When Someone You Know Has Depression …
抑鬱症 — 擔心不如關心

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Outline of the Talk

* Mental Health Talk 2012: When someone you know has Depression...
  * Is this Depression and not just sadness?
  * How to support somebody with Depression?
  * What can I do when his/her Depression is affecting me too?
  * What are the protective factors and risk factors?

Depression affects more than 350 million people of all ages, in all communities, and is a significant contributor to the global burden of disease.
An average about 1 in 20 people reported having an episode of depression in the previous year.

Global economic crisis and poverty are linked with depression and suicide risk. Breaking the chain of poverty and debt around people with depression is vital to addressing the millennium goal of eradicating poverty and hunger.
Sadness

- Normal human reaction
- Mild intensity
- Back to normal routine after a few days

Sad to Normal

- Mild intensity
- Does not affect daily functioning
As all of us have experienced sadness, we tend to think that depression is just the same as sadness. Is that really so?
Feeling Sad

- Tearfulness
- Crying
- Sad-looking

Lifeless, empty, apathetic

- To a depressed person, life is empty and they feel apathetic
- Low energy
- Low motivation
**Angry, aggressive, restless**

- Some of the most easily overlooked and misunderstood symptoms of depression are: anger, aggressiveness, restlessness
- People always thought the person was ill-tempered and failed to see these as possible symptoms of depression

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**Affects daily life**

- Work, study, eat, sleep, fun
  - Low energy, lacks motivation and initiative
  - Affects work and study
  - Loss of appetite, or overeating
  - Insomnia, sleeps a lot, poor quality of sleep
  - Not interested in activities he/she used to enjoy
Poor Concentration

- Depression affects concentration
- Ruminations and worries
- May be easily misinterpreted as being lazy and distractible

Worthlessness

- Guilt feelings
- Self-blame
- Shameful about own mood
- See themselves as a burden to others
- See themselves as worthless
Helplessness

* Feels that other people cannot help them out of this
* Keeps saying that they know they have to help themselves but they cannot get themselves out of this situation
* Increasingly helpless when other people are getting frustrated and annoyed by their lack of progress in mood

Hopelessness

* Feels that there is no better future
* Feels frustrated about their lack of improvement in mood and feels that they will not get better
* Hopelessness is associated with suicidal thoughts and behaviours
Psychological Pain

* When the person with depression feels that the psychological pain is more than they can cope with or bear with, they are more likely to be suicidal
* One important reasons for seeking help is to increase their coping strategies, so that they can bear with the pain and learn to solve the problems

Suicidal

* Suicidal persons do have ambivalence about death
* They have a wish to live and a wish to die
* It is important to increase their wish to live

Note: Helping a suicidal person is a serious topic that warrants a separate talk and is not covered in this talk
Summary: Symptoms of Depression

- Depressed mood most of the day.
- Diminished interest or pleasure in all or most activities.
- Significant unintentional weight loss or gain.
- Insomnia or sleeping too much.
- Agitation or psychomotor retardation noticed by others.
- Fatigue or loss of energy.
- Feelings of worthlessness or excessive guilt.
- Diminished ability to think or concentrate, or indecisiveness.
- Recurrent thoughts of death

Depression in Women

- Ratio of depression in women when compared to men = 2:1
- Biological factors
- Women are more ready to admit having depression
- Guilt, crying, sleep problems, appetite, and gain change
Depression in Men

- Men are less ready to admit depression
- More likely to show these symptoms: fatigue, irritability, sleep problems, and loss of interest
- Anger, aggression, violence, reckless behavior, drinking problems and substance abuse are common presentation of male depression

Depression in Teens

- More common presentations: Irritable, hostile, grumpy, having unexplained aches and pains
- If their depression is not treated, may lead to problems at school and at home, drug abuse, self-loathing, homicidal violence or suicide
Depression in Older Adults

- Common presentation in the form of physical complaints
- Depression in older adults is related to poor health and suicidal risk

