Depression

Is it Depression? What does depression look like? How is depression showing up in your life? The doctor says im depressed. How did I get there? Road to recovery Supporting someone with depression If you suspect your child has depression The role of a sensory approach in managing depression

Have you ever felt like your enjoyment of life, or that of someone you love, is being hijacked or perhaps minimized by mental health issues like depression, anxiety, or possibly post-traumatic stress disorder? Maybe you face difficulties in regulating or controlling your emotions. This may show up as feelings of overwhelm. You may feel that you are not enough or that you are not equipped to cope with and manage these feelings of overwhelm. These may tip over from the home and family life into the work environment, distracting you and limiting your ability to focus and produce quality work. Or maybe troubles and worries from work are impacting upon your care and attention in your family life, upsetting and unsettling your relationships. Life is not what you are used to experiencing. You are keen to restore balance, peace, and joy to your day but don't know where to begin.

As adults, we have all had our lives touched by depression, whether suffering it personally or through the experience of someone we know. The more we are exposed to depression, the more we become aware that it is a unique experience for each of us.

There may be symptoms more commonly felt by the larger population of depression sufferers, yet there are also more rarely experienced symptoms and depressive behaviours, and certainly these arise in various combinations. If we were to believe there was a set criterion of symptoms that excludes all others from a diagnosis of depression, many of us would continue to suffer through life poorly diagnosed and treated.

Our individuality creates our susceptibility for depression to show up in a unique fashion in our lives, as much as it determines our need for a customised selection of treatments. Whilst medication and talk therapy are the most prescribed modes of treatment, there is no single model of management issued with depression for this very reason.

Is it depression?

We all have had days that have lasted in a continuous manner where we have felt sad, listless, disinterested in life. Our motivation for work may have waned, we may have sat at home with our tub of peanut butter, and we may have lost our energy to engage in exercise, personal interests, or our sporting activities.

How do we know when our dip in confidence, our desire to isolate and disengage from family and friends has become more than just a few low days and is creating a problem in our lives?

Depression is a serious illness that impacts the quality of life and as we are all aware, can indeed be life-threatening in its most severe form. It is a mental health disorder affecting the way we feel and act, which impacts upon our overall ability to function over a prolonged period. The degree of influence of depression on one's life lies on a continuum, ranging from mild signs, symptoms, and behaviours through to moderate and severe impairment.

Even at its most debilitating, it is important to remember that **depression is treatable.** According to the DSM-5ⁱ, support from a **doctor should be sought if feelings of sadness**, low mood, disinterest in usual hobbies, together with at least <u>five</u> of the following symptoms including possible social isolation and changes in habits such as sleep, appetite and weight, food and alcohol consumption, social connectivity, ability to experience joy and pleasure, showering and personal grooming, emotionality, work focus, physical activity, sex, relationships, decreased confidence or feelings of worthlessness, guilt, helplessness and hopelessness, continue unabated for unexplained reasons over a <u>two-week period</u>.

Doctors use scientifically researched guidelines and screening tools to diagnose mental health conditions such as depression. Known as the DSM-5 and DSM, the Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition, is written, reviewed and published by the American Psychiatric Association. The DSM-5 is the professional reference guide in the USA for mental health and brain-related conditions. It is the main guide for identifying mental health conditions in Australia.

If you find yourself stuck in low feelings and depressive behaviours, not knowing where to start to move forward to improve how you feel and to relieve your symptoms, seek help from a qualified health provider. Don't wait to tick off possible symptoms from a mental health checklist to determine that you could be a contender for depression and are justified in seeking help.

We can feel ourselves unworthy of medical attention and fail to seek early professional health advice. Give yourself the gift of recognising that you are feeling and acting out of the norm for yourself and seek the professional support you may need. At best, you will be screened, examined, and reassured by a health professional that you are medically sound. At worst, you will start your journey of recovery. Know, you are not alone.

I strongly encourage you, whether you are just wondering if what you are experiencing is undiagnosed depression or if you have mild, moderate or severe depression symptoms, to immediately seek the services of a health provider.

