



Teen's Depression Needs Global Attention

Santosh Shindhe^{1*}, Dr. Devraj Singh Chouhan²

¹PhD Scholar, Parul University Gujrat, Department of Faculty of Nursing,

Email ID: shindhesantosh196@gmail.com, Orcid ID:0009000574227544

²Professor, Parul University Gujrat, Department of Faculty of Nursing,

Email ID: devraj.chouhan19338@paruluniversity.ac.in, Orcid ID:0000-0002-0720-7587

Abstract

Depression is a common and serious medical illness that negatively affects how you feel, the way you think and how you act. Depression can occur in any age group which can change anyone's life but fortunately it can be treated. Depression in teens (ages 13-17) is a serious medical illness. Teen depression is a serious mental health problem that causes a persistent feeling of sadness and loss of interest in activities. It affects how your teenager thinks, feels and behaves, and it can cause emotional, functional and physical problems. Although depression can occur at any time in life, symptoms may be different between teens and adults.

- Globally, one in seven 10-19-year-olds experiences a mental disorder, accounting for 15% of the global burden of disease in this age group.
 - Depression, anxiety and behavioural disorders are among the leading causes of illness and disability among adolescents.
 - Suicide is the third leading cause of death among those aged 15–29 years old.
 - The consequences of failing to address adolescent mental health conditions extend to adulthood, impairing both physical and mental health and limiting opportunities to lead
- Keywords:** Teen, Depression, Students, Social Media, Adolescents

Introduction

Teen depression is a serious mental health problem that causes a persistent feeling of sadness and loss of interest in activities. It affects how your teenager thinks, feels and behaves, and it can cause emotional, functional and physical problems. Although depression can occur at any time in life, symptoms may be different between teens and adults.

Issues such as peer pressure, academic expectations and changing bodies can bring a lot of ups and downs for teens. But for some teens, the lows are more than just temporary feelings — they're a symptom of depression.

Teen depression isn't a weakness or something that can be overcome with willpower — it can have serious consequences and requires long-term treatment. For most teens, depression symptoms ease with treatment such as medication and psychological counselling.

One in six people are aged 10–19 years. Adolescence is a unique and formative time. Physical, emotional and social changes, including exposure to poverty, abuse, or violence, can make adolescents vulnerable to mental health problems. Protecting adolescents from adversity, promoting socio-emotional learning and psychological well-being, and ensuring access to mental health care are critical for their health and well-being during adolescence and adulthood.

Globally, it is estimated that one in seven (14.3%) of 10–19-year-olds experience mental health conditions (1), yet these remain largely unrecognized and untreated. Adolescents with mental health conditions are particularly vulnerable to social exclusion, discrimination, stigma (affecting readiness to seek help), educational difficulties, risk-taking behaviours, physical ill-health and human rights violations.

Research shows teen depression is a common mental health issue that can lead to long-term consequences, with risk factors including genetics, stress, and other mental health conditions. Studies indicate a rise in depression rates among adolescents, particularly girls, and the COVID-19 pandemic worsened symptoms for many. Treatment typically involves psychotherapy and/or medication, and seeking help is critical to manage symptoms and prevent more serious outcomes like suicide, which is a leading cause of death for older adolescents.

The purpose of this systematic review is to critically examine and synthesize existing literature on the Teen's Depression needs global attention and healthcare outcomes. Specifically, this review aims to identify the causes of depression worldwide, evaluate its impact on teens quality of life.

Methodology

To ensure a rigorous and comprehensive review, a systematic approach was employed to identify, select, and analyze relevant literature pertaining to Teen's Depression and its impact Teen's quality of life.

Mental Health Determinants

Adolescence is a crucial period for developing social and emotional habits important for mental well-being. These include adopting healthy sleep patterns; exercising regularly; developing coping, problem-solving, and interpersonal skills; and learning to manage emotions. Protective and supportive environments in the family, at school and in the wider community are important.

Multiple factors affect mental health. The more risk factors adolescents are exposed to, the greater the potential impact on their mental health. Factors that can contribute to stress during adolescence include exposure to adversity, pressure to conform with peers and exploration of identity. Media influence and gender norms can exacerbate the disparity between an adolescent's lived reality and their perceptions or aspirations for the future. Other important determinants include the quality of their home life and relationships with peers. Violence (especially sexual violence and bullying), harsh parenting and severe and socioeconomic problems are recognized risks to mental health.

Some adolescents are at greater risk of mental health conditions due to their living conditions, stigma, discrimination or exclusion, or lack of access to quality support and services. These include adolescents living in humanitarian and fragile settings; adolescents with chronic illness, autism spectrum disorder, an intellectual disability or other neurological condition; pregnant adolescents, adolescent parents, or those in early or forced marriages; orphans; and adolescents from minority ethnic or sexual backgrounds or other discriminated groups.