Bipolar Affective Disorder

- People with Bipolar Affective Disorder have episodes of depressive mood and periods of elevated mood
  - Elevated, expansive, or irritable mood
  - Impulsive behavior, hyperactivity, rapid speech, and little to no sleep
- They may need different medication and treatment. So it is important for family and friends to alert the mental health professionals, especially the psychiatrist, about this.
Symptoms of Bipolar Affective Disorder / Manic Depressive Disorder

* cycling mood changes, with episodes of depression alternate with manic episodes
  * increased self-esteem or grandiosity
  * decreased need for sleep (e.g., feels rested after only 3 hours of sleep)
  * more talkative than usual or pressure to keep talking
  * flight of ideas or subjective experience that thoughts are racing
  * distractibility (i.e., attention too easily drawn to unimportant or irrelevant external stimuli)
  * increase in goal-directed activity (either socially, at work or school, or sexually) or psychomotor agitation
  * excessive involvement in pleasurable activities that have a high potential for painful consequences (e.g., engaging in unrestrained buying sprees, sexual indiscretions, or foolish business investments)"

Dysthymia

* Depressed mood most of the day for more days than not, for at least 2 years, and the presence of two or more of the following symptoms that cause clinically significant impairment in social, work, or other important areas of functioning:
  * Poor appetite or overeating.
  * Insomnia or sleeping too much.
  * Low energy or fatigue.
  * Low self-esteem.
  * Poor concentration or difficulty making decisions.
  * Feelings of hopelessness.
Supporting someone with Depression

Supportive and Empathic

- Show your care and concern
- Be there for them
- Try to understand their depressive experience
- Learn about depression
Understand Depression

* Don’t underestimate the seriousness of depression. It drains one’s energy, optimism and motivation.

Don’t take it personal

* Depressed persons say hurtful things and have difficulty to connect with others
* It is Depression talking, not the person!

It is Depression talking!
Hiding will not make it go away!

* Covering up and denying Depression will delay treatment

If you suspect someone to be suffering from depression, you can try to start the discussion by:

* Telling the person that you observe him/her to look sad
* Show the person that you care about his/her well-being
* Encourage him/her to talk and to seek professional help
* Accompany the person to seek help is good – it helps the person to overcome social stigma related to help-seeking
What have you said to a person with Depression?

Have you ever said these to a person with depression?

* Look on the bright side. Be positive.
* Just snap out of it. Make an effort to stop feeling unhappy.
* We all go through times like this.
* Think of the people who are more unfortunate than you.
* You have so much to live for why do you want to die?
* I can’t do anything about your situation.
Advice on what you should AVOID saying to a person with depression:

* It’s all in your head.
* We all go through times like this.
* Look on the bright side.
* You have so much to live for why do you want to die?
* I can’t do anything about your situation.
* Just snap out of it.
* What’s wrong with you?
* Shouldn’t you be better now?

Adapted from: The Depression and Bipolar Support Alliance

My thoughts on how your “kind words” may have increased the person’s negative depressive thinking

* Look on the bright side. Be positive.
* Just snap out of it. Make an effort to stop feeling unhappy.
* We all go through times like this.
* Think of the people who are more unfortunate than you.
* You have so much to live for why do you want to die?
* I can’t do anything about your situation.
What you can say that helps:

* You are not alone in this. I’m here for you.
* You may not believe it now, but the way you’re feeling will change.
* I may not be able to understand exactly how you feel, but I care about you and want to help.
* When you want to give up, tell yourself you will hold on for just one more day, hour, minute – whatever you can manage.
* You are important to me. Your life is important to me.
* Tell me what I can do now to help you.

Adapted from: The Depression and Bipolar Support Alliance

My thoughts on why it works better by saying these:

* You are not alone in this. I’m here for you.  [Accompany]
* You may not believe it now, but the way you’re feeling will change.  [Hope]
* I may not be able to understand exactly how you feel, but I care about you and want to help.  [Acknowledgement]
* When you want to give up, tell yourself you will hold on for just one more day, hour, minute – whatever you can manage.  [Respect]
* You are important to me. Your life is important to me.  [Assurance]
* Tell me what I can do now to help you.  [Practical]

Adapted from: The Depression and Bipolar Support Alliance
Friends and family need to watch out for these important signs of suicidal thoughts and behaviours:

- Talking about suicide or death
- Dangerous or self-destructive acts
- Preparation and saying goodbye
- Treat these seriously. Seek professional help immediately.