Whilst on the diagnosis and recovery journey, there are natural strategies that you can use to support you in feeling better in yourself and which are complementary in nature to standard medical treatments such as medication and talk therapy. Sensory regulation is one such approach which aids in emotion regulation whether you are depressed, anxious, a survivor of trauma, or just a seeker of emotional wellbeing.

Sensory regulation uses sensory experiences to shift your level of arousal to the demands of the environment whether the need be for a higher level of alertness when you are feeling low and lacking in energy and motivation, or for a lowering and calming of your nervous system when you are feeling stressed, anxious, and hyper-aroused. The processing of the sensory stimulus creates emotion regulation. The sensory regulation can occur through unconscious sensory experiences such

as stretching when tired, or it can be done consciously with the aim to shift your level of alertness to the appropriate level for the demands of the environment and the situation. We will explore this further as we proceed.

What does depression look like?

As expressed earlier, depression shows up differently for each of us. We typically recognise the stereotypical portrait of a depressed person as listless, low energy, slouching, head hanging, sad, possibly crying. But what of the individual who defies this depressed image by continuing to be the life of the party, laughing, socially active yet feeling increasingly lost, hopeless, unworthy, detached from the important relationships in their life, devoid of feeling and connection? Their masked behaviour is at odds with their feelings. They do not align with a description of depression signs and symptoms, and yet, this does not preclude them from potentially suffering major depression.

Yes, there are key markers of depression that a health provider will look for, but these are not exclusive to the domain of depression nor limiting in the range of possible symptoms, signs and behaviours demonstrated.

The three primary factors that a health provider will look for as a possible symptom of depression are:

- 1. feelings of sadness,
- 2. low mood,
- 3. disinterest in hobbies and interests that are usually enjoyable.

There is quite an extensive list of other possible signs, symptoms, and behaviours that you may feel or demonstrate that may signify depression. This list is not exhaustive, and it is possible that depression is manifesting in other ways in you.

Some possible signs and symptoms include:

- social isolation due to loss of interest in hobbies, motivation for physical activity, and social withdrawal caused by: a felt raw aversion to conversation, touch, noise, high levels of energy, and social engagement due to the depressive feelings; loss or grieving; moving; new job. Social connection is an important factor in maintaining general wellbeing and is vital in the recovery from depression.
- tiredness and lack of energy this feeling of fatigue may extend beyond the usual tiredness you feel on a typical day without an evident reason.
- changes in sleep patterns you may be waking up repeatedly throughout the night or waking up in the early hours and staying awake for an extended period. You may find yourself sleeping late or sleeping for long hours during the day. In contrast you may be having difficulty sleeping and may be suffering with insomnia.
- changes in appetite perhaps resulting in lack of interest in food and decreased food intake. Or you may have an increased appetite accompanied by increased food consumption and comfort eating.
- changes in weight, be it either weight gain or weight loss.
- disinterest and lack of motivation to exercise, resulting in reduced participation in physical activity. In addition to the physical benefits of exercise for the body in building and maintaining strength, health and vitality, exercise is important for its role in increasing the levels of the feel-

good hormones serotonin and dopamine in the brain naturally which aid emotional wellbeing, and the release of norepinephrine, also known as adrenaline, which is important to the Fight, Flight or freeze response, which we will discuss later.

