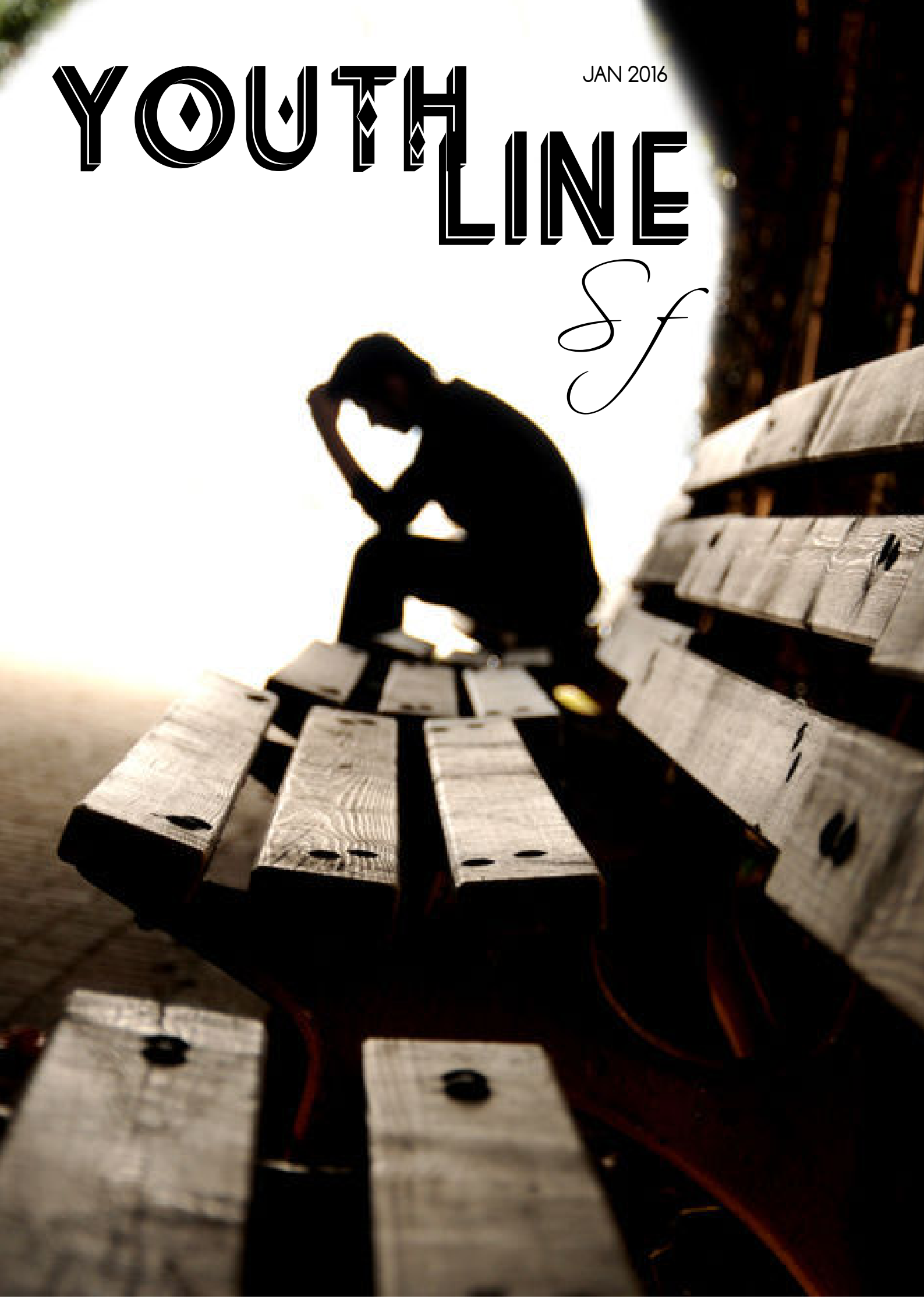


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editorial

As per usual, the monthly zine is here, but this issue is a bit different. You may be wondering why the cover this zine has an empty cover page.

