

# DEPRESSION

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## **What is depression?**

Most people feel low, “down in the dumps” and lacking in energy at times. However, if this feeling lasts for most of the day for more than two weeks, this could be depression. When this happens, it can be difficult to do things you used to manage.

### **How you might feel if you are depressed:**

- sad, guilty, numb, in despair
- tearful
- unable to cry
- irritable
- lonely
- unmotivated

### **What you might notice happening in your body:**

- it might be hard to concentrate
- you might be forgetful
- your appetite might increase or decrease
- you might find it hard to get enough sleep
- you might find that you are sleeping much more than usual
- you might find that you do not have much energy

### **What you might think:**

- you might have critical thoughts about yourself. (For example, “I am a waste of space”)
- you might make negative thoughts about the future. (For example, “Things are never going to get better”)
- you might think things are hopeless
- you might have suicidal thoughts or thoughts about harming yourself

## How you might act:

- you might spend a lot of time by yourself
- you might avoid doing things that you need to do or previously enjoyed doing
- you might spend a lot of time in bed
- you might find it difficult to do quite simple things

If a lot of these seem familiar, it may be that you have symptoms of depression or low mood. Depression is really common. 1 in 5 adults will experience these symptoms of depression at some point in their lives. It is the most common reason for people to visit their GP.

It is important to know that people will react to depression in different ways. Not everyone with depression will suffer all of these symptoms.

It is normal to feel these symptoms after distressing events. This could be the loss of someone close to you or a relationship breakdown. When events like these take place, it is helpful to talk over how you are feeling with a person you trust. If you are finding it difficult to cope, you should also visit your GP.

## How can this leaflet help me?

When people are depressed, it is very common to feel bleak about things getting better. There are things you can do to improve how you are feeling. This booklet will give you a bit of information about why people get depressed. It will explain some of the common symptoms of depression and some steps you can take to feel better. This booklet will also give you information about who to get in touch with if you need more help.

One of the symptoms of depression is poor concentration. Don't worry if you find it difficult to read this booklet. Try to read a small section at a time.

## Why do people become depressed?

There is no single reason why people become depressed. It can be due to many reasons. These are different for each person.

**Biological reasons** may play a part. You may be more likely to suffer if a family member has had depression. This does not mean that you *will* develop it. It means you may be more *vulnerable* to depression.

**Our early experiences** can have an affect on the chances of us developing depression. You may become depressed if you have had difficult experiences in your early life.

Depression can also be caused by some **brain chemicals** being less active than they should be. This can affect sleep, appetite, sexual drive and mood.

**Difficult life events** can make people stressed and this can lead to depression.

Stressful situations can be:

- unemployment
- illness
- relationship breakdowns
- financial difficulties

One in ten women will have depression after having a baby. This is called post-natal depression (you can find details for further help at the back of this booklet).

Another type of depression is bipolar disorder (also known as manic depression). People with bipolar disorder have periods of time where they feel really low and other periods where they feel very excited, confident and often act in an uncontrolled way. (You can find details for further help for manic depression at the back of this booklet).

Depression can develop out of the blue with no reason as to why you are feeling depressed. There are things you can do to improve how you are feeling despite what has caused the depression.

## **The vicious cycle of depression**

Our thoughts, bodily symptoms, mood and behaviour all affect one another. They can work together to become a **vicious cycle**.

Here is an example of a vicious cycle below.

# The vicious cycle of depression

## Outside world

- frustrating events/situations
- practical problems, eg financial difficulties
- stress
- loss
- change in circumstances

Lead to...

## Depressed thoughts

“Things are never going to get better.”  
“I am useless.”  
“I shouldn’t be feeling this way.”

## Behaviour

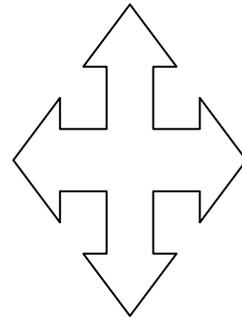
Avoid people  
Stop doing things you enjoy  
Find it hard to do simple things  
Spend long periods in bed

## Mood

Sad, upset  
Numb  
Guilty  
Lonely

## Bodily symptoms

Feeling tired  
Restlessness  
Difficulty falling asleep or staying asleep



# Breaking the vicious cycle – things to do to make you feel better

The good news is that there are lots of things that you can do to break the vicious cycle.

## 1. Physical Exercise

When you exercise, your body actually produces natural antidepressants, so exercise can be a really helpful way to improve your mood. If you are depressed, you may experience reduced energy levels and lower motivation, but physical exercise can actually help you to feel *less* tired.

Try to do 20 minutes of exercise at least three times a week. You could gradually build up the intensity or length of time that you exercise for. Spend some time thinking about what type of exercise you might enjoy doing. It could be something you have enjoyed in the past or something you have always wanted to try.