Emotional disorders

Emotional disorders are common among adolescents. Anxiety disorders (which may involve panic or excessive worry) are the most prevalent in this age group and are more common among older than among younger adolescents. It is estimated that 4.1% of 10–14-year-olds and 5.3% of 15–19-year-olds experience an anxiety disorder (1). Depression is estimated to occur among 1.3% of adolescents aged 10–14 years, and 3.4% of 15–19-year-olds (1). Depression and anxiety share some of the same symptoms, including rapid and unexpected changes in mood. Anxiety and depressive disorders can profoundly affect school attendance and schoolwork. Social withdrawal can exacerbate isolation and loneliness. Depression can lead to suicide.

Behavioural disorders

Behavioural disorders are more common among younger adolescents than older adolescents. Attention deficit hyperactivity disorder (ADHD), characterized by difficulty paying attention and/or excessive activity and acting without regard to consequences, occurs among 2.7% of 10–14-year-olds and 2.2% of 15–19-year-olds (1). Conduct disorder (involving symptoms of destructive or challenging behaviour) occurs among 3.3% of 10–14-year-olds and 1.8% of 15–19-year-olds (1). Behavioural disorders can affect adolescents' education and increases the risk of criminal behaviour.

Eating disorders

Eating disorders, such as anorexia nervosa and bulimia nervosa, commonly emerge during adolescence and young adulthood. Eating disorders involve abnormal eating behaviour and preoccupation with food, accompanied in most instances by concerns about body weight and shape. Girls are more commonly affected than boys. Eating disorders can affect physical health and often co-exist with depression, anxiety and substance use disorders. They occur in an estimated 0.1% of 10–14-year-olds and 0.4% of 15–19-year-olds (1). They are associated with suicide. Anorexia nervosa can lead to premature death, often due to medical complications or suicide, and has higher mortality than any other mental disorder.

Psychosis

Conditions that include symptoms of psychosis most commonly emerge in late adolescence or early adulthood. Symptoms can include hallucinations or delusions. These experiences can impair an adolescent's ability to participate in daily life and education and often lead to stigma or human rights violations. Schizophrenia occurs in 0.1% of 15–19-year-olds (1).

Suicide and self-harm

Suicide is the third leading cause of death in older adolescents and young adults (15–29 years) (2). Risk factors for suicide are multifaceted, and include harmful use of alcohol, abuse in childhood, stigma against help-seeking, barriers to accessing care and access to means of suicide. Digital media, like any other media, can play a significant role in either enhancing or weakening suicide prevention efforts.

Risk-taking behaviours

Many risk-taking behaviours for health, such as substance use or sexual risk-taking, start during adolescence. Risk-taking behaviours can be an unhelpful strategy to cope with emotional difficulties and can severely impact an adolescent's mental and physical well-being.

Young people are especially vulnerable to developing harmful substance use patterns that can persist across the lifespan. In 2019, the prevalence of alcohol use among 15–19-year-olds was high worldwide (22%) with very few gender differences, and showing an increase in consumption in some regions (3).

The use of tobacco and cannabis are additional concerns. Many adult smokers had their first cigarette prior to the age of 18 years. In 2022, the prevalence of cannabis use among adolescents was higher than that of adults globally (5.5 per cent compared with 4.4 per cent, respectively) (4).

Perpetration of violence is a risk-taking behaviour that can increase the likelihood of low educational attainment, injury, involvement with crime or death. Interpersonal violence was ranked among the leading causes of death of older adolescents in 2021 (1).

Promotion and prevention

Mental health promotion and prevention interventions aim to strengthen an individual's capacity to regulate emotions, enhance alternatives to risk-taking behaviours, build resilience for managing difficult situations and adversity, and promote supportive social environments and social networks.

These programmes require a multi-level approach with varied delivery platforms – for example, digital media, health or social care settings, schools or the community – and varied strategies to reach adolescents, particularly the most vulnerable.

Early detection and treatment

It is crucial to address the needs of adolescents with mental health conditions. Avoiding institutionalization and over-medicalization, prioritizing non-pharmacological approaches, and respecting the rights of children in line with the United Nations Convention on the Rights of the Child and other human rights instruments are key for adolescents' mental health.

Understanding teen depression

The teen years can be extremely tough and depression affects teenagers far more often than many of us realize. In fact, it's estimated that one in five adolescents from all walks of life will suffer from depression at some point during their teen years. However, while depression is highly treatable, most depressed teens never receive help.

Teen depression goes beyond moodiness. It's a serious health problem that impacts every aspect of a teen's life. Fortunately, it's treatable and parents can help. Your love, guidance, and support can go a long way toward helping your teen overcome depression and get their life back on track.

