



TOOL KIT

FOR THE MANAGEMENT OF

CHILDHOOD

&

ADOLESCENT DEPRESSION

TOOL KIT FOR THE MANAGEMENT OF CHILDHOOD & ADOLESCENT DEPRESSION

The clinical tool kit is intended to assist the PCP in assessing the needs of the child/adolescent, ranging in age from **8 through 17**, regarding depression and decisions regarding health care services provided by the PCP or subsequent referral to the Regional Behavioral Health Authority (RBHA) if clinically indicated. Tools include:

- The decision making algorithm (used when score is a minimum of 15 on the “Center for Epidemiological Studies Depression Scale for Children” [CES-DC])
- The “Center for Epidemiological Studies Depression Scale for Children” (CES-DC), instructions for use.
- The “Center for Epidemiological Studies Depression Scale for Children” (CES-DC_ Tool)
- The list of medications universally available through AHCCCS Health Plans and the RBHA.

Clinical resources and adaptations of clinical sources are referenced within the individual documents.

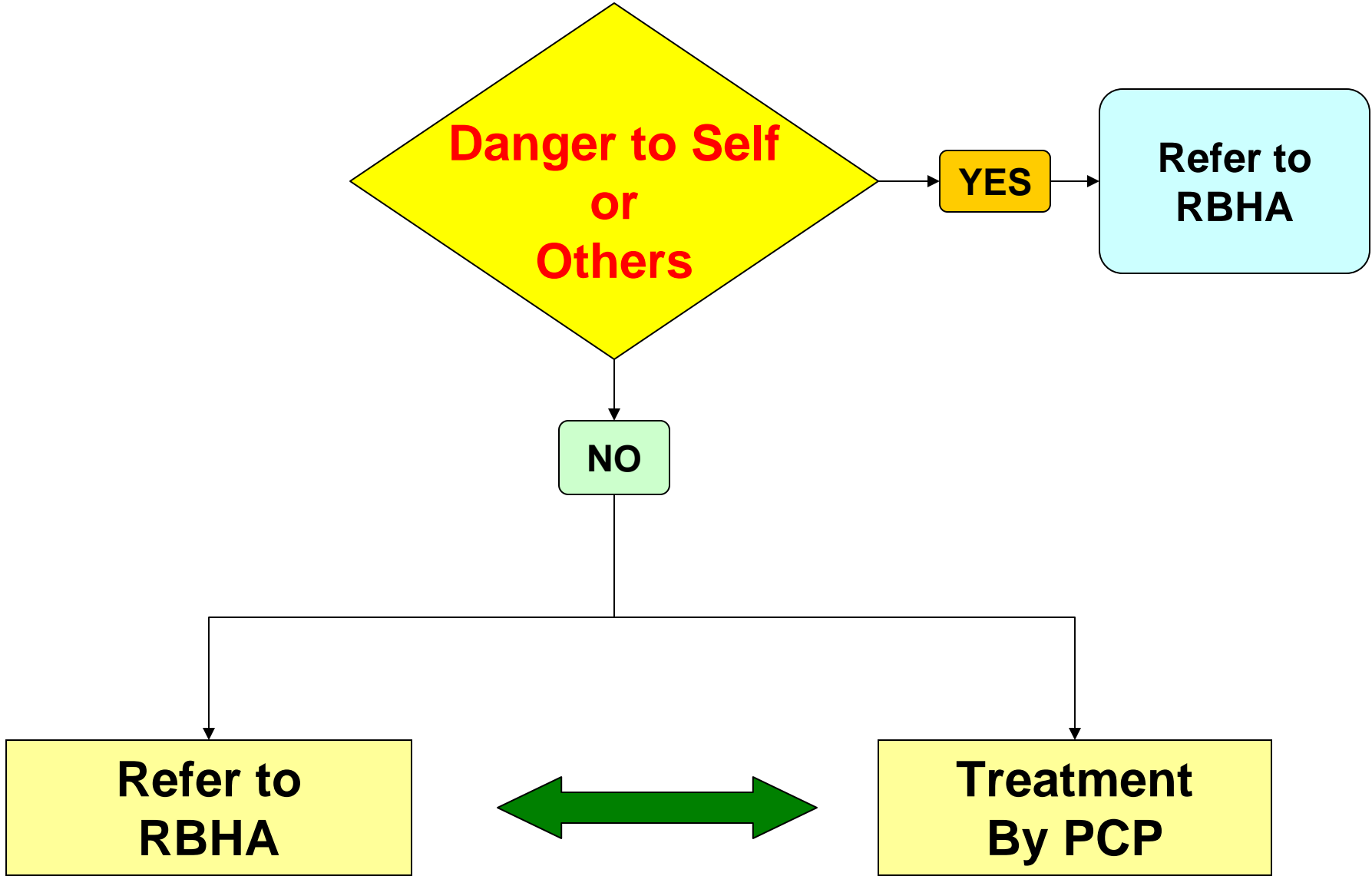
NOTE:

- Strongly consider referring children **under 8 years old** to the RBHA for treatment.
- A RBHA consultation is available at any time.

