

Adolescents Who Felt Sad or Hopeless

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In 2013, nearly one third (30 percent) of students in grades nine through 12 reported feeling sad or hopeless almost every day for an extended period (two or more weeks in a row) in the last year.

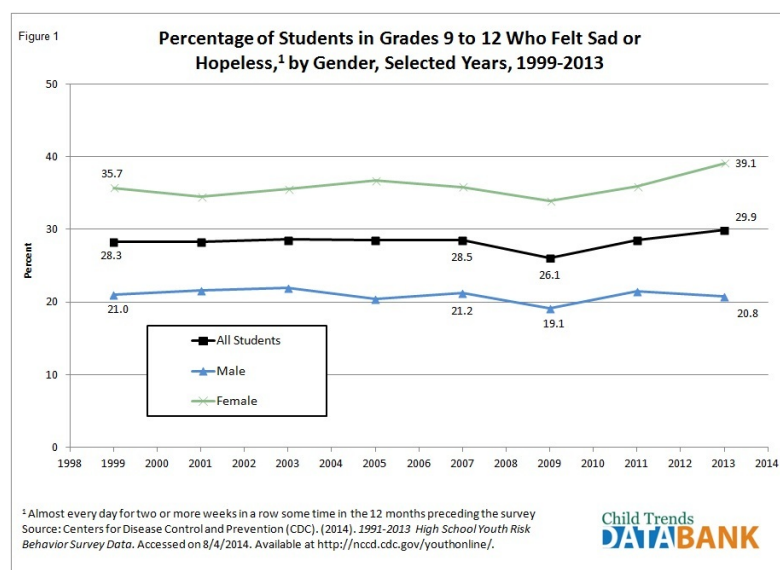
Importance

Persistent sadness and hopelessness are criteria for and predictors of clinical depression, though by themselves they are insufficient for a diagnosis of depression.^{[1],[2]} Youth who are depressed are at a higher risk for poor health outcomes as adults.^[3]

In addition, depression in early adolescence is linked with increased risks for negative effects on growth and development, school performance, and peer/family relationships in later adolescence. Depressed youth are also much more likely to use drugs or alcohol, drop out of school, or engage in promiscuous sex than a young person who is not depressed.^[4] Feelings of sadness or loneliness not only affect teens but those around them, often causing problems in relationships with peers and family members.^[5]

Although they likely underestimate the actual prevalence of depression, the available data indicate that about nine percent of youth ages 12-17 in 2012 had a major depressive episode during the past year. Only a minority (37 percent) of these youth received treatment.^[6]

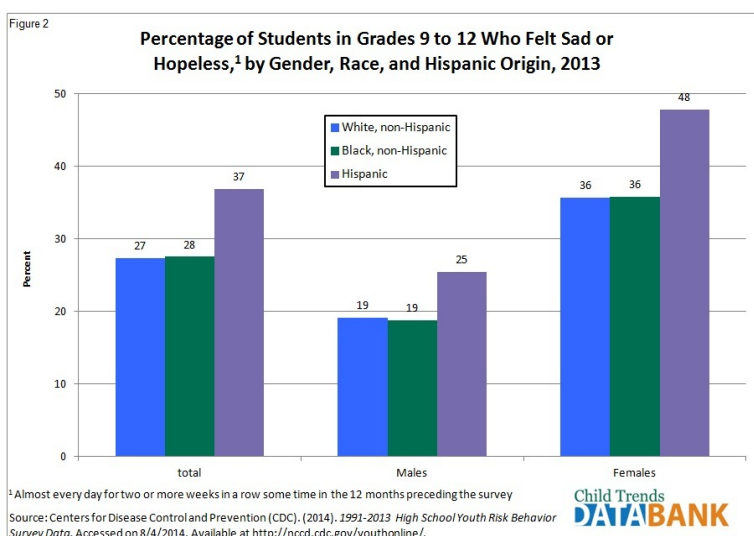
Trends



The prevalence of feeling sad

or hopelessâ€ feelings as defined here remained steady between 1999 and 2007, staying between 28 and 29 percent. However, between 2007 and 2009, the proportion decreased, from 29 to 26 percent. Most of this decrease reflected a decrease in â€œsad or hopelessâ€ feelings among males. Then, between 2009 and 2013, the incidence of these feelings increased, from 26 to 30 percent. This rise was driven mainly by an increase among female teens. ([Figure 1](#))

