Talk to other friends about helping them (not gossip)

If You Are Concerned About A Friend

- Get advice from a trusted adult
- Do not judge or criticize him/her
- Give him/her specific examples of behaviors that are worrying you or that have been quite different than what he/she usually does
- Show you care by saying things like :“I’m here if you need someone to talk to.”
- Discuss options for finding help (e.g., parents, teachers, counselors, etc.)



When you are feeling stressed out, sad, distressed, or angry,
what do you usually do to help yourself through it?

Hang out with
my cat

Write in my journal

Play video games

Listen to music

Play sports

Read

Be alone in
my room
for awhile

Scream into a pillow

Dance around my room

Watch TV

Go hang out with my
friends

Eat ice cream

Sing really loudly

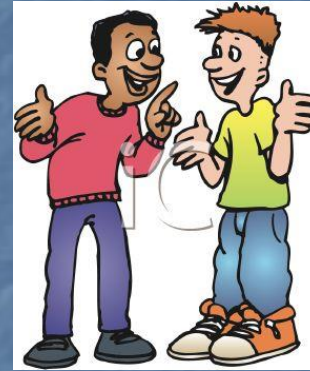
Write it down and
then tear up the
paper

Be outside

Sleep/Nap



Coping Skills



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Let's Practice!



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A View from the Manual

Helping Your Friends Through Tough Times- Dos and Don'ts



Helping Your Friends Through Tough Times – Dos and Don'ts

How Can I Tell If Someone Is Struggling With Depression?

If you are worried about possible depression in someone, here are some key things to look for:

- Change in mood for over two weeks
- Isolation from other people and/or changes in relationships
- Not doing things he/she typically likes to do
- Change in eating or sleeping habits; lack of energy or feeling tired
- Seeming sad, withdrawn, or angry
- Increase in negative self-talk
- Talking about death or suicide
- Picking fights; getting into trouble; using drugs or alcohol
- Difficulties in school
- Difficulty concentrating or making decisions
- Chronic stomach ache/ headache

How Can I Encourage Someone To Get Help?

Helping a friend who may be depressed can be challenging. It's perfectly normal to feel a variety of emotions (overwhelmed, confused, or angry) during your efforts. Helping a friend does not mean you are responsible for fixing their depression. What you can offer is a listening ear, support, and encouragement to seek help. Seek the help of a trusted adult – you are not expected to do this alone!

Do: What Might Be Helpful?

- It is ok to talk to someone and let them know that you have been noticing changes. Use open-ended questions like "How are things going for you? I noticed you seem different lately, can you tell me how you are feeling?"
- Let your friend know that you are there to listen and support, not judge or criticize.
- Offer your friend choices regarding how to get help, including websites, phone numbers for crisis hotlines, or numbers for helpful adults in school or in the community.
- If you think a friend needs help, encourage him/her to get help from a professional. Do not try to solve the problem yourself, but instead offer to help with making phone calls or going to appointments.

- When you are really worried about someone's safety, it is ok to talk to them about it. It is a myth that if you ask someone about suicidal thoughts you will be introducing new ideas. If you are worried about your friend's safety – ask and listen!

- Suicide hotline: 1-800-273-TALK; Teen Help Line: 978-688-TEEN (8336)

Don't: What Might Not Be So Helpful?

- Trying to solve your friend's problems by yourself is not helpful for him/her or for you. Seek professional advice and support from trusted adults!
- Do not avoid the person. You do not have to have all the answers – just be a good listener.
- People who struggle with depression often feel like everything is their fault, or that they just cannot do things right. Statements like this might make them feel worse: "Snap out of it," "Get your act together," "You have so much to be happy about," "Get over it," "I know exactly how you feel," "If you just try hard enough things will be better," or "You're being too sensitive."



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A View of the Manual Post Survey for Students

Break
Free From
Depression



Student Post-Survey

Number of Sessions Attended: _____

My Birthday: _____ Gender: _____ Date: _____

True or False?

1. Depression is a biological illness.	True	False
2. Depression is treatable.	True	False
3. Approximately 1/3 of teens with depression also have another mental illness.	True	False
4. Almost all teens who kill themselves are depressed.	True	False
5. Depression looks different for people from different backgrounds.	True	False
6. Talking to someone about suicide puts ideas into his/her head.	True	False
7. All people who struggle with depression need medication.	True	False
8. Being depressed changes the way you think.	True	False
9. You cannot tell someone is depressed just from looking at them.	True	False
10. Some teens who are depressed appear to be irritable, angry, or violent.	True	False

How much do you agree with each statement?

	Strongly Disagree	Sort of Disagree	Sort of Agree	Strongly Agree
1. Talking about depression or suicide makes things worse.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Teens who are depressed are just being dramatic.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. People like me don't get depressed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. I would tell someone if I was feeling really down or depressed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. I would tell someone if I was thinking about killing myself.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. I would tell someone if I thought a friend was going to kill himself/herself.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. I would know how to talk to a friend if I thought s/he was depressed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. I would know how to talk to a friend if I thought s/he was having suicidal thoughts.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. I would know where to find help for myself or for someone else who was depressed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. I know different strategies I can use to help myself deal with sad or stressful situations.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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What did you think about the Break Free from Depression program?

	Strongly Disagree	Sort of Disagree	Sort of Agree	Strongly Agree
1. The activities and presentation held my attention.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. I learned new information about depression and suicide.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. This program is a good way to learn about depression and suicide.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. The documentary was a helpful piece of the program.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. I would recommend this program to a friend.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Overall, how would you rate the Break Free from Depression program?

Terrible	Okay	Good	Excellent
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Is there anything else you'd like to share about your experience with this program?

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A View of the Manual Student Assistance Request Form

Student Assistance Request Form

Student Name: _____ Grade: _____

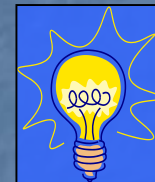
- ☐ I would like to talk to someone right away.
- ☐ I would like to set up an appointment to talk to someone.
I can be reached at: _____
- ☐ I do not need any help right now.



Supplemental Activities

Coping Skills

- Introduction to Journaling
- Deep Breathing Exercise
- Muscle Relaxation Exercise
- Guided Imagery and Visualization
- Learning the PIP! (Problem, Ideas and Plan)
- Avoiding the “NASTY” Trap
- Compliments
- Beating Stress Before It Beats You – The Top 10 Approach
- What Caring Friends Say
- Community Building Activities



**Continue the
conversation!!!!**



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Plan for Implementation

- Identify coordinators for implementing Break Free from Depression
- Identify student participants (by grade level, by classroom, small group, etc)
- Timing and scheduling



A View from the Manual

Sample Schedules

Sample Schedules:

	Monday	Tuesday	Wednesday	Thursday	Friday
Week 1		Module One 50 minutes	Module Two 45 minutes Module Three 45 minutes	Module Four 50 minutes	

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Week 1			Module One 50 minutes		
Week 2			Module Two 45 minutes Module Three 45 minutes		
Week 3			Module Four 50 minutes		

	Monday	Tuesday	Wednesday	Thursday	Friday
Week 1			Module One 50 minutes		
Week 2		Module Two 60 minutes	Module Three 50 minutes		
Week 3			Module Four 50 minutes		



Plan for Implementation

- Parent Outreach
- Staff Development
- Referral for counseling
- Crisis protocol
- Role of mental health clinicians
- Space for immediate intervention
- Mailing your pre and post surveys

Questions?



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Break Free from Depression



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