Truth is, there is nothing I can say to lure you into flipping the pages and read about depression. Why try? It is on your end to decide if ignorance is truly bliss or if you should bring light to the darkness.

I know you may be thinking "Why choose now to talk about this? It is the holiday season." But know this, although you might be feeling all the love this time of year, not everyone feels the same way.

Holiday cheer is not guaranteed for everyone. Around this time of year, feelings of despair and abandonment may be magnified because while a fraction of the world is luckily surrounded by family and friends, the remaining portion experiences the amplified isolation.

Things You Ignore

by Yonglin Chen



I can pose the question, “What is depression?” and it’ll take you about half a minute to look up the denotative meaning of the term. At the top of the page, google presents a box that holds what they think “depression” is.

Noun.

They are “feelings of severe despondency and dejection”.

Surely the definition have some truth behind it, but what does it mean to the rest of us. What of the people that are clinically diagnosed with depression—the mental disorder that holds us by our necks when we try opening our mouths to participate. It isn’t about being introverted and preferring to be alone. Feeling alone when you’re by yourself is different from feeling alone when you’re in a room full of people.

People also like to throw the words “I’m depressed” around a lot when talking about a recent misfortune; dead pet or F on a test. As described by the American

Psychiatric Association section on depression, “sadness and depression are not the same.” Sadness is something that will pass, but depression is perpetual sadness. In Spanish, when talking about an emotion, something temporary, you use “estar” describe the state. Depression isn’t a mood, sadness is. A mental illness will not go away simply if you ignore it long enough.

It’s about not being able to put yourself out of bed in the morning because you woke up feeling drained. Healthy people won’t understand the burden a mental sickness can put on a person because all they can see a brooding kid that’s too lazy to socialize and make friends. It’s such a shame that a mental breakdown can’t beat a common cold when it comes to not going to school. “I felt sad,” will only earn us a call home to our parents about how it’s unacceptable to skip school. On the contrary, if I were to lie and say that I had a headache or I’m recovering from a flu, all my teachers would wish me “Feel better soon”.

Although an advertisement for the Brain & Behavior Research Foundation in New York on the side of a building, the wall of graffiti rightfully taps into the hearts of many. In the simplest font for a display ever, the ad showcases the quote.

"Depression is a flaw in chemistry, not

The low levels of serotonin and dopamine are the root causes for depression. Depression don't always come by itself, it is known to co-occur with several other mental disorders such as bipolar disorder and anxiety disorders. This makes it even harder to recover from this particular mental illness. Antidepressants will mimic the functions of these neurotransmitters like serotonin and dopamine in order to start making the patient continually feel better over time.

There are so many things that come with the word "depression". It can mean different things to different people when the word is mentioned. To some it may mean the inability to go out because your sickness is hovering over you or it may mean the sudden memory of losing a friend to depression. The world would be a healthier place if we, as social beings, can speak openly about things like depression and mental illnesses. Don't avoid the topic because you're uncomfortable but talk about it until you're okay with it existing even when you

"being mentally ill + suicidal at a young age (before 18) is. strange, because you grow up with this idea that one day you'll finally snap, turn off, be brave enough to kill yourself so you don't really plan for the future. adulthood- further life, it isn't for you, nor do you feel included within the future of it. it isn't.. it isn't part of your life plan. and then before you know it you're 18 and you're an adult but you never thought you'd get this far and sure it's great that you're still alive you guess but also. you feel so alone + lost in a world you never expected or planned to be a part of."

-bakura daisy leo, <http://www.bakura.co.uk/>



Controlling the Pain

By Yonglin Chen

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It's quite fitting to say that teenagers around the world have been dropping like flies due to mental disorders. Despite the numbers are blaring in our faces, adults are still overlooking the teens affected by the illnesses because they somehow delude themselves into thinking it's not that serious due to the fact that they're underage. In stark contrast, recent study shows that even preschoolers are susceptible to depression. Because the fact that mental disorders can be inherited, it makes the illnesses even harder to control. The worst case scenario, mental illnesses results in death. Now there are many different roads that can get the patients to that breaking point.

