CAREGiver Resource

Depression



Depression

It's natural to feel down sometimes, but if that low mood lingers day after day, it could signal depression. Depression is generally defined as a period of sadness or apathy, along with other symptoms, that typically lasts at least two consecutive weeks and is severe enough to interrupt daily activities. Depression is not a sign of weakness or a negative personality.

The diagnosis of depression often begins with a thorough history and physical exam by a doctor. Because certain viruses, medicines, and illnesses can also cause symptoms of depression, doctors typically ask several questions about any reported symptoms to confirm this diagnosis. The doctor will likely ask whether there have been similar symptoms of depression before and, if so, about past treatments received.

Although there is no "depression test" that a mental health expert can use to diagnose symptoms of depression, there are certain features which he or she will typically look for in order to make the proper diagnosis of depression. Some factors include a family history of depression and other mental illnesses, as well as any history of drug or alcohol use.

Symptoms

Some symptoms of depression may include any or a combination of the following:

- Difficulty concentrating, remembering details, and making decisions
- Tiredness and lack of energy
- Feelings of guilt, worthlessness, and/or helplessness
- Feelings of hopelessness and/or pessimism
- Insomnia, early-morning wakefulness, or excessive sleeping
- Irritability, anxiousness, restlessness, angry outbursts
- Loss of interest in activities or hobbies once pleasurable, including sex
- Overeating or appetite loss
- Persistent aches or pains, headaches, cramps, or digestive problems that do not ease even with treatment
- Feelings of sadness, tearfulness, emptiness and/or hopelessness
- Slowed thinking, speaking or body movements
- Unexplained physical problems, such as back pain
- Frequent or repeated mention of death, suicidal thoughts, suicide attempts or suicide

http://www.webmd.com/depression/guide/what-is-depression (Accessed 8/12/15) http://www.mayoclinic.org/diseases-conditions/depression/in-depth/depression/art-20045943 (Accessed 8/12/15)

People with depression are reportedly at an increased risk of suicide. Anyone who expresses suicidal thoughts or intentions should be taken seriously. If you believe a client is showing any potential signs of depression or may be suicidal, call the franchise office immediately.



Depression (Part 2)

Some warning signs that someone may be suicidal can include:

- A sudden switch from being very sad to being very calm or appearing to be happy
- Always talking or thinking about death
- Deep sadness, loss of interest, trouble sleeping and eating that gets worse
- Withdrawing from social contact and wanting to be left alone
- · Increased use of alcohol or drugs
- Giving away belongings
- Having a "death wish," or tempting fate by taking risks that could lead to death, such as driving through red lights
- Losing interest in things one used to care about
- Making comments about being hopeless, helpless, or worthless
- Putting affairs in order, tying up loose ends, changing a will
- Saying things like "It would be better if I wasn't here" or "I want out"
- · Talking about suicide

http://www.webmd.com/depression/guide/detecting-depression (Accessed 8/12/15) http://www.mayoclinic.org/diseases-conditions/depression/in-depth/depression/art-20045943?pg=2 (Accessed 8/12/15)

Treatment

If a physical cause for the symptoms of depression is ruled out, the doctor may begin an initial treatment for the client, or refer the client's care to a psychologist, psychiatrist, or other mental health professional for further evaluation and treatment. Treatment may include medicines (such as antidepressants), psychotherapy, or a combination of both.

Role of a CAREGiver

Caring for a client who has depression can be very difficult and stressful. Here are some tips for caring for a client who has depression:

• Encourage the client to stick with treatment. If the client is in treatment for depression, help him or her remember to take prescribed medications and to keep appointments.

- Be willing to listen. Let the client know that you
 want to understand how he or she feels. When
 the person wants to talk, listen carefully, but avoid
 giving advice or opinions or making judgments.
 Just listening and being understanding can be a
 powerful healing tool.
- Give positive reinforcement. People with depression may judge themselves harshly and find fault with everything they do. Remind the client about his or her positive qualities and how much the person means to you and others.
- Offer assistance. The client may not be able to take care of certain tasks well. Give suggestions about specific tasks you'd be willing to do, or ask if there is a particular task that you could take on.
- Help create a low-stress environment. Creating a regular routine may help the client with depression feel more in control. Offer to help the client make a schedule for meals, physical activity and sleep, and help organize household chores.
- Locate helpful organizations. A number of organizations offer support groups, counseling and other resources for depression. For example, employee assistance programs and many faithbased organizations offer help for mental health concerns.
- Encourage participation in the client's spiritual practice, if appropriate. For many people, faith is an important element in recovery from depression—whether it's involvement in an organized religious community or personal spiritual beliefs and practices.
- Make plans together. Ask the client to join you on a walk, see a movie with you, or work with you on a hobby or other activity he or she previously enjoyed. But don't try to force the person into doing something.



Depression (Part 3)

- Be ready for a whole range of moods.
 Depression can make each day a nightmare of variation. It may be that in the morning all is bleak and dark. A person may be so panic-stricken that even being alone for a few minutes seems to be impossible. This mood may last for hours. In such times, it may be best to be quiet while present.
- Give the client opportunities to make decisions. For example, instead of suggesting, "Let's go for pizza tonight," try this: "I'd like to eat pizza for dinner tonight. Which restaurant should we go to?"
- Provide opportunities for the depressed person to be rewarded, such as visiting friends or going out for activities. Don't force these, though.
- Make sure you recognize and compliment any significant improvement. Be genuine.
- Don't judge or criticize. What you say can have a powerful impact on the client. Avoid saying statements such as: "You just need to see things as half full, not half empty," or "I think this is really all just in your head. If you got up out of bed and moved around, you'd see things better."
- Don't minimize the client's pain. Statements such as "You're just too thin-skinned" or "Why do you let every little thing bother you?" may shame a person with depression. It can invalidate what he or she is experiencing and completely gloss over the fact that he or she is struggling with a difficult disorder—not some weakness or personality flaw.
- Avoid offering advice. Unless you've experienced
 a depressive episode yourself, saying that you
 know how a person with depression feels or what
 that person needs is not helpful. Instead, ask:
 "What can I do to help you feel better?" This gives
 the client the opportunity to ask for help.
- Learn as much as you can about depression.
 Once you can understand depression's common symptoms, course and potential consequences, you can better care for the client.

 Be patient. Don't assume that if the client with depression has a good day, he or she is cured.
 There is usually an ebb and flow to symptoms that many non-depressed people misunderstand.

http://psychcentral.com/blog/archives/2012/05/08/9-best-ways-to-support-someone-with-depression/ (Accessed 8/12/15) http://www.medicinenet.com/script/main/art.asp?articlekey=55171 (Accessed 8/12/15)

CAREGiverSM Self-Care

Caring for a client with depression can be very challenging and exhausting for a CAREGiver. It is important to take care of yourself as well. Below are some suggestions to help maintain your health:

- Take a break to remove yourself from the situation if it becomes overwhelming
- Breathe deeply and slowly for a few minutes
- Have a relaxing bath or go for a walk
- Ask for help, delegate or share responsibility
- Write down your thoughts so they begin to make sense
- Do just one thing at a time
- Schedule a short break if possible
- Visit with supportive friends and let off steam

http://psychcentral.com/lib/self-care-for-depression-caregivers/ (Accessed 8/12/15)

Additional Resources:

National Suicide Prevention Lifeline 1-800-273-8255 suicidepreventionlifeline.org

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