# Major Depressive Disorder

If you or someone you know needs immediate help, call 911 or the National Suicide Prevention Lifeline at 1-800-273-TALK (8255).

## Diagnosis & Symptoms

5 or more of 9 symptoms (including at least one of depressed mood and loss of interest or pleasure) in the same 2 week period; each of these symptoms represents a change from previous functioning.

- Depressed mood (or irritable in children or adolescents)
- Loss of interest or pleasure
- Change in weight or appetite
- Insomnia or hypersomnia
- Psychomotor agitation
- Loss of energy or fatigue
- Worthlessness or guilt
- Impaired concentration or indecisiveness
- Thoughts of death or suicidal ideation/attempt

## Epidemiology

**Prevalence:**
- 1 in 5 children in the United States suffer from depression
- Major depressive episodes were higher among adolescent females (25.0%) compared to males (8.8%).

**Male vs. Female:**
- Significant gender difference in depression begins to emerge around age 13 as females’ rates of depression begin to increase while males’ rates remain fairly constant.

## Etiology

**Genetics:**
- The dopamine receptor gene DRD4 has been shown to be more highly expressed in individuals with current MDD
- Parental depression, primarily maternal depression have been associated with a child’s risk for developing depression

**Environmental Factors:**
- Low parental support
- Poverty
- Harmful environment
- Stressful life event

## School-Based Treatment

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<th>Tier 1</th>
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<td>Check &amp; Connect Program</td>
<td>Individual &amp; Intensive Counseling</td>
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<td>Mental Health Literacy &amp; Psycho-education</td>
<td>Group-based Counseling (TF-CBT, COPE)</td>
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<td>Trauma-informed Practices</td>
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## Resources

- Suicide Prevention Lifeline
- SAMHSA
- NAMI
- DBSA
- Trevor Project
- National Institute of Mental Health
- Orange County
- Where You Are
- Erika's Lighthouse
- Depression and Bipolar Support Alliance

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**Tier 1**

- SEL Curriculum
- Mental Health Literacy & Psycho-education
- Suicide Prevention
- Trauma-informed Practices

**Tier 2**

- Check & Connect Program
- Group-based Counseling (TF-CBT, COPE)

**Tier 3**

- Individual & Intensive Counseling
- 504s and IEPs
- Referral to Outside Providers / Community-based efforts
**BIPOLAR DISORDER**

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**DIAGNOSIS & SYMPTOMS**

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<tr>
<th>Bipolar Disorder 1</th>
<th>Manic Episode Present</th>
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<tr>
<td><strong>ETIOLOGY</strong></td>
<td><strong>EPIDEMIOLOGY</strong></td>
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<tr>
<td><strong>PREVALENCE:</strong></td>
<td><strong>Distribution:</strong></td>
</tr>
<tr>
<td>1.8% of children</td>
<td>Roughly equal amongst</td>
</tr>
<tr>
<td>and adolescents</td>
<td>sex and race</td>
</tr>
<tr>
<td>2.8% of adults</td>
<td>Most typically</td>
</tr>
<tr>
<td></td>
<td>diagnosed</td>
</tr>
<tr>
<td></td>
<td>between ages</td>
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</tbody>
</table>

**Genetics:**
- Highly heritable but not absolute
- Risk increases as genetic relatedness increases

**ETIOLOGY**

**Physiology:**
- Associated with abnormalities in brain regions
- Association with emotion regulation

**Environmental Factors:**
- Stressful life events
  - Childhood trauma
  - Death of a loved one
  - Financial instability

**EPIDEMIOLOGY**

**SCHOOL-BASED TREATMENT**

**Tier 1**
- Universal Screening
- SEL Curriculum
  - PATHS
- Psycho-education

**ETIOLOGY**

**Physiology:**
- Abnormal/persistent elevated, expansive, or irritable mood (1 week)
- Impaired social/occupational functioning
- Psychotic features

**Environmental Factors:**
- Stressful life events
  - Childhood trauma
  - Death of a loved one
  - Financial instability

**Tier 2**
- Group CBT
  - Emotion Regulation
  - Grounding techniques
  - Check In Check Out

**RESOURCES**

Scan to learn more about NAMI’s resources for Bipolar Depression.