Suicide is one major possible endpoint for people with mental disorders like depression, eating disorders, and anxiety. Landing a spot on the list of top causes of death, suicide takes the 10th place. An United Nations report, every 40 seconds, someone in the world commits suicide. Suicide rates have been rising over the last decade, especially in ages 15-24.

1 (800) 273-8255
National
Suicide
Prevention
Lifeline



Coping mechanism aren't always positive and there are many other forms of self harm. People deliberately turn to cutting, burning, and starving themselves whenever they feel like they're losing it. The idea of self harming as a way of coping with a stressful situation may seem contradicting because it appears that all that's doing is making the situation worst. Especially in a case of a panic attack, people feel like the whole world is closing in on them and they can't do anything besides letting their sickness drag them into a downward spiral. As a way of putting themselves back in control, they turn to self harm because in that moment the self-induced injury is the only pain that they can control. Self harm is a coping mechanism because it anchors the person back to reality and even if it's for a second, it makes them feel like their situation is manageable.

Although self-inflicted wounds seem less fatal than suicide, it's the furthest thing away from being beneficial. Many people has a habit of seeing self harm as an act of attention seeking. We as a community need to acknowledge that kids don't cut themselves for no reason and more than often, the reason is something that can be changed. At the end of the day, self harm is just another step closer to death and it shouldn't be a

9 TYPES OF FOOD TO HELP MANAGE DEPRESSION

HUNDREDS OF THOUSANDS OF INDIVIDUALS ALL OVER THE WORLD COPE WITH DEPRESSION EACH AND EVERY DAY. IT ISN'T AN EASY DIAGNOSIS, BUT WITH THE RIGHT NUTRIENTS IT CAN BE BETTER MANAGED. HERE ARE 9 TYPES OF FOOD TO HELP MANAGE DEPRESSION.

1. Carbohydrates

Not all carbohydrates will show positive results to help manage depression but, what many experts like to refer to as, “smart carbs” will. Carbohydrates are linked to strong levels of serotonin, which will help boost your mood. Although this may help boost your mood, make sure that you limit your sugar intake and quench your carb desires by eating smart carbs like fruits, vegetables, whole grains and nuts.

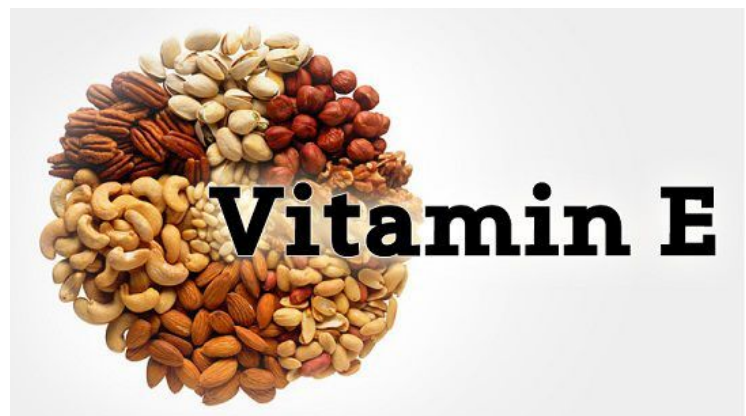


2. Vitamin C

Vitamin C isn't just used for prevent off colds, it's also proven to be effective in dealing with depression as well. Vitamin C, like carbohydrates, play an important role in the production of serotonin. If you're looking to boost your Vitamin C intake, you should consider eating foods such as spinach, oranges, grapefruits and peas.

3. Vitamin E

Low levels of Vitamin E have been found to be connected to anxiety and depression. This vitamin is an antioxidant which holds many great health benefits. If you're looking to boost your mood through Vitamin E, try eating chickpeas, oats, egg yolks, seeds and nuts. Also, try cooking with canola oil or other healthy oils for added benefits.



