



Feeling BLUE?

HEALTH

Health & You

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RESOURCES

National Institute of Mental Health (NIMH), Public Information and Communications Branch, 6001 Executive Blvd, Rm 8184, MSC 9663, Bethesda, MD 20892-9663; 866-615-6464; www.nimh.nih.gov

INTERNET RESOURCES

Depression and Bipolar Support Alliance, www.dbsalliance.org

National Mental Health Association, www.depression-screening.org and www.nmha.org



Occasionally feeling sad or down in the dumps is a normal part of day-to-day life. But feeling depressed for extended periods of time can indicate something more serious. Depression has become such a common complaint that the Journal of the American Medical Association estimates it costs employers upwards of \$44 billion per year in lost productivity.

Many workers miss work because of depression-related illnesses that do not respond to traditional treatment, such as headaches, fatigue, and general malaise. Depression affects a person's health both physically and emotionally. It leaves individuals more vulnerable to the effects of stress, which is linked to diseases such as heart disease and cancer.

It also has a direct effect on emotional well-being, including effectiveness at work, satisfaction levels, and dedication to the tasks at hand. When you are plagued by depression, not only do you not feel like doing much, you are often unable to complete your normal duties. Depression can diminish your quality of life; some people describe it as a "dark curtain" or "cloud" over their life.

WARNING SIGNS

Because depression is so common, it is important to be aware of the warning signs. Depression can take many forms, but the National Institute of Mental Health identifies the following symptoms as the most common indicators of depression.

- ▲ Persistent sad, anxious, or "empty" mood.
- ▲ Difficulty concentrating, remembering, or making decisions.
- ▲ Restlessness and irritability.

- ▲ Feelings of hopelessness and pessimism.
- ▲ Loss of interest or pleasure in hobbies and activities that were once enjoyed.

Simply experiencing one or two of these symptoms does not mean you are depressed. The key to diagnosing depression is the time involved. If symptoms last for more than two weeks at a time, then it is likely that depression is the cause.

Talk to your doctor or another health professional if you are feeling depressed. This is particularly important when life events make you more likely to suffer from depression—for instance a death in the family, the loss of a job, or the birth of a baby (which can trigger a type of depression in late pregnancy or after the baby's birth.)

Often your blues may be temporary, or dysthymia, which is a mild form of depression. Although mild, dysthymia still affects people in significant ways, particularly where work is concerned.

MANAGING MILD DEPRESSION IN CHILDCARE

Of all the nasty effects depression can have on an individual, perhaps the worst for a childcare provider is the sense of lethargy. Lack of motivation or interest in events around you can affect the quality of care you provide to children. This is a particular challenge for individual family childcare providers who may not have additional staff to rely on. The following suggestions for handling depression in childcare can be implemented regardless of the type of facility you work in.

TAKE A BREAK

Whenever possible, allow yourself 5–10 minutes of solitude to relax, meditate, or gather your thoughts. Although

and do not last long. So how is a caregiver supposed to know whether a child has growing pains or some other problem that may need medical attention? While caregivers should never attempt to diagnose growing pains or any other condition, it is important to recognize signs that could indicate a need for medical attention.

Growing pains appear in the muscles, not the joints. Children may report pains behind the knees, in the front of their thighs, or in the calves.

Examine the painful area. Growing pains will show no redness or swelling. Childhood arthritis, joint injuries, and other significant medical problems will usually have some visible clue present.

The limb or joint of a child with growing pains will look and feel normal, and the child will be able to move it normally. There rarely is a limp involved.

Another sign is pain. The child with a serious bone, joint, or muscle problem generally will not want you to touch the area because it is painful; however, children with growing pains like to have the area massaged to help relieve the pain.

The child should be seen by a health care provider if any of the following develop as these symptoms are not due to growing pains.

- ▲ Fever, redness, and swelling in one or more joints
- ▲ Persistent pain or pain in the morning
- ▲ Pain associated with a particular injury
- ▲ Limping
- ▲ Weakness
- ▲ Tiredness
- ▲ Unusual rashes
- ▲ Loss of appetite
- ▲ Development of any unusual behavior

Caregivers and parents need to be aware that the ache from growing pains may mimic Grandma's arthritis, but the pain a child is experiencing may have a totally different cause. As with any unusual or recurring pain or symptom, if there is any suspicion that the pain may not be a result of growing pains, or if there is something about the condition that makes the caregiver or parent feel uncomfortable, the child should be seen and treated by a health care provider.

DEALING WITH GROWING PAINS

With growing pains, encourage the



child to continue with normal physical activities. Do not tell the child that pain is due to growing or physical activity because this information may make the child afraid of both.

An ice pack wrapped in a towel and applied for 10 minutes can help with the pain. Doing gentle flexibility movements and leg stretches, and limiting physical activity for an hour or more prior to bed can minimize symptoms.

The child's doctor may suggest that parents manage the child's pain with an over-the-counter medication such as ibuprofen or acetaminophen. (Aspirin is not recommended for children under age 19 because of the risk of Reye's syndrome.) If medication is to be given while the child is in your care, you must adhere to your program's policies and procedures.

Leg pain is a potential concern for anyone who cares for children. When the signs point to growing pains, with no symptoms that suggest it might be from another cause, everyone can breathe a sigh of relief knowing that it will pass with time. But, just as with any other issue involving children's health, if a caregiver has any suspicion that another cause may be involved, be mindful of the old adage that "it is better to be safe than sorry." ▲

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*In Sickness
& Health*

INTERNET RESOURCES

About-Pediatrics,
pediatrics.about.com/od/weeklyquestion/a/04_leg_pains.htm

Kids Health,
www.kidshealth.org/kid/ill_injure/aches/growing_pains.html

Penn State,
westmoreland.extension.psu.edu/Family/Toddler/tt2001_Issue3.htm

University of Toronto,
www.utoronto.ca/kids/growpain.html

this might not seem useful at first, the long-term effects can be substantial. Simply taking several deep breaths throughout the day also can be effective, especially if you do not have other staff to help you out. If possible, step outside and breathe fresh air. Like deep breathing, fresh air helps to restore oxygen levels in your body, giving you more energy and promoting mental alertness. And try to get plenty of sleep each night.

GET ACTIVE

Physical movement releases adrenaline into your bloodstream and promotes the production of serotonin in the brain (a chemical which many suspect plays a role in mood stabilization). Go outside as the children in your care also will benefit from outdoor exposure and might be more cooperative after releasing some energy of their own, something that will serve you well when nap time rolls around!

DIET

Certain foods and caffeinated drinks are known to affect mood levels and may cause irritability. Consider avoiding these items for a few weeks to see if doing so help stabilize your mood. A well-balanced diet is essential in combating stress or depression.

BE REALISTIC

Give yourself time to feel better. To



prevent yourself from being overwhelmed, the National Institute of Mental Health recommends breaking large tasks into small ones, setting some initial priorities, and doing what you can as you are able.

If exercise, meditation, a strong support system, and dietary changes do not alleviate your depressive symptoms, professional help may be in order. In some cases, medications may be recommended. Be sure to tell your doctor that you are a child caregiver and your profession requires you to be fully alert, energetic, and interactive. Some antidepressants may make you drowsy or irritable. Your doctor should be able to help you find a medication or dosage that meets your needs without affecting your work. ▲

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Depression may be the result of a situation-based stress you face or it may be a long-term health concern. Regardless, do not give up on your treatment. You can feel better.

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