The tool kit was developed by the AHCCCS Tool Kit Workgroup in collaboration with Acute Health Plans and ADHS/DBHS (January, 2008 through January 2009). The tool kit is a resource and may not apply to all patients and all clinical situations. It is not intended to replace clinical judgment.

Initial Effective Date: 5/1/2009 Revision Date: 5/01/2011

Depression



**Sole usage of Algorithms is not a substitute for a comprehensive clinical assessment*

Center for Epidemiological Studies Depression Scale for Children (CES-DC)

(FOR USE IN CHILDREN 8 - 17 YEARS OLD)

The Center for Epidemiological Studies Depression Scale for Children (CES-DC) is a 20-item self-report depression inventory with possible scores ranging from 0 to 60. Each response to an item is scored as follows:

- 0 = "Not At All"
- 1 = "A Little"
- 2 = "Some"
- 3 = "A Lot"

However, items 4, 8, 12, and 16 are phrased positively, and thus are scored in the opposite order:

- 3 = "Not At All"
- 2 = "A Little"
- 1 = "Some"
- 0 = "A Lot"

Higher CES-DC scores indicate increasing levels of depression. Weissman et al. (1980), the developers of the CES-DC, have used the cutoff score of 15 as being suggestive of depressive symptoms in children and adolescents. That is, scores over 15 can be indicative of significant levels of depressive symptoms.

Remember that screening for depression can be complex and is only an initial step. Further evaluation is required for children and adolescents identified through a screening process. Further evaluation is also warranted for children or adolescents who exhibit depressive symptoms but who do not screen positive.

See also

Tool for Families: Symptoms of Depression in Adolescents, p. 126.

Tool for Families: Common Signs of Depression in Children and Adolescents, p. 147.

REFERENCES

Weissman MM, Orvaschel H, Padian N. 1980.

Children's symptom and social functioning self-report scales: Comparison of mothers' and children's reports. *Journal of Nervous Mental Disorders* 168(12):736-740.

Faulstich ME, Carey MP, Ruggiero L, et al. 1986.

Assessment of depression in childhood and adolescence: An evaluation of the Center for Epidemiological Studies Depression Scale for Children (CES-DC). *American Journal of Psychiatry* 143(8):1024-1027.

Center for Epidemiological Studies Depression Scale for Children (CES-DC)

Number _____

Score _____

INSTRUCTIONS

Below is a list of the ways you might have felt or acted. Please check how *much* you have felt this way during the *past week*.

DURING THE PAST WEEK	Not At All	A Little	Some	A Lot
1. I was bothered by things that usually don't bother me.	_____	_____	_____	_____
2. I did not feel like eating, I wasn't very hungry.	_____	_____	_____	_____
3. I wasn't able to feel happy, even when my family or friends tried to help me feel better.	_____	_____	_____	_____
4. I felt like I was just as good as other kids.	_____	_____	_____	_____
5. I felt like I couldn't pay attention to what I was doing.	_____	_____	_____	_____

DURING THE PAST WEEK	Not At All	A Little	Some	A Lot
6. I felt down and unhappy.	_____	_____	_____	_____
7. I felt like I was too tired to do things.	_____	_____	_____	_____
8. I felt like something good was going to happen.	_____	_____	_____	_____
9. I felt like things I did before didn't work out right.	_____	_____	_____	_____
10. I felt scared.	_____	_____	_____	_____

DURING THE PAST WEEK	Not At All	A Little	Some	A Lot
11. I didn't sleep as well as I usually sleep.	_____	_____	_____	_____
12. I was happy.	_____	_____	_____	_____
13. I was more quiet than usual.	_____	_____	_____	_____
14. I felt lonely, like I didn't have any friends.	_____	_____	_____	_____
15. I felt like kids I know were not friendly or that they didn't want to be with me.	_____	_____	_____	_____

DURING THE PAST WEEK	Not At All	A Little	Some	A Lot
16. I had a good time.	_____	_____	_____	_____
17. I felt like crying.	_____	_____	_____	_____
18. I felt sad.	_____	_____	_____	_____
19. I felt people didn't like me.	_____	_____	_____	_____
20. It was hard to get started doing things.	_____	_____	_____	_____

DEPRESSION

UNIVERSALLY AVAILABLE MEDICATIONS THROUGH
AHCCCS HEALTH PLANS AND RBHA PROVIDERS*

SELECTIVE SEROTONIN REUPTAKE INHIBITOR

Fluoxetine (Prozac)

Citalopram (Celexa)

Paroxetine (Paxil)

Sertraline (Zoloft)

SEROTONIN NOREPINEPHRINE REUPTAKE INHIBITOR

Venlafaxine (Effexor)

NOREPINEPHRINE DOPAMINE REUPTAKE INHIBITOR

Bupropion (Wellbutrin)

* Refer to health plan for prior authorization requirement and medication availability.