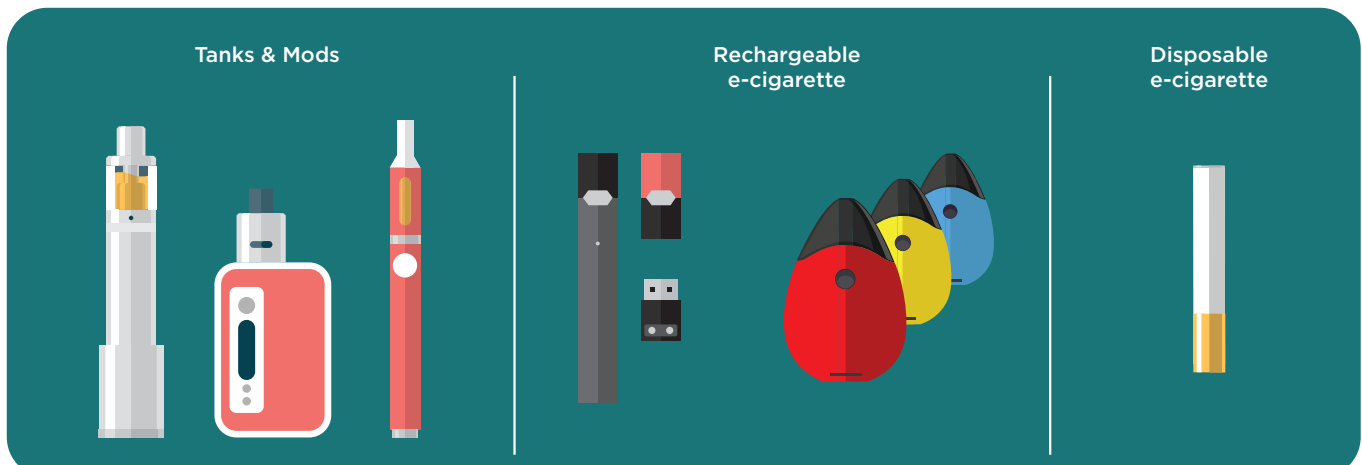


- » E-cigarettes have the potential to benefit adult smokers who are not pregnant if used as a complete substitute for regular cigarettes and other smoked tobacco products.
- » E-cigarettes are not safe for youth, young adults, pregnant women, or adults who do not currently use tobacco products.
- » While e-cigarettes have the potential to benefit some people and harm others, scientists still have a lot to learn about whether e-cigarettes are effective for quitting smoking.
- » If you've never smoked or used other tobacco products or e-cigarettes, don't start.

WHAT ARE E-CIGARETTES?

- » E-cigarettes are known by many different names. They are sometimes called “e-cigs,” “e-hookahs,” “mods,” “vape pens,” “vapes,” “tank systems,” and “electronic nicotine delivery systems.”
- » Some e-cigarettes are made to look like regular cigarettes, cigars, or pipes. Some resemble pens, USB sticks, and other everyday items.
- » E-cigarettes produce an aerosol by heating a liquid that usually contains nicotine—the addictive drug in regular cigarettes, cigars, and other tobacco products—flavorings, and other chemicals that help to make the aerosol. Users inhale this aerosol into their lungs. Bystanders can also breathe in this aerosol when the user exhales into the air.
- » E-cigarettes can be used to deliver marijuana and other drugs.

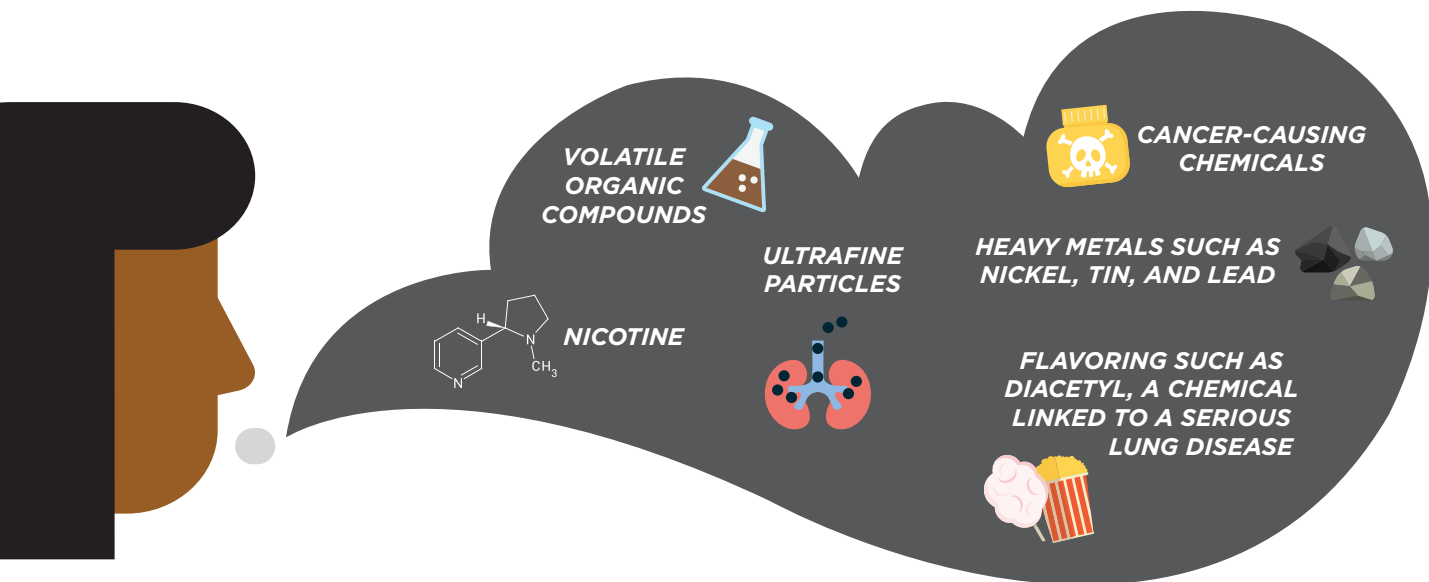


CS298852-A



WHAT IS IN E-CIGARETTE AEROSOL?

THE E-CIGARETTE AEROSOL THAT USERS BREATHE FROM THE DEVICE AND EXHALE CAN CONTAIN HARMFUL AND POTENTIALLY HARMFUL SUBSTANCES:



It is difficult for consumers to know what e-cigarette products contain. For example, some e-cigarettes marketed as containing zero percent nicotine have been found to contain nicotine.

ARE E-CIGARETTES LESS HARMFUL THAN REGULAR CIGARETTES?



VS



YES, but that doesn't mean e-cigarettes are safe.

E-cigarette aerosol generally contains fewer toxic chemicals than the deadly mix of 7,000 chemicals in smoke from regular cigarettes. However, e-cigarette aerosol is not harmless. It can contain harmful and potentially harmful substances, including nicotine, heavy metals like lead, volatile organic compounds, and cancer-causing agents.

WHAT ARE THE HEALTH EFFECTS OF USING E-CIGARETTES?

SCIENTISTS ARE STILL LEARNING ABOUT THE LONG-TERM HEALTH EFFECTS OF E-CIGARETTES. HERE IS WHAT WE KNOW NOW.

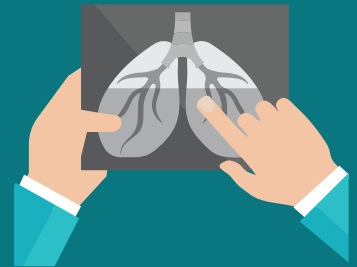
1 Most e-cigarettes contain nicotine, which has known health effects

- » Nicotine is highly addictive.
- » Nicotine is toxic to developing fetuses.
- » Nicotine can harm adolescent brain development, which continues into the early to mid-20s.
- » Nicotine is a health danger for pregnant women and their developing babies.