- experiencing anhedonia, the inability to experience joy and pleasure in usually pleasurable activities. This can create avoidance of our usual hobbies and interests which often has the knock-on effect of further isolating us from our social connections.
- changes in self-care and personal habits this may show up as failure to give attention to
 personal grooming such as brushing hair, infrequent showering, regularly dirty hair, not wearing
 make-up or nail polish for situations where you may normally choose to apply it, not shaving and
 unkempt facial hair.
- changes in homecare resulting in piles of washing, stacks of dirty dishes, unvacuumed floors, overflowing letterbox, unattended lawns or gardens.
- lack of interest in intimacy.
- periods of physical and emotional withdrawal from family and friends, prolonged periods of silence and solitude, and emotional detachment from a significant other impacting the quality and durability of the relationship.
- higher levels than usual of emotions, such as anger, irritability, sadness, weepiness.
- frequent crying or alternatively, an inability to cry.
- numb feelings, observed particularly in relation to experiences and events that may typically arouse feelings of anger, annoyance, sadness, frustration, humour.
- feeling flat, listless, empty, at a loss, with little variation in emotion responses.
- difficulty smiling and perhaps laughing. You may get to the end of the day and reflecting on the day, discover you haven't laughed or smiled once. It is not so much a loss of humour as the experience of humour is felt more on an intellectual level rather than as a feeling of joy, happiness and amusement in the body that causes you to smile or laugh.
- difficulty concentrating, focusing attention on detail, and staying on task. This can result in decreased work performance and missed deadlines.
- difficulty not only in starting tasks but also in completing tasks.
- physical pain is experienced, often as headaches, stomach pain, back pain, muscular and joint pain.
- increased sensitivity to pain.
- bouts of gastroenteritis and other physical maladies.
- heightened use and reliance on substances such as alcohol, prescribed and recreational drugs to numb or dull feelings of guilt, shame, lack of confidence, heightened anxiety, lowered capacity to cope, and possibly an impaired ability to function at the usual level of performance.
- decreased confidence.
- feelings of incompetence and inability to cope.
- increased indecision and self-doubt.
- catastrophising life and situations in relation to daily occurrences that would normally be dealt with as a minor inconvenience or annoyance when feeling emotionally stronger.
- heightened anxiety. In contrast, the response may be one of apathy.
- feelings of worthlessness; possibly excessive and unexplained guilt, shame, vulnerability; helplessness and hopelessness.
- thoughts and incidents of self-harm and suicide ideation.
- slumping on furniture, slouching, frequent sighing, melancholic facial expressions.
- talking to oneself.

- slowness in speech and thoughts.
- avoidance of conversation.

A person suffering with depression may feel and demonstrate a few or many of these symptoms and behaviours in any combination.

How is depression showing up in your life?

As indicated by the extensive list of possible signs and symptoms, the impact of depression has a wide-ranging influence with the potential to reach into all areas of our lives. Impairment may be observed in work performance, social connections, family life, relationships, homecare, self-care, participation in personal interests, parenting, finances, travel and mobility, effective emotion regulation, physical health, fitness, and overall wellbeing.

Motivation and interest may be weakened and the ability to get things done can suffer, resulting in a lowered work performance. The facility to concentrate and maintain focus may be lost. Confidence in your competency may decrease and the capacity to lead, initiate, innovate, create and follow-through decline. Workplace accidents may increase.

Productivity may drop off. Collaborative efforts can wane if you withdraw from social interaction and perhaps suffer with doubts regarding your competency and the value of your contributions. You may even appear angry and aggressive due to self-doubt, feelings of inadequacy or unresolved trauma. Your depressed state may be misinterpreted as apathy by the management team and you may be disciplined rather than given the support you need. Perhaps you do not recognize you are experiencing depression or are embarrassed to ask for help.

Family relationships may be susceptible to dysfunction due to depression. Open communication and support with both personal issues and homecare responsibilities may decline resulting in reduced contributions to family life. You may withdraw from family interactions and become more socially isolated. Lapses in household cleaning and maintenance may become apparent to the observer yet go unnoticed or without concern by you in your depressed state.

The capacity to manage finances may be impaired. The interest and incentive to check, read and answer emails and messages may be lost. Mail may go unopened, bills left ignored as a part of the "too hard basket" and left unpaid, messages unreturned. Excessive expenditure on irresponsible shopping sprees may occur if comfort is sought in retail therapy.

Changes in shopping habits may occur. Quick, easy meals or comfort foods high in sugar and fat may be bought for convenience and soothing, replacing the healthier fresh food options usually selected which require meal preparation which may feel too overwhelming. You may overeat or forget to eat meals. You may lose weight due to loss of appetite or you may put on weight due to changes in your diet.

Sleep may become interrupted and decrease significantly. Alternatively, you may oversleep, find it difficult to get out of bed in the morning and may nap extensively throughout the day. Family may observe you to be lazy rather than experiencing depression and this misunderstanding may result in failure to provide the much-needed support.