Make a note of some types of physical activity that you think you might enjoy:

.....  
.....  
.....

## 2. Get the balance right

You might find it difficult to carry out some of your everyday tasks, spend time with others and do things you enjoy when you are depressed. There is lots of evidence to suggest that doing activities that give you a sense of *achievement*, *closeness to others* and *pleasure* can help you to feel better. Here are some examples of these types of activities:

**Achievement:**

Finishing a pile of ironing  
Completing a puzzle or jigsaw  
Sorting through bills and letters you have been putting off

**Pleasure:**

Having a nice hot bath  
Going to the cinema  
Listening to a favourite CD

**Closeness to others:**

Calling a friend for a chat  
Visiting relatives  
Going to a social group or club

**What things could you plan to do?**

| Achievement | Pleasure | Closeness to others |
|-------------|----------|---------------------|
|             |          |                     |

**3. Set achievable goals**

Because depression can sometimes cause low motivation, reduced energy levels and poor concentration, some tasks that you used to be able to manage, can feel overwhelming.

To help you achieve these, it can be helpful to break big tasks into smaller, more manageable steps. So rather than telling yourself to do all of the housework, try to break it down into smaller steps, for instance, clean the kitchen worktops, put a load of washing on, tidy the bedroom, etc.

- try to make a list of things that you would like to do or that you have been avoiding
- choose the easiest or most important one
- write a series of steps to tackle the situation, starting with the easiest and ending with the hardest
- work your way through the steps, if one is too hard; try going back one step or breaking the step down
- if you have a set-back, don't be put off. Try again soon or make the step a bit easier
- congratulate and reward yourself when you have done well

By breaking tasks down, they are more manageable, you are more likely to achieve them and then feel good for having done so.

A good rule to follow is to do what you have planned despite how you feel. Afterwards, go and ask yourself "how do I feel? Do I feel better, worse or the same as before?"

If the answer is worse, then you could try something else that you have put on your list.

#### **4. Talk to others**

Telling someone who you trust how you are feeling can be really helpful. You might be surprised to find out that others have felt in a similar way before and they may be able to provide advice and support.

It can be helpful just to have someone listen to how you are feeling and help you think things through. You might find it helpful to give them this booklet to read to help them understand how you might be feeling.

## **5. Take care of yourself**

It may be tempting to drink alcohol, misuse medication or take illegal drugs to help you cope and provide some short-term relief, but in the long term this can result in psychological and health problems.

Diet can have an effect on mood. Foods high in sugar and fat can provide a short burst of energy but can cause irritability and mood swings.

Caffeine can give us a boost when we are feeling tired, but the effects can last for 6 hours and so try to avoid caffeine in the late afternoon and evening. Caffeine in excess can also cause some feelings of anxiety and agitation.

## **6. Challenging negative thinking**

When we are depressed, we often have negative thoughts about:

### **Ourselves:**

*"I can't cope with this."*

*"I am useless; I shouldn't be feeling this way."*

### **About others:**

*"No-one likes me."*

*"Everyone copes so much better than me."*

### **The world:**

*"Life is so unfair."*

*"The world is a cruel place."*

**And the future:**

*“Things are just going to get worse and worse.”*

*“I will fail at that, there is no point in trying.”*

Our thoughts are **opinions**, they are not **facts**. Sometimes they can be inaccurate and unhelpful, particularly when we are depressed and feeling low.

A fact is, *“I had a meeting at work today.”*

An opinion is, *“Everyone thought what I said in the meeting was really stupid.”*

Try to identify when you have one of these negative, unhelpful thoughts. Don't just accept these thoughts as being true. Try to think of why these thoughts may not be true. Depression means that we often look at things from a negative viewpoint. Try to take a step back and look at things in a more balanced way and challenge those negative thoughts.

| <b>Situation</b>  | <b>Thought</b>  | <b>Balanced perspective</b>  |
|---|---|--|
| Argument with a family member.                              | “I am such a horrible person, why can't I just get along with my family?”                             | “I have argued with my brother before and we always make up. Arguments in families happen all the time.”   |
| An old friend walks past me in the street and doesn't wave. | “I bet she didn't say hello because she doesn't like me. She probably thinks I am boring and stupid.” | “She looked like she was busy thinking about something and probably didn't see me. I have no reason to believe that she doesn't like me, we always got on quite well.” |

| Situation | Thought | Balanced perspective |
|-----------|---------|----------------------|
|           |         |                      |

## What treatments are there for depression?

The first step for depression is normally visiting your GP. Your GP may recommend you to take anti-depressant medication or to receive a talking therapy or both of these.