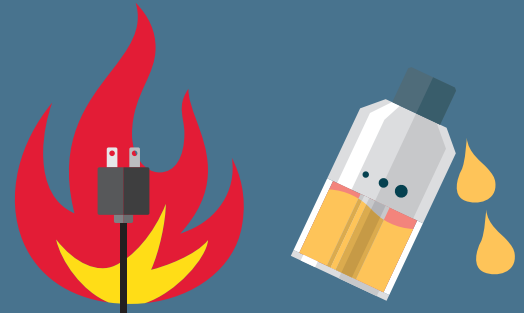
2 Besides nicotine, e-cigarette aerosol can contain substances that harm the body.

- » This includes cancer-causing chemicals and tiny particles that reach deep into lungs. However, e-cigarette aerosol generally contains fewer harmful chemicals than smoke from burned tobacco products.

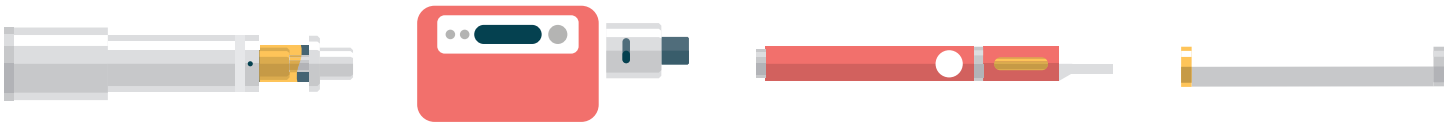


3 E-cigarettes can cause unintended injuries.

- » Defective e-cigarette batteries have caused fires and explosions, some of which have resulted in serious injuries.
- » In addition, acute nicotine exposure can be toxic. Children and adults have been poisoned by swallowing, breathing, or absorbing e-cigarette liquid.



CAN E-CIGARETTES HELP ADULTS QUIT SMOKING CIGARETTES?



E-CIGARETTES ARE NOT CURRENTLY APPROVED BY THE FDA AS A QUIT SMOKING AID.

The U.S. Preventive Services Task Force, a group of health experts that makes recommendations about preventive health care, concluded that the evidence is insufficient to recommend e-cigarettes for smoking cessation in adults, including pregnant women.



HOWEVER, e-cigarettes may help non-pregnant adult smokers if used as a complete substitute for all cigarettes and other smoked tobacco products.

TO DATE, THE FEW STUDIES ON THE ISSUE ARE MIXED.

Evidence from two randomized controlled trials found that e-cigarettes with nicotine can help smokers stop smoking in the long term compared with placebo (non-nicotine) e-cigarettes.

A recent CDC study found that many adults are using e-cigarettes in an attempt to quit smoking. However, most adult e-cigarette users do not stop smoking cigarettes and are instead continuing to use both products (“dual use”). Because smoking even a few cigarettes a day can be dangerous, quitting smoking completely is very important to protect your health.

WHO IS USING E-CIGARETTES?

E-CIGARETTES ARE THE MOST COMMONLY USED TOBACCO PRODUCT AMONG YOUTH.

IN THE U.S., YOUTH ARE MORE LIKELY THAN ADULTS TO USE E-CIGARETTE



4.9%

MIDDLE SCHOOL STUDENTS

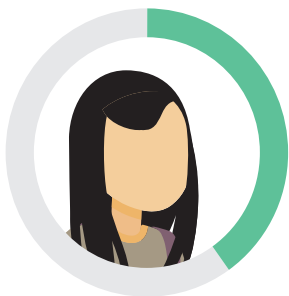
In 2018, more than

3.6 MILLION

U.S. middle and high school students used e-cigarettes in the past 30 days, including:

20.8%

HIGH SCHOOL STUDENTS



AMONG CURRENT E-CIGARETTE USERS AGED 45 YEARS AND OLDER in 2015, most were either current or former regular cigarette smokers, and 1.3% had never been cigarette smokers.

IN CONTRAST, AMONG CURRENT E-CIGARETTE USERS AGED 18-24 YEARS, 40.0% had **NEVER BEEN** regular cigarette smokers

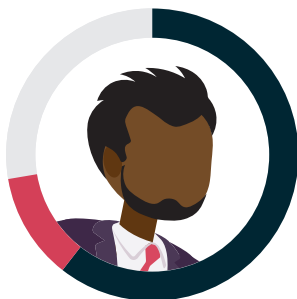
IN 2015, AMONG ADULT E-CIGARETTE USERS OVERALL:

29.8%

were former regular cigarette smokers

11.4%

had never been regular cigarette smokers



58.8%

were current regular cigarette smokers

ADULTS

In 2017, **2.8%** of U.S. adults were current e-cigarette users



Smoking & Tobacco Use

Quick Facts on the Risks of E-cigarettes for Kids, Teens, and Young Adults

What's the Bottom Line on the Risks of E-cigarettes for Kids, Teens, and Young Adults?

- The use of e-cigarettes is unsafe for kids, teens, and young adults.
- Most e-cigarettes contain nicotine. Nicotine is highly addictive and can harm adolescent brain development, which continues into the early to mid-20s.¹
- E-cigarettes can contain other harmful substances besides nicotine.
- Young people who use e-cigarettes may be more likely to smoke cigarettes in the future.



The use of e-cigarettes is unsafe for kids, teens, and young adults.

Outbreak of Lung Injury Associated with the Use of E-Cigarette, or Vaping, Products



What Are E-cigarettes?

- E-cigarettes are electronic devices that heat a liquid and produce an aerosol, or mix of small particles in the air.
- E-cigarettes come in many shapes and sizes. Most have a battery, a heating element, and a place to hold a liquid.
- Some e-cigarettes look like regular cigarettes, cigars, or pipes. Some look like USB flash drives, pens, and other everyday items. Larger devices such as tank systems, or “mods,” do not look like other tobacco products.
- E-cigarettes are known by many different names. They are sometimes called “e-cigs,” “e-hookahs,” “mods,” “vape pens,” “vapes,” “tank systems,” and “electronic nicotine delivery systems (ENDS).”
- Using an e-cigarette is sometimes called “vaping” or “JUULing.”

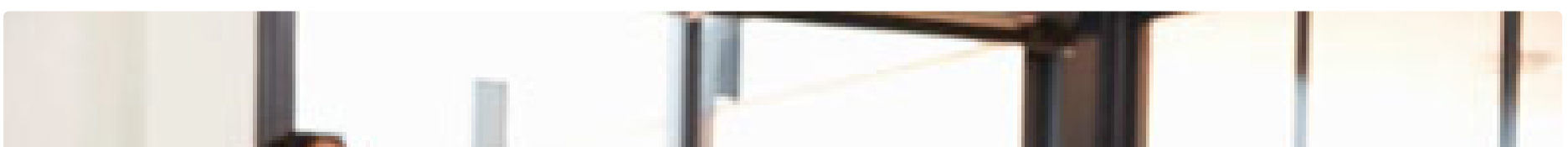


Some e-cigarettes look like regular cigarettes, cigars, or pipes. Some look like USB flash drives, pens, and other everyday items.

How Do E-cigarettes Work?


- E-cigarettes produce an aerosol by heating a liquid that usually contains nicotine, flavorings, and other chemicals that help to make the aerosol.
- The liquid used in e-cigarettes often contains nicotine and flavorings. This liquid is sometimes called “e-juice,” “e-liquid,” “vape juice,” or “vape liquid.”
- Users inhale e-cigarette aerosol into their lungs. Bystanders can also breathe in this aerosol when the user exhales it into the air.
- E-cigarette devices can be used to deliver marijuana and other drugs.

What Is JUUL?





News outlets and social media sites report widespread use of JUUL by students in schools, including classrooms and bathrooms.

