

Name: _____

Date: _____

Depression

P A G Z T M B F M P O V V J Y R B
T H O E V W E Z L I F Z D L R B M
S T C M H Y J E C Y M D H U O I I
S S C O H M S S E L E P O H H D Z
E E N H C S A D N E S S A R X T Z
N L O G Q R R W U Z E K Y M E E V
L F S N N N S S E L P L E H D W Q
L E M I S Y I Q F K X N E I R C P
I S W S E A K W B B J N C X K H Q
V T E R G N O V I D I I E S V F A
M E G U W R T H L J U H L O S P R
Y E Y N T F J S D S X E M Q R C M
X M R H R C A L F P T H Y Z H P N
Q C G A C U Y G P N V S X J F Q A
F T N I N D E P E N D E N C E Y B
C C A Z M Y M B K J R T S P I Z K
Q T D L N I X B K Y K A I M G Z M

Independence

Nursing Home

Self-esteem

Self-worth

Helpless

Hopeless

Illness

Sadness

Suicide

Angry