Vitamin D



Omega-3



Fatty Acids



Protein

4. Vitamin D

The likeliness of suffering from depression was greatly increased in individuals with a Vitamin D deficiency. Increased level of Vitamin D (to a certain extent) led to a decreased level of depression symptoms. If you're looking to boost your Vitamin D intake, consider adding more raw fish, fortified cereals, eggs, mushrooms and dairy products to your diet.

5. Omega-3 Fatty Acids

Omega-3 fatty acids provide endless health benefits. When it comes to depression, scientists have recently revealed that low levels of Omega-3 in your diet can be associated with depression. Eating just a small amount of these acids can have a positive effect on your mindstate. To increase Omega-3 Fatty Acids in your diet, eat more fatty fish, flaxseeds, nuts, canola oil, walnuts and dark green leafy vegetables.

6. Protein

Foods rich in protein are also rich in an amino acid called tyrosine. Tyrosine has been proven to help boost levels of dopamine and norepinephrine – brain chemicals that help you feel alert and energetic. To reap the benefits, simply add more beans, peas, lean beef, milk, poultry, yogurt and fish to your diet.

7. Antioxidants

Many of the foods described in the previous slides fall under this category as well. Antioxidants have the power to eliminate damaging molecules from our bodies. These damaging molecules, called free radicals, often target the brain. While there's no way to stop free radicals from reaching the brain, antioxidants are a great way to reduce the likeliness of them affecting it. Increase your antioxidant levels with foods like apricots, berries (raspberries, strawberries, blueberries), tomatoes, broccoli, seeds, kiwis, oranges, peppers and more.



8. Whole Grains

Whole grains are made up of plenty of healthy nutrients. They are high in fiber, vitamins and amino acids and have been proven to help boost your mood and beat your depression. If you're looking to increase your whole grain intake, consider adding brown rice, whole grain cereal, whole wheat pasta and whole grain breads to your diet.

9. Water

Drinking lots of water is a great way to alleviate depression and anxiety. It's the most important element when it comes to boosting your mood. You see, when your body is dehydrated, your body suffers in several ways. In order to reap the benefits, you must drink actual water. Substituting water for other beverages like coffee, tea, juices or sodas won't produce the same benefits.

By Trayvon Smith

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Depression: The Cause of Robin Williams' Suicide

Article by Trayvon Smith

Many people who commits suicide have experienced extreme distress. You might think the reason for Robin Williams suicide was depression, but that's not necessarily true in this case and is isn't the whole explanation.



Suicide is a profound act that touches the hearts of many, and it raises strong feelings whenever performed or mentioned. Most of the causes and the media has encouraged us to see his mental torment as a symptom of a sickness as real and biologically based as measles or a broken leg. Just like those afflictions, depression can strike anyone randomly throughout their lives. The most pervasive of these ideas is the suggestion that the way depressed people behave is a result of faulty brain chemistry. On the face of it, this is a good alternative to blaming them for being weak in some way. However, what we often lose sight of is that calling certain emotional states or ways of thinking and acting “mental illnesses” is just one way of thinking about them, rather than the only way. It may well be that some of us are more vulnerable than others to feeling desperate, but this is likely to be a result of things that have happened in our lives rather than, or perhaps sometimes in addition to, our genetic makeup. All we really know is that people sometimes feel or act in certain ways.

The rest is down to interpretation.

If you feel sad and hopeless, and stay in bed all day staring at the ceiling, you might well be diagnosed with depression. Being told that you have an illness has its advantages. You can go to your GP and hopefully find a sympathetic ear, make some sense of what’s going on, get medication to take the edge off things and perhaps be referred to a specialist you can talk to. If you can’t work, you can take time off sick.

But there are downsides too. Thinking of yourself as mentally ill might well be a huge blow to your self-confidence. You might conclude that there is little you can do to help yourself except to keep taking the tablets. You might even worry that you are genetically inferior in some way. Mental illness still has many negative associations in the public mind. This can lead to what psychologist Rufus May has described as “us and them” thinking. Lurking in the background is the spectre of the Mental Health Act: people with “mental disorders” are the only group that can be

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and the combination of circumstances, emotions and motivations that precede a suicide attempt will be different for each person. While many people who kill themselves have been experiencing the extreme distress we might think of as depression, that's not always the case and is rarely the whole explanation.