Differences by Gender



Girls are more likely than boys to report feeling sad or hopeless. In 2013, nearly two-fifths of girls reported having been sad or hopeless (39 percent), while closer to one-fifth of boys reported having felt the same way (21 percent).¹ ([Figure 1](#)) Rates were highest among Hispanic female students (48 percent). ([Figure 2](#))

Differences by Race and Hispanic Origin^[7]

Hispanic youth are more likely than white or black Hispanic youth are more likely than white or black youth to report feeling sad or hopeless for extended periods of time (37, versus 27 and 28 percent, respectively, in 2013. ([Figure 2](#))

Differences by Grade

In 2013, Twelfth-grade boys were significantly more likely to report having felt sad or hopeless than ninth-grade boys (18 versus 22 percent), while ninth-grade girls were more likely to report having felt sad or hopeless than twelfth-grade girls (41 versus 36 percent). There were no significant difference by grade level overall. ([Appendix 1](#))

State and Local Estimates

2013 estimates of feeling sad or hopeless among high school students (Grades 9-12) are available for select states and cities from the [Youth Risk Behavior Survey \(YRBS\)](#): see Table 24.

2011-2012 state-level data on major depressive episodes are available from the [National Survey on Drug Use and Health](#): see Table 26.

International Estimates

International estimates (1997-1998) are available from the [World Health Organization](#). (See Figure 3.1)

National Goals

Through its *Healthy People 2020* initiative, the Federal government has set a goal to reduce the proportion of adolescents who experience a major depressive episode from 8.3 percent in 2008 to 7.4 percent in 2020. They have also set a goal to increase depression screening by primary care providers for adolescents from 2.1 percent of office visits in 2005-07 to 2.3 percent in 2020.

More information is available [here](#). (MHMD 4.1 and 11.2)

Additionally, *Report of the Surgeon General's Conference on Children's Mental Health: A National Action Agenda* lays out a number of national goals related to improving children's mental health. One goal, for example, is to improve the assessment and recognition of mental health needs in children.

Additional information is available [here](#).

What Works to Make Progress on This Indicator

See Child Trends's™ LINKS database (LifeCourse Interventions to Nurture Kids Successfully), for reviews of many rigorously evaluated programs, including the following which have been shown to be effective:

- [Adolescent Coping With Stress](#)

- [Cognitive Behavior Therapy](#)
- [Cognitive-Behavioral Intervention for Trauma in Schools](#)
- [Cognitive Relaxation Coping Skills \(CRCS\)](#)
- [Coping With Depression \(CWD-A\)](#)
- [Coping and Support Training \(CAST\)](#)
- [Eye Movement Desensitization and Processing \(EMDR\)](#)
- [Problem Solving for Life](#)

Also, see Child Trends' review, [What Works to Prevent or Reduce Internalizing Problems or Social-Emotional Difficulties in Adolescents: Lessons From Experimental Evaluations of Social Interventions](#).

And, Zaff, JF, Calkins J, Bridges, LJ, and Margie, NG (2002). [Promoting positive mental and emotional health in teens: Some lessons from research](#). Child Trends Research Brief.

Related Indicators

- [Young Adult Depression](#)
- [Suicidal Teens](#)
- [Disordered Eating: Symptoms of Bulimia](#)
- [Parental Depression](#)
- [Teen Homicide, Suicide, and Firearm Deaths](#)
- [Adverse Experiences](#)

Definition

Survey participants were asked to respond to the following question:

“During the past 12 months, did you ever feel so sad or hopeless almost every day for two weeks or more in a row that you stopped doing some usual activities?”

Students from California, Oregon, Washington, and Minnesota were not included in the survey in any year. Additionally, students from Colorado, Iowa, Indiana, and Pennsylvania were not included in the 2013 survey.

Data Source

Centers for Disease Control and Prevention (CDC). (2014). *1991-2013 High School Youth Risk Behavior Survey Data*. Accessed on 8/4/2014. Available at <http://nccd.cdc.gov/youthonline/>.