- JUUL is a brand of e-cigarette that is shaped like a USB flash drive. Like other e-cigarettes, JUUL is a battery-powered device that heats a nicotine-containing liquid to produce an aerosol that is inhaled.
- All JUUL e-cigarettes have a high level of nicotine. According to the manufacturer, a single JUUL pod contains as much nicotine as a pack of 20 regular cigarettes.²
- JUUL is one of a few e-cigarettes that use nicotine salts, which allow particularly high levels of nicotine to be inhaled more easily and with less irritation than the free-base nicotine that has traditionally been used in tobacco products, including e-cigarettes.
- News outlets and social media sites report widespread use of JUUL by students in schools, including classrooms and bathrooms.
- Approximately two-thirds of JUUL users aged 15 – 24 do not know that JUUL always contains nicotine.
- Although JUUL is currently the top-selling e-cigarette brand in the United States, other companies sell e-cigarettes that look like USB flash drives. Examples include the MarkTen Elite, a nicotine delivery device, and the PAX Era, a marijuana delivery device that looks like JUUL.
- Additional information about USB-shaped e-cigarettes and actions that parents, educators, and health care providers can take to protect kids is available at [CDC's Infographic](#)  [PDF – 1.2MB]

Why Is Nicotine Unsafe for Kids, Teens, and Young Adults?

- Most e-cigarettes contain nicotine—the addictive drug in regular cigarettes, cigars, and other tobacco products.
- A recent CDC study found that 99% of the e-cigarettes sold in assessed venues in the United States contained nicotine.
- Some e-cigarette labels do not disclose that they contain nicotine, and some e-cigarettes marketed as containing 0% nicotine have been found to contain nicotine.
- Nicotine can harm the developing adolescent brain.¹ The brain keeps developing until about age 25.
- Using nicotine in adolescence can harm the parts of the brain that control attention, learning, mood, and impulse control.¹
- Each time a new memory is created or a new skill is learned, stronger connections – or synapses – are built between brain cells. Young people's brains build synapses faster than adult brains. Nicotine changes the way

these synapses are formed.

- Using nicotine in adolescence may also increase risk for future addiction to other drugs.¹

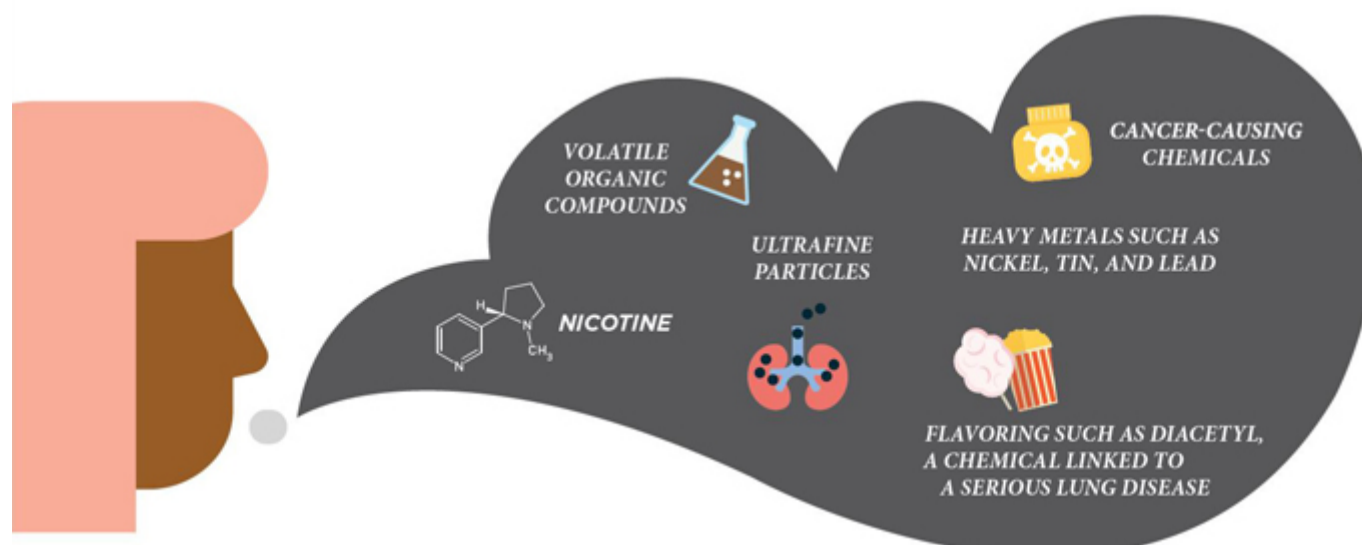


What Are the Other Risks of E-cigarettes for Kids, Teens, and Young Adults?

- Scientists are still learning about the long-term health effects of e-cigarettes.
- Some of the ingredients in e-cigarette aerosol could also be harmful to the lungs in the long-term. For example, some e-cigarette flavorings may be safe to eat but not to inhale because the gut can process more substances than the lungs.¹
- Defective e-cigarette batteries have caused some fires and explosions, a few of which have resulted in serious injuries.
- Children and adults have been poisoned by swallowing, breathing, or absorbing e-cigarette liquid through their skin or eyes. Nationally, approximately 50% of calls to poison control centers for e-cigarettes are for kids 5 years of age or younger.

What Is in E-cigarette Aerosol?

- E-cigarette aerosol is NOT harmless “water vapor.”
- The e-cigarette aerosol that users breathe from the device and exhale can contain harmful and potentially harmful substances, including:
 - Nicotine
 - Ultrafine particles that can be inhaled deep into the lungs
 - Flavorings such as diacetyl, a chemical linked to a serious lung disease
 - Volatile organic compounds
 - Cancer-causing chemicals
 - Heavy metals such as nickel, tin, and lead¹
- The aerosol that users inhale and exhale from e-cigarettes can expose both themselves and bystanders to harmful substances.
- It is difficult for consumers to know what e-cigarette products contain. For example, some e-cigarettes marketed as containing zero percent nicotine have been found to contain nicotine.³



Flavors and Marketing Make E-cigarettes Appealing to Youth

- Many e-cigarettes come in fruit, candy, and other kid-friendly flavors, such as mango, fruit and crème.
- A majority of youth e-cigarette users report using flavored varieties, most youth e-cigarette users first start using e-cigarettes with a flavored variety, and flavors are the primary reason youth report using e-cigarettes.
- E-cigarettes are also advertised using the same themes and tactics that have been shown to increase youth initiation of other tobacco products, including cigarettes. In 2016, about 8 in 10 middle school and high school students—more than 20 million youth—said they had seen e-cigarette advertising.
- Widespread advertising for these products, including via media for which advertising for conventional tobacco products is prohibited (e.g., TV), and the lower costs of some of these products relative to conventional cigarettes has contributed to the increase in e-cigarette use among youth.
- Many youth also report using e-cigarettes because they are curious about these new products, and because they believe these products to be less harmful than conventional cigarettes.

Can Using E-cigarettes Lead to Future Cigarette Smoking Among Kids, Teens, and Young Adults?

- Many young people who use e-cigarettes also smoke cigarettes.¹ There is some evidence that young people who use e-cigarettes may be more likely to smoke cigarettes in the future.
- Specifically, a 2018 National Academy of Medicine report found that there was some evidence that e-cigarette use increases the frequency and amount of cigarette smoking in the future.⁴
- E-cigarettes also can be used to deliver other drugs, including marijuana; in 2016, approximately one-third of U.S. middle and high school students who have ever used an e-cigarette reported using marijuana in the device.
- But e-cigarette use among young people is unsafe, even if they do not progress to future cigarette smoking.


Aren't E-cigarettes Safer Than Cigarettes?

- E-cigarettes expose users to fewer harmful chemicals than burned cigarettes.¹ But burned cigarettes are extraordinarily dangerous, killing half of all people who smoke long-term.
- The use of any tobacco product, including e-cigarettes, is unsafe for young people.