People have been known to kill themselves as a consequence of intense shame, or because they see no way out of a moral dilemma or a future that appears bleak. Many who attempt suicide may not really want to die, but seek instead to escape unbearable psychic pain. There are those with ongoing difficulties who may, in part – and perhaps misguidedly given the often profound effect of a suicide on the person's family – be seeking to release another from what they see as a burden.

And although it may be uncomfortable to think about, for some people the motivations may involve anger as well as desperation. It is important to be open to the range of meanings of a suicidal act and to acknowledge that those left behind may also experience complex and sometimes bitter feelings. Invoking the idea of illness can sometimes be helpful, but it isn't the only way of connecting to people's despair and of offering compassion and help without making value judgements. An alternative is simply to recognise that people can have a tough time. Surely that should be enough.



MORE THAN 2 / 3 OF PEOPLE WHO ARE ON ANTI-DEPRESSANT RX'S MAY NOT ACTUALLY HAVE DEPRESSION

The majority of people taking antidepressants may not actually have depression, a new study claims. Researchers discovered more than two-thirds (69 per cent) of people taking antidepressants did not meet the criteria for major depressive disorder, which is also known as clinical depression.

Antidepressants are also prescribed for other psychiatric disorders. But the researchers found 38 per cent of those taking the drugs did not meet the criteria for obsessive compulsive disorder, panic disorder, social phobia or generalised anxiety disorder either.

The U.S. investigators looked at those taking selective serotonin reuptake inhibitors (SSRI), the most commonly prescribed type of antidepressant. SSRIs are usually the first choice medication for depression and other psychiatric conditions because they generally have fewer side effects than most other types of antidepressant.

Writing in the report, published in the Journal of Clinical Psychiatry, the researchers concluded: 'Many individuals prescribed antidepressants may not have met the criteria for mental disorders. Our data indicates that antidepressants are commonly used in the absence of clear evidence-based indications.' Commenting on the study, Dr Howard Forman,

medical director of the Addiction Consultation Service at Montefiore Medical Center, said clinical depression is distinct from temporary feelings of sadness.

He told Medical Daily: 'We all experience periods of stress, periods of sadness, and periods of self-doubt.' These don't make us mentally ill, they define us as human.'

In the U.S., official guidelines say clinical depression should be diagnosed if a person has five or more depressive symptoms over a two week period, most of the day, nearly every day.

The symptoms include a depressed mood; a loss of interest or pleasure in activities; weight loss, weight gain or changes in appetite; insomnia or increased desire to sleep.

Prescriptions for anti-depressants have more than trebled since 1998 in the world's richest countries, a study by the Organisation for Economic Co-operation and Development found.

According to a study conducted by RET, figures showed Iceland to have the highest prescribing rate, at 106 doses a day for every 1,000 inhabitants in 2011, up from 71 a decade earlier. Behind Iceland is Australia, then Canada, Denmark, Sweden and Portugal. The lowest levels were seen in Chile and South Korea.

Separate data from the US shows 11 per cent of Americans over 12-years-old use antidepressants.

The study assessed whether the people in this group met the criteria for a mental disorder, as laid out in the latest edition of the Diagnostic and Statistical Manual of Mental Disorders, the U.S. bible for psychiatric conditions.

They found that 38 percent of SSRI users did not meet the criteria for a mental disorder, and 69 per cent did not meet the criteria for major depressive disorder.

The news comes after a study found women who take antidepressants during pregnancy are more likely to have a baby with autism. The U.S. study supports previous research which has shown that taking SSRI

antidepressants during pregnancy increases a woman's risk of having a child with the developmental disability.

And other American research revealed young adults taking high-dose antidepressants such as Prozac and Seroquel have double the risk of suicidal behaviour.