Exercise may begin to be overlooked due to disorganization, lack of interest, avoidance of social settings, or a drop in motivation. Personal hygiene may slip such as daily showering and a lack of personal grooming may appear. The same clothing may be worn repeatedly and without washing, a

lower dress standard may creep in, and a decline occur in attention to detail in personal appearance such as scruffy clothing, missing buttons not repaired, and an overall dishevelled appearance evident.

The freedom to move about confidently may diminish as self-imposed social isolation emerges and people and crowds start to be avoided. Restrictions in lifestyle occur as a reduced behaviour in one lifestyle area has a roll-on effect on other behaviours. For example, an emerging dislike and avoidance of crowds might lead to reduced confidence in navigating and responding effectively to unexpected situations whilst using public transport, resulting in absenteeism from work caused by the reluctance to commute by the usual means.

Changes in demeanour may be observed with changes in posture to slouching when standing and slumping when sitting. Shoulders may by hunched forward and the head may be hanging down. Eyes may be downcast, and an avoidance of eye contact may express self-doubt, low self-esteem or simply represent an avoidance from connecting personally and socially with people. Your eyes may lack their usual smile and spark during conversation and may appear blank. Your face may lack expressiveness and smiling may be difficult as a depressed person. Your face could appear angry in expression, worried, blank or may sag. The voice may crack and lack its usual lilt, vivacity, quality, or confidence and may sound softer or muffled. Family may comment that you have begun talking to yourself.

Thinking processes may be noticeably slowed and your conversation may be stilted and have many ums and thought fillers in it. Your thoughts may wander during the conversation, interrupting the flow of conversation. Unusual responses to sad or tragic news may occur due to numbness of feeling and a lack of ability to connect to their feelings of empathy. Alternatively, extreme responses of sadness may be elicited or catastrophizing. Exacerbated worrying may be exhibited in relation to your own or loved ones' well-being.

Depression can influence an individual's perception of the world. Einstein stated that the most important question a person can ask themselves is whether the world is a friendly place. The answer determines how they approach life. If they perceive the world as friendly, they build bridges, and if they perceive it as unfriendly, they build walls. The depressed individual, however, may be unable to perceive the world as friendly as their views and attitudes may be focused on the negative and their interest and motivation is minimal. Consequently, they build walls.

The Doctor Says I'm Depressed. How did I get here?

For some of us with depression, we have an obvious path that we were traveling along that brought us to our depressed state. We have suffered ongoing stress, a life-threatening experience, perhaps loss. It is easily identifiable for people in our lives to recognise these life events as catalysts for our depression. For others, the pathway is not as clear which brings the diagnosis of depression as a surprise and one they do not readily accept.

There is a myriad of factors that contribute to depression developing, some of which include:

- a trauma survivor from first-hand experience of emotional or physical abuse, domestic violence, an accident, neglect, loss, natural disaster or witnessing a traumatic event
- work-related stress such as loss of a job, unemployment, high job stress, job dissatisfaction, non-cohesive workplace dynamics



- financial stress
- relationship dysfunction and stress including a break-up, separation and divorce
- grief-related stress from the loss of a person, a pet, a home, a job, a relationship, or a changed self-identity
- moving house and the stressors involved with relocation
- health-related stress associated with some medical conditions, chronic illness, terminal illness, debilitating symptoms, pain
- living with a personal disability or caring for a person with a disability
- homelessness or potential homelessness
- empty nester
- retirement
- aging
- becoming a new parent
- miscarriage, stillbirth, sudden infant death syndrome (SIDS)
- social isolation
- loneliness
- parenting children with challenging behaviours, dramatic sibling rivalry or illness
- aging parents
- sick family member or pet
- living with atypical milestone markers or parenting a child with atypical milestone markers
- being a carer
- juggling too many roles and responsibilities
- home-related stress balancing work, homecare, and family life
- substance abuse such as prescription or recreational drugs, alcohol, chemical inhalation
- genetic predisposition
- experiencing stressful life events
- identifying as atypical from social norms, such as a member of the LGBTQIA+ (Lesbian, Gay, Bisexual, Transgender, Queer, Intersex, and Asexual) community
- being a member of a minority group such as racial identity, religious beliefs, or refugee
- being neurodiverse such as being on the autism spectrum or living with attention deficit/hyperactivity disorder (ADHD) or sensory processing disorder (SPD)
- anxiety disorder such as social anxiety, generalized anxiety, phobia, post-traumatic stress disorder (PTSD), panic disorder, and obsessive-compulsive disorder
- personality factors such as a worrier, self-critical, a negative thinker, or a catastrophiser

There may not be a clear reason for the onset of depression. There are often multiple factors combining to develop depression. Awareness of these potential factors may prompt personal action to minimise the risk of depression, which is a valuable tool in maintaining good mental health.