Are E-cigarettes Regulated at the Federal Level?

- Yes. In August 2016, the regulatory authority of the FDA was extended to cover e-cigarettes through the agency's "deeming rule."
- Through authority granted by the Family Smoking Prevention and Tobacco Control Act (FSPTCA), FDA has authority to develop regulations that address the manufacturing, marketing, and sale of e-cigarettes.
- However, the FSPTCA does not prevent states and communities from adopting many strategies related to e-cigarettes. There are also many strategies that FDA does not have authority to implement and that states can do, such as including e-cigarettes in smoke-free policies, pricing strategies, and increasing the age of sale for tobacco products to 21.

Are There Any National Public Education Prevention Campaigns Focused on Youth and E-cigarettes?

- Yes. In 2018, [the FDA expanded its successful youth tobacco prevention campaign](#)  , "The Real Cost," to reach the more than 10 million youth aged 12–17 who have used e-cigarettes or are open to trying them. The campaign educates youth about the potential risks of using e-cigarettes.
- The "Real Cost" reaches teens where they spend most of their time: in school and online. The campaign is also

placing e-cigarette prevention materials in high schools across the nation, both in school bathrooms and on educational digital platforms accessed by students during the school day.

- The Truth Initiative® launched the “Safer ≠ Safe” campaign in 2018, focusing on correcting youth misperceptions and providing accurate information about e-cigarettes and youth. The campaign is being promoted on digital and social media, including the [Safer ≠ Safe website](#)  , which features videos, articles and interactive activities for youth.

What Do We Know About Heated Tobacco Products?

- Heated tobacco products (HTPs) like IQOS and Eclipse, sometimes marketed as “heat-not-burn” technology, represent a diverse class of products that heat the tobacco leaf to produce an inhaled aerosol. They are different from e-cigarettes, which heat a liquid that can contain nicotine derived from tobacco.
- HTPs are available in at least 40 countries and have several have been authorized for sale in the United States by the FDA. In 2018, few U.S. adults (2.4% of all surveyed, including 6.7% of current smokers surveyed) had ever used HTPs. Youth use of HTPs is unknown, but monitoring is underway.
- Scientists are still learning about the short-term and long-term health effects of HTPs, but the available science shows they contain harmful and potentially harmful ingredients. Youth use of any tobacco products, including heated products, is unsafe.
- It is important that we continue to modernize proven tobacco prevention and control strategies to include newer products entering the market such as HTPs.

What Can I Do to Prevent My Child from Using E-cigarettes or to Help Them Stop?



Talk to your child or teen about why e-cigarettes are harmful for them. It's never too late.

- Set a good example by being tobacco-free and ensure that your kid is not exposed to the secondhand emissions from any tobacco products, including e-cigarettes.
- If you use tobacco, it's never too late to quit. For free help, visit [smokefree.gov](https://www.smokefree.gov) or call 1-800-QUIT-NOW.
- Talk to your child or teen about why e-cigarettes are harmful for them. It's never too late.
- Get the [Talk With Your Teen About E-cigarettes](#) [PDF – 5.2MB] tip sheet for parents. Start the conversation early with children about why e-cigarettes are harmful for them.
- Let your child know that you want them to stay away from all tobacco products, including e-cigarettes, because they are not safe for them. Seek help and get involved.
 - Set up an appointment with your child's health care provider so that they can hear from a medical professional about the health risks of tobacco products, including e-cigarettes.
 - Speak with your child's teacher and school administrator about enforcement of tobacco-free school grounds policies and tobacco prevention curriculum.
 - Encourage your child to learn the facts and get tips for quitting tobacco products at [Teen.smokefree.gov](https://www.teen.smokefree.gov).

Where Can I Learn More?

- [E-cigarettes and Youth: Toolkit for Partners](#) [PDF–13 MB]
- [Surgeon General's Advisory on E-cigarette Use Among Youth](#)
 - [Download](#) [PDF–572 KB]
- [SAMHSA—Understanding Addiction](#)
 - Anyone can experience addiction. Learn the common signs of addiction at the SAMHSA website.
- [E-cigarettes Shaped Like Flash Drives: Information for Parents, Educators, and Health Care Providers](#)
- [Teachers and Parents: That USB Stick Might Be an E-cigarette](#)
- [E-cigarettes.surgeongeneral.gov](https://www.e-cigarettes.surgeongeneral.gov)
 - Information from the Surgeon General on the risks of e-cigarettes for young people, and includes free tools such as a [parent tip sheet for talking to teens about e-cigarettes](#) [PDF – 5.2MB].
- [Teen.smokefree.gov](https://www.teen.smokefree.gov)
 - Information to help teens who want to quit using e-cigarettes.
- [Truth Initiative's This is Quitting Program](#)
 - This free mobile program is designed to help young people quit e-cigarettes. Resources are available for teens and young adults as well as parents.
- [Find Treatment](#)
 - Find a list of addiction treatment centers using the SAMHSA website. Please contact a center directly to ask if they treat e-cigarette dependence.
- [Electronic Cigarettes](#)
 - Basic information about e-cigarettes from CDC's Office on Smoking and Health.

Resources




E-CIGARETTES SHAPED LIKE USB FLASH DRIVES:



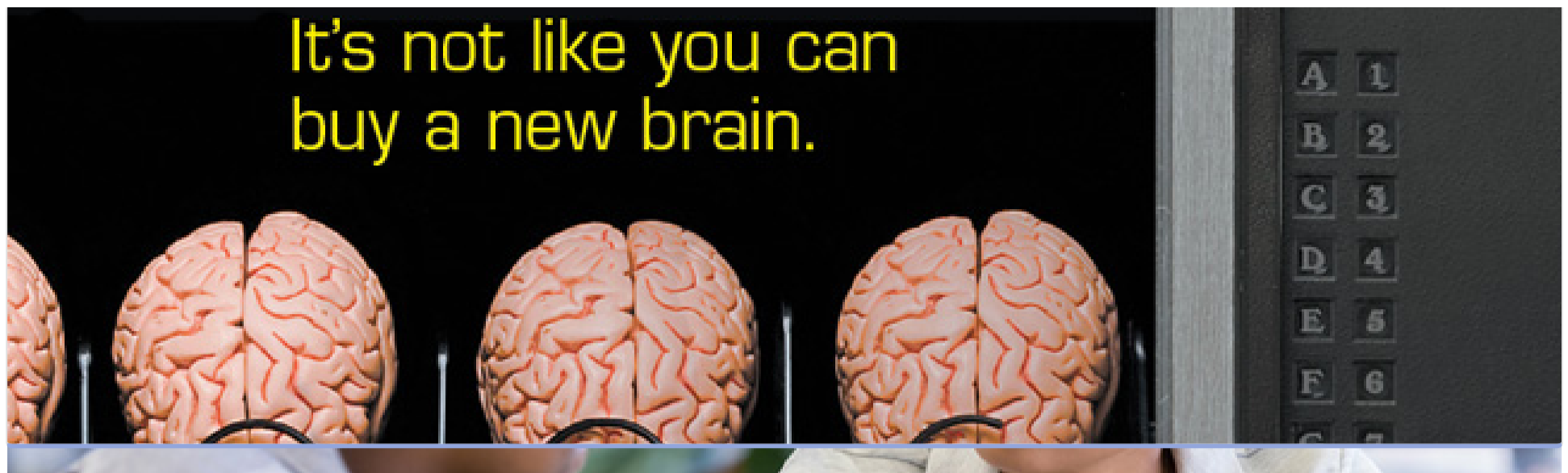


E-cigarette, or Vaping, Products Visual Dictionary

This product is intended for educational purposes only for public health officials and healthcare providers. The devices and brands presented in this pamphlet are intended to highlight the different e-cigarette, or vaping, product generations and substances used in these devices.