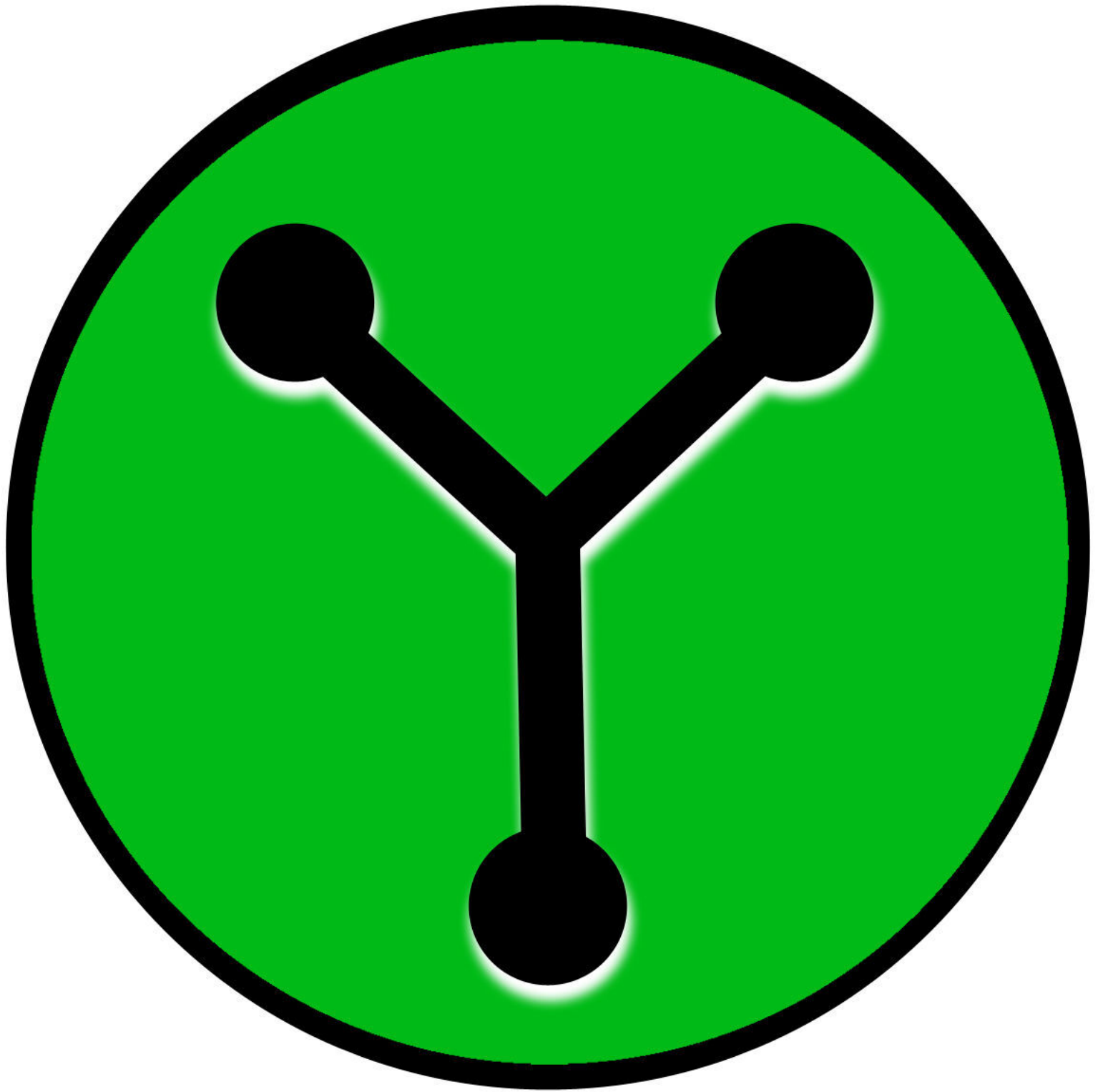
Researchers pointed to previous studies, which found antidepressant drugs are linked with an increased risk of suicidal behaviour and thoughts in children and adolescents, particularly in the early stages of treatment.

I found this data quite alarming and am wondering whether or not this is old or new news to others. Regardless, I am passing on this information in hope that awareness around this epidemic is spread.

by Kayla Lebo



THE SCOOP



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