Be part of the care team: Friends and Family, Psychiatrists, Family Doctors, Person with Depression, Clinical Psychologists, Counsellors, School and Workplace.
Encourage Activity

- Exercise and activities are helpful for people with depression
- Introduce these gently and persistently
- Taking a short and relaxing walk regularly with the person is a good start

Provide assistance

- What the person needs and is willing to accept
- e.g. helping with simple household chores or running simple errands for the person
Have realistic expectations

- Be patient. It takes time for someone to recover from depression.
- Recovery is a process. So there are ups and downs, and setbacks.
- Don’t get frustrated or discouraged with the slow pace.

Lead by example

- Maintain a positive outlook, healthy lifestyle, seek support
- Family and friends need to be aware of living your life according to the way you preach to the person with depression
His/Her Depression is affecting me

You may feel discouraged when the person seems to be:

- Having no improvement
- Ungrateful
Social Avoidance

* You may also feel discouraged and frustrated when the person avoid social interactions, including avoiding interacting with you

Self-Pity? Crave for Attention?

* You may be frustrated about the persistent depressing themes and emotional behaviours
* You cannot help thinking – is this self-pity? Is this attention-seeking? Is depression just an excuse?
* When you have these thoughts, it is likely that you behave in ways that affect your interaction with the person with depression
What can you do?

- Learn from the wisdom about safety measures on a plane – make sure you take care of yourself before you help other people
- Make sure your own health and happiness are solid before you try to help someone with depression

Take care of yourself
Communicating is better than silence, as resentment can build up

Talk about your feeling before you have pent-up emotions and say hurting things to the person with depression

You can only do so much

Set limits to what you are willing and able to do
**Stay on track with your own life**

- Keep your own appointments and plans

**Seek Support**

- Carer distress is common
- Seek advice and support
Protective and Risk Factors

Prevention

* Learn to be more aware of the risk factors and potential triggers
* Increase your protective factors and enhance your coping skills and resilience
Risk Factors

- Loneliness
- Lack of social support
- Recent stressful life experiences
- Family history of depression
- Marital or relationship problems
- Financial strain
- Early childhood trauma or abuse
- Alcohol or drug abuse
- Unemployment or underemployment
- Health problems or chronic pain

Having the risk factors does not mean the person will definitely have depression.

Loss and defeat incidents are some of the commonly reported triggers.
Loss

* People who put high values on social approval and acceptance
* May develop depression when encounters experience of loss of social resources – rejection, social deprivation

Defeat

* People who seek independence, work and accomplishment, prefer solitary activities
* May develop depression when encounters experience of defeat or loss of personality independence, control, or mobility
Protective Factors

* Supportive social networks (friends and family)
* Sound psychological development
* Life skills such as conflict resolution, anger management and problem solving
* Good social skills
* Positive coping skills
* Opportunities for control
* Access to appropriate levels of income

Life Skills

* Stress management
* Conflict management and interpersonal skills
* Problem-solving skills
* Emotional skills
Optimists take **problem-solving** approach, more planful, **approach-oriented** than avoidance, see daily stresses in terms of **potential growth** and tension reduction, tend to **accept** their plights when faced with truly uncontrollable circumstances, knows **when** to give up.

“**God, grant me the serenity to accept the things I cannot change, the courage to change the things I can, and the wisdom to know the difference.**”

The Serenity Prayer of Reindhold Niebuhr
Read More from these websites:

Stigma Free Campaign: Mental Health as a Global Issue

CEDARS - Counselling and Person Enrichment

- Read more about depression and other mental illnesses
- Go to “Learn” http://stigmafree.wordpress.com/
Thank You

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