 [PDF - 3 MB]

Multimedia about E-cigarettes



Sources

1. US Department of Health and Human Services. *E-cigarette Use Among Youth and Young Adults: A Report of the Surgeon General*  [PDF – 8.47MB]. Atlanta, GA: US Department of Health and Human Services, CDC; 2016. Accessed July 27, 2018.
2. Willett JG, Bennett M, Hair EC, et al Recognition, use and perceptions of JUUL among youth and young adults. *Tobacco Control Published Online First*. 18 April 2018. doi: 10.1136/tobaccocontrol-2018-054273
3. Goniewicz ML, Gupta R, Lee YH, et al. Nicotine levels in electronic cigarette refill solutions: a comparative analysis of products from the United States, Korea, and Poland. *Int J Drug Policy*. 2015;26(6):583–588.
4. National Academies of Sciences, Engineering, and Medicine. 2018. *Public health consequences of e-cigarettes*  . Washington, DC: The National Academies Press.

["One Brain" PSA Transcript](#)  [PDF – 14KB]

Page last reviewed: February 3, 2020

MENU

Quit Vaping

Quitting vaping can be tough, but we have resources that can help. Find out how to quit vaping and stay vape-free.



How to Quit Vaping

Quitting vapes can be easier when you prepare in advance and have a plan. Find out what you can do to get ready to quit.

(/quit-vaping/how-to-quit-vaping)

Your First Day Without Vaping

The first day without your vape can be hard, but there are ways to make it easier. Get through your quit day with these five steps.

(/quit-vaping/your-first-day-without-vaping)

Deal With Vape Cravings

Dealing with cravings is one of the hardest parts of quitting vaping. Try these tips and strategies for managing cravings.

(/quit-vaping/deal-with-vape-cravings)

Understand Your Vaping Triggers

Triggers are the things that make you want to vape. Knowing your triggers and having a plan to deal with them will help you quit.

(/quit-vaping/understand-your-vaping-triggers)

Vaping Addiction and Nicotine Withdrawal

Nicotine is in most vapes, and it's very addictive. You may experience symptoms of nicotine withdrawal when you quit vaping. There are things you can do to cope.

(/quit-vaping/vaping-addiction-nicotine-withdrawal)

Anxiety, Stress, and Vaping

Stress and anxiety can trigger vape cravings, and make it harder to stay quit. Find healthy and effective ways to cope with these feelings.

(/quit-vaping/anxiety-stress-vaping)

MENU

Depression and Vaping

Some people vape when they are feeling sad or depressed, but vaping is not an effective way to deal with these feelings. Find healthy ways to cope with your moods.
(/quit-vaping/depression-vaping)

(<https://www.facebook.com/SmokefreeUS>)

(<http://instagram.com/smokefreeus>)

(<http://twitter.com/SmokefreeUS>)

LiveHelp | QuitPlan | SmokefreeTXT

Home | About Smokefree Teen | Health Professionals | FOIA | Privacy | Accessibility
| Players & Viewers | Disclaimer

U.S. Department of Health and Human Services | National Institutes of Health | National
Cancer Institute | USA.gov

Learn More @BeTobaccoFree.gov (<https://betobaccofree.hhs.gov>)

NIH... Turning Discovery Into Health®

TEEN..... DEPRESSION

Being a teenager can be tough. There are changes taking place in your body and brain that can affect how you learn, think, and behave. And if you are facing tough or stressful situations, it is normal to have emotional ups and downs.

But if you have been overwhelmingly sad for a long time (a few weeks to months) and you're not able to concentrate or do the things you usually enjoy, you may want to talk to a trusted adult about depression.



National Institute
of Mental Health

What Is Depression?

Depression (major depressive disorder) is a medical illness that can interfere with your ability to handle your daily activities, such as sleeping, eating, or managing your school work. Depression is common but that doesn't mean it isn't serious. Treatment may be needed for someone to feel better. Depression can happen at any age, but often symptoms begin in the teens or early 20s or 30s. It can occur along with other mental disorders, substance abuse, and other health conditions.

Why can't you just 'snap out' of depression?

Well-meaning friends or family members may try to tell someone with depression to "snap out of it," "just be positive," or "you can be happier if you just try harder." But depression is not a sign of weakness or a character flaw. **Most people with depression need treatment to get better.**

What Are the Signs and Symptoms of Depression?

Sadness is something we all experience. It is a normal reaction to a loss or a setback, but it usually passes with a little time. Depression is different.

If you are wondering if you may have depression, ask yourself these questions:

- ▶ Do you constantly feel sad, anxious, or even "empty," like you feel nothing?
- ▶ Do you feel hopeless or like everything is going wrong?

- ▶ Do you feel like you're worthless or helpless? Do you feel guilty about things?
 - ▶ Do you feel irritable much of the time?
 - ▶ Do you find yourself spending more time alone and withdrawing from friends and family?
 - ▶ Are your grades dropping?
 - ▶ Have you lost interest or pleasure in activities and hobbies that you used to enjoy?
 - ▶ Have your eating or sleeping habits changed (eating or sleeping more than usual or less than usual)?
 - ▶ Do you always feel tired? Like you have less energy than normal or no energy at all?
 - ▶ Do you feel restless or have trouble sitting still?
 - ▶ Do you feel like you have trouble concentrating, remembering information, or making decisions?
 - ▶ Do you have aches or pains, headaches, cramps, or stomach problems without a clear cause?
 - ▶ Do you ever think about dying or suicide? Have you ever tried to harm yourself?
-

What Should I Do If I am Considering Suicide or Harming Myself?

If you are in crisis and need help, call this toll-free number for the **National Suicide Prevention Lifeline (NSPL)**, available 24 hours a day, every day: 1-800-273-TALK (8255). The service is available to everyone. The deaf and hard of hearing can contact the Lifeline via TTY at 1-800-799-4889. All calls are confidential. You can also visit the Lifeline's website at www.suicidepreventionlifeline.org.

The **Crisis Text Line** is another free, confidential resource available 24 hours a day, seven days a week. Text "HOME" to 741741 and a trained crisis counselor will respond to you with support and information over text message. Visit www.crisistextline.org.

Not everyone with depression experiences every symptom. Some people experience only a few symptoms. Others may have many. The symptoms and how long they last will vary from person to person.

How Do I Get Help?

If you think you might have depression, you are not alone. Depression is common, but it is also treatable. Ask for help! Here are a few steps you can take:

- ▶ **Step 1:** Try talking to a trusted adult, such as your parent or guardian, your teacher, or a school counselor. If you don't feel comfortable speaking to an adult, try talking to a friend. If you are not sure where to turn, you can use TXT 4 HELP Interactive (www.nationalsafeplace.org/txt-4-help), which allows you to text live with a mental health professional.

For more ideas and a list of health hotlines, visit www.nimh.nih.gov (search words: children and adolescents).

- ▶ **Step 2:** If you're under the age of 18, ask your parent or guardian to make an appointment with your doctor for an evaluation. Your doctor can make sure you don't have a physical illness that may be affecting your mental health. Your doctor may also talk to you about the possibility of seeing a mental health professional, such as a psychiatrist, counselor, psychologist, or therapist. These practitioners can diagnose and treat depression and other mental disorders.

How is Depression Treated?

Depression is usually treated with psychotherapy, medication, or a combination of the two.

What is psychotherapy?

Psychotherapy (sometimes called “talk therapy”) is a term for treatment techniques that can help you identify and manage troubling emotions, thoughts, and behavior. Psychotherapy can take place in a one-on-one meeting with you and a licensed mental health professional. Sometimes you might be part of a group guided by a mental health professional.

Read more about psychotherapy at www.nimh.nih.gov/health/topics/psychotherapies.