Road to Recovery

After a period of feeling down or sad, perhaps listless and experiencing a lack of interest in usual activities, the first step to recovery can be acknowledging to yourself that you may be suffering a problem with depression. Or perhaps you have been experiencing recurring bouts of stress and anxiety that you have been unable to resolve. You may find yourself feeling dysregulated with the inability to manage emotional and physical responses to sensory stimulation. In such circumstances,

acknowledgement of an existing problem is key to seeking management strategies to help restore the body and emotions to a state of balanced functioning.

After acknowledging that you may have a mental health disorder or sensory processing issue, take comfort that it is okay to feel down, listless, unexplained anger, teary, tired, unable to cope, sad, that your thoughts are perhaps slower than usual if you are experiencing depression. Or that your emotions are heightened, your breathing and heart rate feels like it is racing, and you feel the urge to react aggressively to the situation (fight) or perhaps run away from what feels threatening and uncomfortable (flight). This is the fight or flight response and is your body's way of protecting you from a perceived threat or danger.

It is common to yearn to be like your old, familiar self or to be free of these debilitating emotions and behaviours. Open yourself to a different way of seeing yourself. One who has or is experiencing physical or emotional hardship or turmoil or ill health and is on the journey of recovery. Accept yourself as worthy and worthwhile. You are not your symptoms or your illness. Practice self-belief.

There are several simple strategies proven to support recovery:

- Journaling as a therapeutic tool has been shown to improve mood and is useful for creating positive self-talk. Journal on all the ways that you are worthy and deserving of good things. Ask someone who knows you well and cares about you to sit down with you and brainstorm a list of your positive qualities, your successes, your blessings, and the ways in which you are deserving of a joyful life. Look at this list when you wake up and before you sleep or anytime you need reminding. Pin key messages of hope and positivity on your wall to read regularly.
- 2. Practice self-nurture. This includes emotional and physical nurturing. Be gentle with yourself in accepting all your emotions. You are not your emotions or your thoughts. Emotions are immediate physical responses that occur within your body through the sensory system of interoception. Feelings are the longer-term experience of how emotions are continued to be experienced. Set small goals that are achievable during the tougher days you are experiencing. This may be as small as getting out of bed by 9am or brushing your teeth. Celebrate the win if you achieve the goal and be gentle with yourself if you don't quite manage the goal on that day. Tomorrow is a fresh day to set a new goal to aim towards.
- 3. Manage your physical health as best you can. Try to stock healthy food options in your kitchen. Aim to get outdoors for some fresh air and sunshine each day. A walk outdoors gives you exercise that releases endorphins and provides sensory input to help you self-regulate your nervous system. Set a regular time for going to bed and getting up. Maintain your social connections or aim to increase these. Social connections are vital to healthy functioning, strengthening our resilience and management of our stress response. Among the many positives of social connections, they can lower anxiety and depression.
- 4. Seek both personal and professional support. Your general practitioner is a good place to start for help in diagnosing the problem and identifying additional sources of support and treatment. This support may be in the form of:
 - a psychologist or counsellor providing talk therapy,
 - a psychiatrist overseeing your medication treatment,

- an occupational therapist for guiding management of your sensory processing for enhanced emotion regulation,
- electro convulsive therapy (ECT),
- transcranial magnetic stimulation (TMS), and
- cannabis treatment.

Treatment options should be discussed thoroughly with your doctor and an informed decision made.

Medication and various types of talk therapy are the two most common forms of treatment and are regularly used in combination with each other.

Other activities and therapies which support recovery from depression include:

- yoga and tai chi programs for calm and relaxation
- meditation
- massage therapy
- somatic therapy
- art therapy
- music therapy
- mindful living
- breath work
- EFT tapping (Emotional Freedom Techniques)
- journaling
- regular exercise
- sensory processing therapy.