### Talking therapies

Cognitive-behavioural therapy (CBT) is a talking therapy that is commonly used to treat depression. During CBT, patients identify and challenge unhelpful thoughts and are supported to increase activities that they find rewarding and enjoyable to improve their mood.

### Anti-depressants

You may be prescribed anti-depressants by your GP or another health professional to help you with your depression. These have been shown to be useful for helping people experiencing depression.

Anti-depressants affect the chemicals in your brain and help reduce your depressive symptoms. They are not addictive. Anti-depressant medication usually takes 2-4 weeks to start working.

They will not start working straight away and it is important to keep taking these as long as your doctor advises you to. Your doctor will be able to tell you about any possible side effects of anti-depressants. It is also important to talk to your doctor before taking any other medication, drugs or alcohol with your anti-depressants.

It is important to talk to your doctor before stopping or making any changes to your medication, he or she can help you to make a plan do this.

## **Further help**

**Bipolar Scotland** – help for those experiencing severe depression  
Tel: 0141 560 2050

**Breathing Space** – mental health helpline  
Weekdays: 6pm - 2am  
Weekends: Fri 6pm – Mon 6am  
Tel: 0800 83 85 87

**CRUSE Bereavement Care** – for bereaved people and those caring for bereaved people.  
Tel: 0845 600 2227

E-mail support – [support@crusescotland.org.uk](mailto:support@crusescotland.org.uk)

[www.crusescotland.org.uk](http://www.crusescotland.org.uk)

This website lists a large number of books and leaflets that might be helpful.

**National Debtline** – help for anyone in debt or concerned they may fall into debt  
Tel: 0808 808 4000

**Post Natal Depression Service** – support for families throughout the Borders suffering from postnatal depression

Tel: 01896 751609

**Association for Post Natal Illness** – for women experiencing depression following the birth of a baby (answerphone)

Tel: 020 7386 0868

**Relationships Scotland** – counselling, mediation and family support across Scotland

(Mon-Fri 9.30am-4.30pm)

Tel: 0345 119 2020

Relationship Scotland Borders

(Mon-Fri 9-30am-4-30pm)

Tel: 01721 724170

**Samaritans** – confidential support for anyone in a crisis

National Helpline (24 hours a day)

Tel: 116 123

E-mail Helpline

[jo@samaritans.org](mailto:jo@samaritans.org) (answer within 24 hours)

Visit Local Branch

21 West Port, Selkirk, TD7 4DG

**Living Life** – Appointment-based telephone support based on Cognitive Behavioural Therapy for anyone over the age of 16 experiencing low mood and/or anxiety

Tel: 0800 328 9655

## Websites

[crusescotland.org.uk](http://crusescotland.org.uk)

This websites lists a large number of books and leaflets that might be helpful.

[bluepages.anu.edu.au](http://bluepages.anu.edu.au)

A good site for someone who already knows quite a bit about depression and is interested in finding out more about the way professionals diagnose and treat the condition. (Australian)

[www.lltff.com](http://www.lltff.com)

A general self-help site offering advice on a wide range of issues. It helps you to understand your behaviour and thoughts and offers help on healthy living, better sleep and relaxation.

[www.youngminds.org.uk](http://www.youngminds.org.uk)

A national organisation with a helpful website, aiming to improve the mental health of all children and young people.

## **Books**

Butler, G, Grey, N, and Hope, T. (2018) *Manage Your Mind, Third Edition*. Oxford

ISBN: 978-0198747277 (Section 7 is particularly relevant)

Gilbert, Paul *Overcoming Depression* (2009) Robinson Publishing ISBN: 978-1849010665

Rowe, Dorothy (2003) *Depression: The Way Out Of Your Prison* Routledge ISBN: 978-1583912867 (hard reading in places).

Johnstone, Matthew (2007) *I had a Black Dog* Robinson Publishing ISBN: 978-1845295899 (easy to read).

## **Apps for mobile phone and tablets**

A range of self-help apps are available for your mobile phone and tablet. Some of these apps are free of charge, whilst others have a cost attached depending on the developer. Please use the link below to view some suggested self-help apps for different mental health problems:

<https://www.nhs.uk/apps-library/category/mental-health/>

## **Booklets/leaflets available on the following:**

Agoraphobia

Anger

Anxiety

Bereavement

Hyperventilation

Loss

OCD

Panic (short version and long version)

Phobia

How to solve problems: a simple DIY technique

Relaxation

Self-Esteem

Self-Harm

Self-Help Websites

Sleep

Stress

Trauma

Worry

Copies of any of the above booklets are available to download/print at:

[nhsborders.scot.nhs.uk/wellbeing](https://nhsborders.scot.nhs.uk/wellbeing)

S Black, R Donald, M Henderson 2005  
NHS Borders

Revised Jan 2020  
Review Jan 2021  
SH4.11