What medications treat depression?

If your doctor thinks you need medicine to treat your depression, he or she might prescribe an antidepressant.

When you are taking an antidepressant, it is important to carefully follow your doctor's directions for taking your medicine. The medication could take up to six weeks to work and you should not stop taking it without the help of a doctor. You should also avoid using alcohol or drugs that have not been prescribed to you so that your medications can work.

When it is time to stop the medication, the doctor will help you slowly and safely decrease the dose so that your body can adjust. If you stop taking the medication too soon, your depression symptoms may return. Another reason to stop medication gradually is that stopping suddenly can cause withdrawal symptoms like anxiety and irritability.

Antidepressants can have side effects. These side effects are usually mild (possible stomach upsets or headaches) and may go away on their own. But talk to your doctor about any side effects that you experience because your doctor might adjust the dose or change the medicine. For more information about side effects, visit www.fda.gov.

Although antidepressants can be effective, they may present serious risks to some, especially children and teens. Anyone taking antidepressants should be monitored closely, especially when they first start taking them. Severe anxiety or agitation early in treatment can be especially distressing and should be reported to the doctor immediately.

For many people, the risks of untreated depression outweigh the side effects of antidepressant medications when they are used under a doctor's careful supervision. Information about medications changes frequently. Talk to your doctor and visit the U.S. Food and Drug Administration (FDA) website (www.fda.gov) for the latest safety information.

What else can I do to help manage my depression?

Be patient and know that treatment takes time to work. In the meantime, you can:

- ▶ Stay active and exercise, even if it's just going for a walk.
- ▶ Try to keep a regular sleep schedule.
- ▶ Spend time with friends and family.
- ▶ Break down school or work tasks into smaller ones and organize them in order of what needs to get done first. Then, do what you can.

What Can I Do If Someone I Know Might Have Depression?

If you think your friend might have depression, first help him or her talk to a trusted adult who can connect your friend to a health professional. You can also:

- ▶ Be supportive, patient, and encouraging, even if you don't fully understand what's going on.
- ▶ Invite your friend to activities, social events, or just to hang out.

- ▶ Remind your friend that getting help is important and that with time and treatment, he or she will feel better.
- ▶ **Never ignore comments about death and suicide**, even if it seems like a joke or overdramatic. Talking about suicide is not just a bid for attention but should be taken seriously. Talk to a trusted adult such as a parent, teacher or older sibling as soon as you can.

What Should I Do If Someone I Know Is Considering Suicide?

Often, family and friends are the first to recognize the warning signs of suicide and can take the first step toward helping the person find help.

Remember:

- ▶ If someone is telling you that he or she is going to kill himself or herself, do not leave him or her alone.
- ▶ Do not promise anyone that you will keep his or her suicidal thoughts a secret. Make sure to tell a trusted friend or family member, or an adult with whom you feel comfortable.
- ▶ Get help as soon as possible. Call 911 for emergency services and/or take the person to the nearest hospital emergency room.

You can also call 1-800-273-TALK (8255), the toll-free number for the **National Suicide Prevention Lifeline (NSPL)**, which is available 24 hours a day, every day. The service is available to everyone. All calls are free and confidential. You can also chat with the NSPL online (<http://www.suicidepreventionlifeline.org>).

The Crisis Text Line is another free, confidential resource available 24 hours a day, seven days a week. Text “HOME” to 741741 and a trained crisis counselor will respond to you with support and information via text message. Visit <https://www.crisistextline.org>.

What if someone is posting suicidal messages or something disturbing on social media?

If you see messages or live streaming suicidal behavior on social media, call 911 immediately, contact the toll-free National Suicide Prevention Lifeline at 1-800-273-TALK (8255), or text the Crisis Text Line (text HOME to 741741).

Some social media sites also have a process to report suicidal content and get help for the person posting the message. Each offers different options on how to respond if you see concerning posts about suicide. For example:

- ▶ Facebook Suicide Prevention webpage can be found at www.facebook.com/help/ [use the search term “suicide” or “suicide prevention”].
- ▶ Instagram uses automated tools in the app to provide resources, which can also be found online at <https://help.instagram.com> [use the search term, “suicide,” “self-injury,” or “suicide prevention”].
- ▶ Snapchat’s Support provides guidance at <https://support.snapchat.com> [use the search term, “suicide” or “suicide prevention”].

- ▶ Tumblr Counseling and Prevention Resources webpage can be found at <https://tumblr.zendesk.com> [use the search term “counseling” or “prevention,” then click on “Counseling and prevention resources”].
- ▶ Twitter’s Best Practices in Dealing With Self-Harm and Suicide at <https://support.twitter.com> [use the search term “suicide,” “self-harm,” or “suicide prevention”].
- ▶ YouTube’s Safety Center webpage can be found at <https://support.google.com/youtube> [use the search term “suicide and self-injury”].

Because help via these processes may be delayed, it is still important to call 911 if someone is posting suicidal messages or something disturbing on social media. People—even strangers—have saved lives by being vigilant.

For More Information

For more information on depression and suicide prevention, visit the National Institute of Mental Health (NIMH) website (www.nimh.nih.gov).

Related Resources:

- ▶ Medline Plus (National Library of Medicine): <https://medlineplus.gov/teenhealth.html> (En español: <https://medlineplus.gov/spanish/teenhealth.html>)
- ▶ NIDA for Teens, Drugs & Health: <http://teens.drugabuse.gov/blog>
- ▶ National Suicide Prevention Lifeline: <http://www.suicidepreventionlifeline.org>, 1-800-273-TALK (8255), free 24-hour help
- ▶ Anti-Bullying: <https://www.stopbullying.gov>

Reprints

This publication is in the public domain and may be reproduced or copied without permission from NIMH. Citation of NIMH as a source is appreciated. We encourage you to reproduce it and use it in your efforts to improve public health. However, using government materials inappropriately can raise legal or ethical concerns, so we ask you to use these guidelines:

- ▶ NIMH does not endorse or recommend any commercial products, processes, or services, and our publications may not be used for advertising or endorsement purposes.
- ▶ NIMH does not provide specific medical advice or treatment recommendations or referrals; our materials may not be used in a manner that has the appearance of providing such information.
- ▶ NIMH requests that non-Federal organizations not alter our publications in ways that will jeopardize the integrity and “brand” when using the publication.
- ▶ The addition of non-Federal Government logos and website links may not have the appearance of NIMH endorsement of any specific commercial products or services, or medical treatments or services.
- ▶ Images used in publications are of models and are used for illustrative purposes only. Use of some images is restricted.

If you have questions regarding these guidelines and use of NIMH publications, please contact the NIMH Information Resource Center at **1-866-615-6464** or e-mail at nimhinfo@nih.gov.

National Institute of Mental Health

Office of Science Policy, Planning, and Communications

Science Writing, Press, and Dissemination Branch

6001 Executive Boulevard

Room 6200, MSC 9663

Bethesda, MD 20892-9663

Phone: 301-443-4513 or

Toll-free: 1-866-615-NIMH (6464)

TTY Toll-free: 1-866-415-8051

Fax: 301-443-4279

E-mail: nimhinfo@nih.gov

Website: www.nimh.nih.gov



National Institute
of Mental Health

U.S. Department of Health and Human Services

National Institutes of Health

NIH Publication No. 20-MH-8089

Revised 2018





Children and Mental Health

Is This Just a Stage?

Points to Remember

- ▶ Always seek immediate help if a child engages in unsafe behavior or talks about wanting to hurt him or herself or someone else.
- ▶ Seek help when a child's behavior or emotional difficulties last for more than a few weeks and are causing problems at school, at home, or with friends.
- ▶ A thorough evaluation can help determine if treatment is necessary, and which treatments may be most effective.
- ▶ Early treatment can help address a child's current difficulties and can also help prevent more serious problems in the future.