Sensory processing is often used in conjunction with talk therapy and medication treatment as a complementary therapy in the management of depression, anxiety, and trauma. It is used immediately before and during talk therapy to create feelings of increased comfort, personal safety, social engagement, open communication & overall robustness, to enhance the effectiveness of the talk therapy. Used after the talk therapy, sensory regulation returns you to a balanced state of calm ready emotionally for the next activity.

On a personal level, support is made available when people are aware you may be struggling. They may have noticed something has shifted in your behaviour and demeanour, or maybe you raised your mental health issues with them. Help may come in the form of company, suggestions for housework or garden maintenance, transport, babysitting, cooking, booking appointments, shopping, regular check-ins, time management tips and planning your schedule. The variety of help available is endless. Be open to accepting help. People offer support from a desire to nurture and care for you.

Learn and explore treatment options for the management of your emotional and physical needs. Be an informed and active participant in deciding the best course of treatment for your body and emotions. You know your body and may have experienced similar circumstances previously. Talk to friends, family, colleagues, and acquaintances about their experiences. They may have new information that you can follow up on. Decide on a trial period to observe how you respond to the treatment before perhaps trialing a new option if this initial treatment has been less than satisfactory. Keep a record of your physical, mental

and emotional responses including changes in behaviours, sleep patterns, dietary intake, cravings, mood stability, alertness, socialisation patterns, to name a few. Journal daily on how you are feeling following a treatment. If you feel your needs are not being adequately met by one health professional, be prepared to seek out other qualified opinions. No single approach fits all people.

Identify strategies to regulate your emotions. Books, articles, websites and forums often provide helpful suggestions, in addition to those offered by health professionals and knowledge you gain through personal interactions of what works for other people. Be open to trying different strategies if there is no potential risk to yourself or others in the use of them.

5. Can you identify triggers for your uncomfortable emotions? It may be a noisy shopping centre causing you anxiety, making you dread the weekly grocery shopping. Perhaps it is busy train stations and crowded train trips on your daily commute to work causing you to feel irritable and overthink negatively leading to a feeling of disappointment in yourself. If you can identify the type of environments that cause you distress, you are able to either avoid that environment or manage it a different way through either accommodations in your behaviour, such as frequenting the store at less busy times or using different forms of transport; or by accommodations in the environment itself, such as using soft furnishings to absorb sound in your living room or riding a bike to work to get heavy work from your proprioceptive sensory system to prepare your nervous system for the fast-paced activity of your work environment. Create a home and work environment that are attuned to your sensory needs.

Reflect on the types of sensory experiences you have successfully used in the past to regulate your nervous system. A sensory diet is a collection of sensory activities we use each day to keep our nervous systems operating at the just right level for the environment and situation we are in. These sensory experiences help to regulate our emotions. From your experience of sensory diet options, are there other activities using those sensory systems that you haven't used that interest you and may self-regulate you. For example, if you find scented candles calming, would a scented warm bath offer similar comfort? Or if lifting weights alerts you, would dancing to music give you the same effect?

Consulting an Occupational Therapist experienced in sensory processing disorders may help you frame a sensory diet, however if you consider what makes you feel bright and alive when you are feeling unenergized or what soothes you when you are feeling anxious or revved up, you may be able to identify other similar activities to try when you are next feeling dysregulated or when you are about to enter an environment or situation that typically dysregulates you. This helps with prevention of sensory and emotion dysregulation, in addition to management of it once it has occurred.

6. Lastly, have hope. Leave yourself open to accepting it when others suggest or offer hope. Hope is self-empowering. Believe in yourself to get better, to find solutions to emotions and behaviours that may be overwhelming or not empowering. There are good and not so good days for everyone. Tomorrow has hope for a better day, and you can try anew. **If you are a support person in the life of a person suffering with depression**, it is important to offer and remind them of hope for a better day tomorrow and a brighter future, whilst validating their feelings and how they are experiencing the world. There are numerous strategies available to assist the individual to wellness, including sensory processing therapy. This therapy helps self-regulation to the right arousal level, by alerting their body when they feel low and calming themselves when they are over-responding to sensory stimuli or to heightened emotions. Together with a sensory diet and accommodations made to the environment to improve how they experience it, they can maintain emotional regulation effectively and live more comfortably in the world to enjoy and achieve their potential.