There have been increases in adolescent depression and suicidal behaviour over the last two decades that coincide with the advent of social media (SM) (platforms that allow communication via digital media), which is widely used among adolescents. This scoping review examined the bi-directional association between the use of SM, specifically social networking sites (SNS), and depression and suicidality among adolescents. The studies reviewed yielded four main themes in SM use through thematic analysis: quantity of SM use, quality of SM use, social aspects associated with SM use, and disclosure of mental health symptoms. Research in this field would benefit from use of longitudinal designs, objective and timely measures of SM use, research on the mechanisms of the association between SM use and depression and suicidality, and research in clinical populations to inform clinical practice.

Youth Depression Statistics

Depression can derail teen health, learning, and life, but early, targeted treatment makes a real difference. One in five U.S. teens reports experiencing depression each year. Only 20 percent of them receive treatment, a gap with tangible consequences.¹⁷

Globally, one in seven 10-19-year-olds experiences a mental disorder, accounting for 15% of the global burden of disease in this age group. Depression, anxiety and behavioural disorders are among the leading causes of illness and disability among adolescents. Suicide is the third leading cause of death among those aged 15–29 years old. The consequences of failing to address adolescent mental health conditions extend to adulthood, impairing both physical and mental health and limiting opportunities to lead fulfilling lives as adults.¹⁸

One in six people are aged 10–19 years. Adolescence is a unique and formative time. Physical, emotional and social changes, including exposure to poverty, abuse, or violence, can make adolescents vulnerable to mental health problems. Protecting adolescents from adversity, promoting socio-emotional learning and psychological well-being, and ensuring access to mental health care are critical for their health and well-being during adolescence and adulthood.¹⁸

Globally, it is estimated that one in seven (14.3%) of 10–19-year-olds experience mental health conditions, yet these remain largely unrecognized and untreated.¹⁸

Adolescents with mental health conditions are particularly vulnerable to social exclusion, discrimination, stigma (affecting readiness to seek help), educational difficulties, risk-taking behaviours, physical ill-health and human rights violations.¹⁸

India has 436 million children and teens, which makes it one of the largest youth populations globally. Despite this, mental health services remain severely inadequate and not on the priority list, according to a UNICEF report. The main concern lies in the lack of pace with the size of the population that needs help in India's mental health system. Millions of Indian adolescents are struggling with anxiety, depression, and emotional distress, but are not getting help.¹⁹

A new review by The George Institute for Global Health, published in the *SSM - Mental Health journal*, highlights why this is happening and what needs to be done to bridge this gap. The review covers 26 studies across major Indian cities, making it one of the most comprehensive analyses yet on teenage mental health in India in 2026. The review pinpoints that the real crisis is not just mental health, but access to care that is much needed.¹⁹

In the bustling cities and quiet corners of India, millions of young people are silently struggling with a shadow that follows them everywhere—depression. It doesn't discriminate between toppers and dropouts, between extroverts and introverts, or between urban and rural youth. Depression is real, it's rising, and it's ravaging the mental well-being of a generation.

According to a 2023 report by the National Mental Health Survey, over 15% of Indian youth aged 15–24 experience depressive symptoms, with many never receiving professional help. This means that in a classroom of

40 students, at least 6 might be silently battling a mental health issue, often undiagnosed and untreated. The pressure to succeed, the fear of failure, academic stress, relationship issues, cyberbullying, unemployment, and even social media comparisons are pushing young minds into a spiral of hopelessness. Despite being connected digitally, youth feel increasingly disconnected emotionally.

Why Is No One Talking About It?---The biggest hurdle in addressing depression is stigma in the society. Statements like “It’s just a phase”, “Don’t be so weak”, or “You have everything, why are you sad?” are not just dismissive—they are dangerous.

Cultural silence, fear of judgment, and lack of awareness stop young people from opening up. Many feel ashamed to seek therapy or talk to their families. In rural areas, where mental health literacy is even lower, depression is often misunderstood as laziness or a personal failing.

What Needs to Change?

Open Conversations: Schools, colleges, and parents must normalise talking about mental health just like physical health. Creating safe spaces for expression can save lives.

Professional Support: Mental health services should be made accessible, affordable, and stigma-free, especially in tier-2 and tier-3 cities.

Awareness Campaigns: The government and influencers must collaborate on awareness initiatives—especially on social media platforms where the youth spend most of their time.

Peer Support Groups: Training students in basic psychological first aid and peer counselling can help catch early signs of depression.

Curriculum Reform: Incorporating mental health education into school syllabi can teach students emotional resilience from an early age.

Conclusion: It’s Time to Heal Together

India cannot become a superpower while its youth are suffering in silence. Healing begins with listening, with empathy, with courage. Let’s dismantle the walls of stigma and build bridges of understanding.

Let’s talk. Let’s listen. Let’s heal. Together.

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