When to Seek Help

Even under the best of circumstances, it can be hard to tell the difference between challenging behaviors and emotions that are consistent with typical child development and those that are cause for concern. It is important to remember that many disorders like anxiety, attention deficit hyperactivity disorder, and depression, do occur during childhood. In fact, many adults who seek treatment reflect back on how these disorders affected their childhood and wish that they had received help

sooner. In general, if a child's behavior persists for a few weeks or longer, causes distress for the child or the child's family, and interferes with functioning at school, at home, or with friends, then consider seeking help. **If a child's behavior is unsafe, or if a child talks about wanting to hurt him or herself or someone else, then seek help immediately.**

Young children may benefit from an evaluation and treatment if they:

- ▶ Have frequent tantrums or are intensely irritable much of the time
- ▶ Often talk about fears or worries
- ▶ Complain about frequent stomachaches or headaches with no known medical cause
- ▶ Are in constant motion and cannot sit quietly (*except* when they are watching videos or playing videogames)
- ▶ Sleep too much or too little, have frequent nightmares, or seem sleepy during the day
- ▶ Are not interested in playing with other children or have difficulty making friends
- ▶ Struggle academically or have experienced a recent decline in grades
- ▶ Repeat actions or check things many times out of fear that something bad may happen.



National Institute
of Mental Health

Older children and adolescents may benefit from an evaluation if they:

- ▶ Have lost interest in things that they used to enjoy
- ▶ Have low energy
- ▶ Sleep too much or too little, or seem sleepy throughout the day
- ▶ Are spending more and more time alone, and avoid social activities with friends or family
- ▶ Fear gaining weight, or diet or exercise excessively
- ▶ Engage in self-harm behaviors (e.g., cutting or burning their skin)
- ▶ Smoke, drink, or use drugs
- ▶ Engage in risky or destructive behavior alone or with friends
- ▶ Have thoughts of suicide
- ▶ Have periods of highly elevated energy and activity, and require much less sleep than usual
- ▶ Say that they think someone is trying to control their mind or that they hear things that other people cannot hear.



First Steps for Parents

If you are concerned about your child, where do you begin?

- ▶ Talk with your child's teacher. What is the child's behavior like in school, daycare, or on the playground?
- ▶ Talk with your child's pediatrician. Describe the behavior, and report what you have observed and learned from talking with others.
- ▶ Ask for a referral to a mental health professional who has experience and expertise dealing with children. (Additional information on identifying a mental health professional is at the end of this brochure.)



Finding Answers

An evaluation by a health professional can help clarify problems that may be underlying a child's behavior and provide reassurance or recommendations for next steps. It provides an opportunity to learn about a child's strengths and weaknesses and determine which interventions might be most helpful.

A comprehensive assessment of a child's mental health includes the following:

- ▶ An interview with parents addressing a child's developmental history, temperament, relationships with friends and family, medical history, interests, abilities, and any prior treatment. It is important to get a picture of the child's current situation, for example: has he or she changed schools recently, has there been an illness in the family, or a change with an impact on the child's daily life.
- ▶ Information gathering from school, such as standardized tests, reports on behavior, capabilities, and difficulties.
- ▶ An interview with the child about his or her experiences, as well as testing and behavioral observations, if needed.

Treatment Options

Assessment results may suggest that a child's behavior is related to changes or stresses at home or school; or is the result of a disorder for which treatment would be recommended. Treatment recommendations may include:

- ▶ **Psychotherapy ("talk therapy").** There are many different approaches to psychotherapy, including structured psychotherapies directed at specific conditions. Information about types of psychotherapies is available on the National

Institute of Mental Health (NIMH)

Psychotherapies page (www.nimh.nih.gov/index.shtml; search term: psychotherapies). Effective psychotherapy for children always includes:

- Parent involvement in the treatment (especially for children and adolescents)
- Teaching skills and practicing skills at home or at school (between session “homework assignments”)
- Measures of progress (e.g., rating scales, improvements on homework assignments) that are tracked over time.



- ▶ **Medications.** Medication may be used along with psychotherapy. As with adults, the type of medications used for children depends on the diagnosis and may include antidepressants, stimulants, mood stabilizers, and others. General information on specific classes of medications is available on NIMH’s **Mental Health Medications page** (www.nimh.nih.gov/index.shtml; search term: medications). Medications are often used in combination with psychotherapy. If different specialists are involved, treatment should be coordinated.
- ▶ **Family counseling.** Including parents and other members of the family in treatment can help families understand how a child’s individual challenges may affect relationships with parents and siblings and vice versa.
- ▶ **Support for parents.** Individual or group sessions that include training and the opportunity to talk with other parents can provide new strategies for supporting a child and managing difficult behavior in a positive way. The therapist can also coach parents on how to deal with schools.

To find information about treatment options for specific disorders, visit www.nimh.nih.gov/health/.



Choosing a Mental Health Professional

It’s especially important to look for a child mental health professional who has training and experience treating the specific problems that your child is experiencing. Ask the following questions when meeting with prospective treatment providers:

- ▶ Do you use treatment approaches that are supported by research?
- ▶ Do you involve parents in the treatment? If so, how are parents involved?
- ▶ Will there be homework between sessions?
- ▶ How will progress from treatment be evaluated?
- ▶ How soon can we expect to see progress?
- ▶ How long should treatment last?

Additional information related to identifying a qualified mental health professional and effective treatment options is available on the NIMH website at www.nimh.nih.gov/findhelp as well as through other organizations listed in the Resources section of this brochure.



Working with the School

If your child has behavioral or emotional challenges that interfere with his or her success in school, he or she may be able to benefit from plans or accommodations that are provided under laws originally enacted to prevent discrimination against

children with disabilities. The health professionals who are caring for your child can help you communicate with the school. A first step may be to ask the school whether an individualized education program or a 504 plan is appropriate for your child. Accommodations might include simple measures such as providing a child with a tape recorder for taking notes, permitting flexibility with the amount of time allowed for tests, or adjusting seating in the classroom to reduce distraction. There are many sources of information on what schools can and, in some cases, must provide for children who would benefit from accommodations and how parents can request evaluation and services for their child:

- ▶ There are Parent Training and Information Centers and Community Parent Resource Centers throughout the United States. The **Center for Parent Information and Resources** website lists centers in each state (www.parentcenterhub.org/find-your-center/).
- ▶ The **U.S. Department of Education (ED)** (www.ed.gov/) has detailed information on laws that establish mechanisms for providing children with accommodations tailored to their individual needs and aimed at helping them succeed in school. The ED also has a website on the **Individuals with Disabilities Education Act** (<https://sites.ed.gov/idea/>), and the ED's **Office of Civil Rights** (www2.ed.gov/about/offices/list/ocr/frontpage/pro-students/disability-pr.html) has information on other federal laws that prohibit discrimination based on disability in public programs, such as schools.
- ▶ Many of the organizations listed in this brochure as additional resources also offer information on working with schools as well as other more general information on disorders affecting children.

Learn More

Information on specific disorders is available on the **NIMH website** (www.nimh.nih.gov/index.shtml) and in our **publications** (www.nimh.nih.gov/health/publications/index.shtml) and **health information pages** (www.nimh.nih.gov/health/topics/index.shtml). The organizations below also have information on symptoms, treatments, and support for childhood mental disorders. Participating in voluntary groups can provide an avenue for connecting with other parents dealing with similar issues.

Researchers continue to explore new means of treatment for childhood mental disorders; the “Join

a Study” section listed in the Resources provides information on participating in clinical research.

Resources

Please Note: This resource list is provided for informational purposes only. It not comprehensive and does not constitute an endorsement by NIMH.