If you suspect your child may be depressed they may be showing signs such as loss of appetite, lack of interest in their favourite hobbies, loss of enthusiasm in hanging out with friends, forgetfulness, failure to complete homework, increased arguing with their siblings, talking back to you or ignoring instructions, excessive tiredness or disturbances to their sleep routine, sadness, fluctuating moods, unexplained fear, irritability, anger, self-harm, changes in their behaviour whether that be misbehaviour or differences in their compliance with rules at home or at school, physically or verbally aggressive to self, unusual pains such as belly-aches or headaches and illness, changes in their habits such as the frequency of withdrawing to their room, unusual reluctance to get out of bed in the morning, absenteeism from school or their interests such as basketball training or music lessons, to name a few examples. Consult with other family members, teachers, coaches, friends or friends' parents to gather additional information about any changes in behaviour they may have observed recently in your child or if there has been any changes that may potentially have impacted your child. To build your child's trust and confidence in your mutual respect, discuss with your child your concerns for them and seek their approval to ask specific people for this feedback. Plan a nice activity with your child which you both typically enjoy sharing or your child has expressed interest in and engage in a private conversation about how they're feeling, if there have any changes that they're not comfortable with or changes in behaviours, rules or lifestyle arrangements that they would like to occur. Sometimes even just riding in the car together just the 2 of you whilst you drive without being able to hold eye contact can open the pathway to good communication as the child feels more relaxed and less scrutinised, and willing to open to you. Washing and drying the dishes is similarly effective in encouraging open, safe communication if privacy and lack of interruption is ensured.

If a successful resolution isn't achieved, demonstrated by mutual satisfaction and a return to your child's typical state of joyful living, seek help with a health professional such as your GP who is familiar with your child and you, or a psychologist, school counsellor, early childhood nurse or Lifeline, for advice on how to manage the situation in terms of treatment pathways or guidelines on behaviour management and communication strategies. Meanwhile, try encouraging and implementing emotional regulation for your child regularly throughout their day and teach them the skills necessary to self-regulate through sensory experiences. Incorporate sensory regulation into your family's routine to normalise discussion of emotional regulation and the physical performance of it to keep the child and family grounded. By taking the steps to ensure the family is functioning as a robust, interactive, loving, supportive unit that accepts responsibility for each family member's role to connect to their body, identify what their physical sensations are telling them about the emotions they are feeling and then releasing unwanted emotions and sensations through sensory experiences that return their body to the just right level of alertness, you are providing the opportunity for your family to learn lifelong skills in the ability to decide and act upon how

they want to feel in that moment to resolve the issue causing them distress and discomfort, to reach their potential and live their best life possible. Always seek medical advice if signs of depression last more than 2 weeks or increase in severity.

The Role of a Sensory Approach in Managing Depression

By mastering the ability to self-regulate your nervous system, you will bring emotion regulation into your life. You will learn to tune into your body to identify what it needs in the moment and will have the know-how to provide appropriate sensory input that moves your energy and motivation to the level required to participate in your self-care and perform your homecare to the degree that you desire. You will find that spark for your hobbies and interests, your work performance will be rejuvenated and your capacity to socialize will be re-ignited. It all starts with tuning into your body. You can build this into your day to complement your existing treatments for depression, without any negative side-effects. Self-regulation of the nervous system is a completely natural, vital aspect of your body's functions.

Key Takeaway: Look for opportunities to use sensory experiences throughout the day to regulate your emotions naturally to help restore peace, enjoyment, and confidence in your world.

ⁱ Doctors use scientifically researched guidelines and screening tools to diagnose mental health conditions such as depression. Known as the DSM-5 and DSM, the Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition, is written, reviewed and published by the American Psychiatric Association. The DSM-5 is the professional reference guide in the USA for mental health and brain-related conditions. It is the main guide for identifying mental health conditions in Australia.