Raw Data Source

Appendix 1A - Percentage of High School Students^{1A} Who Report They Have Felt Sad or Hopeless²: Selected Years, 1999-2013

	1999	2001	2003	2005	2007	2009	2011	2013
All Students	28.3	28.3	28.6	28.5	28.5	26.1	28.5	29.9
Race/Hispanic Origin								
Non-Hispanic White	24.9	26.5	26.2	25.8	26.2	23.7	27.2	27.3
Non-Hispanic Black	28.9	28.8	26.3	28.4	29.2	27.7	24.7	27.5
Hispanic	37.0	34.0	35.4	36.2	36.3	31.6	32.6	36.8
Grade								
9	27.4	29.4	28.0	29.0	28.2	26.6	27.6	29.4
10	29.3	27.2	29.7	28.9	28.9	26.1	28.7	29.4
11	27.1	28.7	28.9	28.8	27.1	27.3	28.8	31.7
12	29.4	27.0	27.4	26.4	29.4	24.3	28.9	29.1
Male	21.0	21.6	21.9	20.4	21.2	19.1	21.5	20.8
Race/Hispanic Origin								
Non-Hispanic White	19.0	20.5	19.6	18.4	17.8	17.2	20.7	19.1
Non-Hispanic Black	19.6	20.9	21.7	19.5	24.0	17.9	18.0	18.8
Hispanic	27.7	25.4	25.9	26.0	30.4	23.6	24.4	25.4
Grade								
9	20.6	22.4	21.0	19.9	22.1	18.6	18.2	18.2
10	20.1	19.7	22.7	21.3	20.3	18.2	21.1	20.3
11	19.3	23.4	22.1	19.4	19.5	19.6	23.6	23.1
12	24.6	20.5	22.0	20.2	22.6	19.8	23.6	21.8
	1999	2001	2003	2005	2007	2009	2011	2013
Female	35.7	34.5	35.5	36.7	35.8	33.9	35.9	39.1
Race/Hispanic Origin								
Non-Hispanic White	31.3	32.3	33.3	33.4	34.6	31.1	34.3	35.7
Non-Hispanic Black	37.7	36.3	30.8	36.9	34.5	37.5	31.4	35.8
Hispanic	46.1	42.3	44.9	46.7	42.3	39.7	41.4	47.8
Grade								

9	34.3	35.7	35.7	38.5	34.8	35.8	37.4	40.8
10	38.4	34.6	36.9	37.0	37.7	34.7	37.2	38.8
11	35.3	33.9	35.9	38.0	34.5	35.5	34.3	39.9
12	34.3	33.2	32.6	32.6	35.9	28.9	34.4	36.2

¹ Estimates do not include youth who dropped out of school and therefore may not reflect total national values. Students from California, Oregon, Washington, and Minnesota were not included in the survey in any year. Additionally, students from Colorado, Iowa, Indiana, and Pennsylvania were not included in the 2013 survey.²Felt so sad almost every day for two or more weeks in a row that they stopped doing some usual activities, in the past year. Source: Centers for Disease Control and Prevention (CDC). (2014). 1991-2013 High School Youth Risk Behavior Survey Data. Accessed on 8/4/2014. Available at <http://nccd.cdc.gov/youthonline/>.

Endnotes

[1] pathways to self-reported depression and psychological adjustment among adolescents. *Development and Psychopathology*, 8 : 761-777;

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[2] Surgeon General. (1999). Children and mental health. Chapter 3 in *Mental Health: A Report of the Surgeon General*. Washington, D.C.: U.S.GPO. Available at: <http://www.surgeongeneral.gov/library/mentalhealth/chapter3/sec1.html>

[3] Keenan-Miller, D., Hammen, C. L., and Brennan, P. A. (2007). Health outcomes related to early adolescent depression. *Journal of Adolescent Health*, 41 , 256-262.

[4] National Mental Health Association. (2006). *NMHA MHIC factsheet: Adolescent depression- helping depressed teens*. Available at: <http://archive.is/burz1>

[5] Brent, D.A., Birmaher, B. (2002). Adolescent depression. *The New England Journal of Medicine*, 347(9): 667-671.

[6] Substance Abuse and Mental Health Services Administration. (2013). *Results from the 2012 National Survey on Drug Use and Health: Mental Health Findings*. Center for Behavioral Health Statistics and Quality: Rockville, MD. Chapter 4. Available at:

http://www.samhsa.gov/data/NSDUH/2k12MH_FindingsandDetTables/2K12MHF/NSDUHmhfr2012.htm

[7]Hispanics may be any race. Estimates for whites and blacks in this report do not include Hispanics.

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