The following organizations and agencies have information on mental health issues in children. Some offer guidance for working with schools and finding health professionals:

- ▶ **American Academy of Child and Adolescent Psychiatry** (www.aacap.org/). See **Facts for Families** ([/www.aacap.org/AACAP/Families_and_Youth/Facts_for_Families/FFF-Guide/FFF-Guide-Table-of-Contents.aspx](http://www.aacap.org/AACAP/Families_and_Youth/Facts_for_Families/FFF-Guide/FFF-Guide-Table-of-Contents.aspx)) on many topics.
- ▶ **Association for Behavioral and Cognitive Therapies** (www.abct.org/Home/)
- ▶ **Society for Clinical Child and Adolescent Psychology** (<https://sccap53.org/>)
- ▶ **EffectiveChildTherapy.org** (<http://effectivechildtherapy.org/>)
- ▶ **Centers for Disease Control and Prevention** (www.cdc.gov/). See the **Children’s Mental Health page** (www.cdc.gov/childrensmentalhealth/symptoms.html)
- ▶ **Children and Adults with Attention Deficit/Hyperactivity Disorder** (www.chadd.org/)
- ▶ **Depression and Bipolar Support Alliance** (www.dbsalliance.org)
- ▶ **Interagency Autism Coordinating Committee** (<https://iacc.hhs.gov/>). See these webpages on Autism: **Federal Agencies** (<https://iacc.hhs.gov/resources/federal-agencies/>); **Private and Non-Profit Organizations** (<https://iacc.hhs.gov/resources/private-organizations/>); and **State Resources** (<https://iacc.hhs.gov/resources/state-resources/>)
- ▶ **International OCD Foundation** (<https://iocdf.org/>)
- ▶ **Mental Health America** (www.mentalhealthamerica.net/)
- ▶ **National Alliance on Mental Illness** (www.nami.org/)
- ▶ **National Association of School Psychologists** (www.nasponline.org/resources-and-publications/families-and-educators)

- ▶ **National Federation of Families for Children’s Mental Health** (www.ffcmh.org/)
- ▶ **Stopbullying.gov** (www.stopbullying.gov/)
- ▶ Substance Abuse and Mental Health Services Administration **Behavioral Health Treatment Services Locator** (<https://findtreatment.samhsa.gov/>)
- ▶ **Tourette Association of America** (www.tourette.org/)

Addressing Disorders Affecting Children

The NIMH is conducting and supporting research that could help find new and improved ways to diagnose and treat mental disorders that occur in childhood. This research includes studies of risk factors, including those related to genetics and to experience and the environment, which may provide clues to how these disorders develop and how to identify them early. NIMH also supports efforts to develop and test new interventions, including behavioral, psychotherapeutic, and medication treatments. In addition to providing ways to diagnose and treat disorders in childhood, research can help determine whether beneficial effects of treatment in childhood continue into adolescence and adulthood.



Participating in a Research Study for Children

Children are not little adults, yet they are often given medicines and treatments that were only tested in adults. There is a lot of evidence that children’s developing brains and bodies can respond to medicines and treatments differently than how adults’ brains and bodies respond.

The way to get the best treatments for children is through research designed specifically for them.

NIMH supports a wide range of research, including clinical trials that look at new ways to prevent, detect, or treat diseases and conditions. During clinical trials on conditions affecting mental health, treatments being tested might be new behavioral treatments, new drugs or new combinations of drugs, or new approaches to enhance existing treatments. The goal of clinical trials is to determine if a new test or treatment works and is safe. Although individual participants may benefit from being part of a clinical trial, participants should be aware that the primary purpose of a clinical trial is to gain new scientific knowledge so that others may be better helped in the future.

Please Note: Decisions about whether to apply for a clinical trial and which ones are suited for your child are best made in collaboration with his or her licensed mental health professional. For more information on clinical research, visit **NIH Clinical Research Trials and You: For Parents and Children** (www.nih.gov/health-information/nih-clinical-research-trials-you/parents-children).

FINDING A CLINICAL STUDY

Researchers at the NIMH conduct research on numerous areas of study, including cognition, genetics, epidemiology, and psychiatry. These NIMH studies take place at the National Institutes of Health’s Clinical Center in Bethesda, Maryland, and require regular visits. To find studies for children and teens being conducted at NIMH, visit **Join a Study: Children** (www.nimh.nih.gov/labs-at-nimh/join-a-study/children/index.shtml). You can find out whether a study would be appropriate for your child by talking with the contacts listed for each study.

In addition to trials underway at NIMH, there are clinical trials testing mental health treatments that are being conducted across the United States and around the world. To find a clinical trial near you, you can visit **ClinicalTrials.gov** (<https://clinicaltrials.gov/>). This is a searchable registry and results database of federally and privately supported clinical trials. ClinicalTrials.gov gives you information about a trial’s purpose, who funds it, who may participate, locations, and phone numbers for more details. This information should be used in conjunction with advice from mental health professionals.

Reprints

This publication is in the public domain and may be reproduced or copied without permission from NIMH. Citation of NIMH as a source is appreciated. We encourage you to reproduce it and use it in your efforts to improve public health. However, using government materials inappropriately can raise legal or ethical concerns, so we ask you to use these guidelines:

- ▶ NIMH does not endorse or recommend any commercial products, processes, or services, and our publications may not be used for advertising or endorsement purposes.
- ▶ NIMH does not provide specific medical advice or treatment recommendations or referrals; our materials may not be used in a manner that has the appearance of providing such information.
- ▶ NIMH requests that non-Federal organizations not alter our publications in ways that will jeopardize the integrity and “brand” when using the publication.
- ▶ The addition of non-Federal Government logos and website links may not have the appearance of NIMH endorsement of any specific commercial products or services, or medical treatments or services.
- ▶ Images used in publications are of models and are used for illustrative purposes only. Use of some images is restricted.

If you have questions regarding these guidelines and use of NIMH publications, please contact the NIMH Information Resource Center at 1-866-615-6464 or e-mail nimhinfo@nih.gov.

For More Information

MENTAL HEALTH TREATMENT LOCATOR

The Substance Abuse and Mental Health Services Administration (SAMHSA) provides this online resource for locating mental health treatment facilities and programs. The Mental Health Treatment Locator section of the Behavioral Health Treatment Services Locator lists facilities providing mental health services to persons with mental illness. Find a facility in your state at <https://findtreatment.samhsa.gov/>. For additional resources, visit www.nimh.nih.gov/findhelp.

QUESTIONS TO ASK YOUR DOCTOR

Asking questions and providing information to your doctor or health care provider can improve your care. Talking with your doctor builds trust and leads to better results, quality, safety, and satisfaction. Visit the Agency for Healthcare Research and Quality website for tips at www.ahrq.gov/patients-consumers.

For more information on conditions that affect mental health, resources, and research, go to **MentalHealth.gov** at www.mentalhealth.gov, or the **NIMH website** at www.nimh.nih.gov. In addition, the **National Library of Medicine’s MedlinePlus** service (<https://medlineplus.gov/>) (En español: <http://medlineplus.gov/spanish>) has information on a wide variety of health topics, including conditions that affect mental health.

For information on clinical trials, visit: ClinicalTrials.gov: www.clinicaltrials.gov (En español: <http://salud.nih.gov/investigacion-clinica/>)

National Institute of Mental Health

Office of Science Policy, Planning, and Communications
Science Writing, Press, and Dissemination Branch
6001 Executive Boulevard
Room 6200, MSC 9663
Bethesda, MD 20892-9663
Phone: 301-443-4513 or
Toll-free: 1-866-615-NIMH (6464)
TTY Toll-free: 1-866-415-8051
Fax: 301-443-4279
E-mail: nimhinfo@nih.gov
Website: www.nimh.nih.gov



National Institute
of Mental Health

U.S. DEPARTMENT OF HEALTH
AND HUMAN SERVICES
National Institutes of Health
NIH Publication No. 20-MH-8085
Revised 2018

