self-image with other structural personal constructs is noted. These interrelations constitute personal experience wholeness and integration or vice versa disintegration during the person’s adaptation to the socio-cultural environment. A fragment of a psychologist’s work in the framework of the proposed author’s model is shown, in particular, psychodiagnostic capabilities of the “Emotions, sensations and experiences” technique, serving as a benchmark for further work with adolescents. Adolescents with high and average levels of anxiety, aggressiveness, hostility, low self-esteem, avoidance of difficulties, frustration have been determined empirically. Adolescents with high and average rigidity have been also determined. It is argued that the most effective methods for the correction of emotional disorders and self-image are the association methods allowing lowering of the use of protective mechanisms during working through a person’s traumatic negative experience, causing aggressiveness, anxiety and frustration at adolescents. Through their application, the process of self-knowledge and self-understanding is implemented, activating the desire to design consciously own Self.

Key words: self-image, anxiety, aggressiveness, mental health, wholeness.

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CHILDREN WITH DEPRESSION AND FAMILY
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Depression is a psychiatric disease with a predominant symptom, emotional disturbance, physical annoyances and difficulties in interpersonal relationships. It can occur at any age, even in children. About 3 % of all children may experience depression. Depression as a disease affects the whole body and has an impact on how the child feels, thinks and behaves. These symptoms are accompanied by a number of other symptoms that affect appetite, sleep, levels of activity and concentration, children’s self-confidence, and the image they have formed for themselves. Children with depression are usually sad and generally experience the disease in a similar way to older people.

Key words: depression, children, family, treatment

The aim of this work is to investigate the impact of child depression on the family and its treatment by the family to prevent extreme behavior by children.

Methodology. A bibliographic search was made by the Scopus, Medline, Ebsco, Pubmed, electronic databases. 25 articles from Greek and foreign literature were separated and studied.

Conclusion. The main characteristic of depression is the persistent and constant feeling of sadness, nervousness and lack of interest from any activity [1, 4, 5, 7, 8]. Depression have devastating consequences on the child’s life, as well as his/her family and relationships with others, classmates, educators, etc. Depressed, can result in school failure, alcohol abuse and other addictive substances, and suicide. Children play a decisive role in coping with child depression. If parents suspect depression, they should seek specialized help.

The diagnosis is made through the evaluation of the child and his family using psychological tests [2, 3, 10]. Also, help through family meetings with special psychotherapists of both the child and the family play a vital role in the management of depression.

New psychotherapeutic approaches, such as play therapy, can help the child process depressed feelings through the game. Drug treatment is rarely given to children in very severe forms of depression that usually coexist with other illnesses.
The role of the school plays a decisive role in coping with childhood depression [6, 9]. Teachers spend a lot of time with their students and are an important source of information on children’s mental health and the timely recognition of the symptoms of depression. More generally, working with the family and the school environment is essential to overcome depression in the child.

**Results.** Depression can have devastating consequences on the life of the child who suffers, as well as in his family and his relationships with others. So, family cooperation, especially parents and teachers, is essential.

**References**