

# How Can You **Help** Yourself?

Depression clouds your mind, zaps your energy, and makes you feel discouraged. You may find it hard to take action to help yourself. You may think you are the only one feeling depression symptoms, but know that these feelings are part of your depression and do not reflect reality. There are ways you can help yourself, starting right now.

## Help yourself.

- Talk to your doctor about your symptoms.
- Take part in activities you usually enjoy (exercise, movies, concerts, community events, theater, sporting events, etc.)
- Avoid drugs and alcohol.
- Eat a well-balanced, healthy diet.
- Get enough sleep.

## Focus on what's doable.

- Do not expect to suddenly "snap out" of your depression.
- If you have a decision you feel overwhelmed by, discuss it with others who know you well and have a more objective view of your situation.
- Break up large tasks into small ones, set some priorities and do what you can, as you can.

## Celebrate small steps.

- Often during treatment for depression, sleep and appetite will begin to improve before your depressed mood lifts.
- Expect your mood to improve gradually, not immediately.
- Remind yourself that positive thoughts will replace negative feelings as your depression responds to treatment.

**Help is near.** If you are concerned about yourself or someone you love, please take a few minutes to complete a free, anonymous self-assessment at: [HelpYourselfHelpOthers.org](http://HelpYourselfHelpOthers.org)

## Resources

**Depression Support**  
Families for Depression Awareness  
[familyaware.org](http://familyaware.org)

**Help Yourself, Help Others**  
[HelpYourselfHelpOthers.org](http://HelpYourselfHelpOthers.org)

**National Institute of Mental Health**  
[nimh.nih.gov](http://nimh.nih.gov)  
866-615-6464 (toll-free)  
866-415-8051 (TTY toll-free)

**Bipolar Support**  
Depression and Bipolar Support Alliance  
[dbsalliance.org](http://dbsalliance.org)

**Eating Disorders Support**

**National Eating Disorders Association**  
[nationaleatingdisorders.org](http://nationaleatingdisorders.org)  
800-931-2237

**Lesbian, Gay, Bisexual, Transgender & Questioning (LGBTQ) Support**

**The Trevor Project**  
[thetrevorproject.org](http://thetrevorproject.org)  
866-4-U-TREVOR (866-488-7386)

**GLBT National Help Center**  
[youthtalkline.org](http://youthtalkline.org)  
800-246-PRIDE (7743)

**Human Rights Campaign**  
[hrc.org](http://hrc.org)  
800-777-4723 (not a crisis line)

**Military Support**  
Military OneSource  
[militaryonesource.mil](http://militaryonesource.mil)  
800-342-9647

**Veterans Affairs – Mental Health**  
[www.mentalhealth.va.gov](http://www.mentalhealth.va.gov)  
800-273-8255 (TALK) Press 1

**TRICARE – Mental Health**  
[tricare.mil/mentalhealth](http://tricare.mil/mentalhealth)  
TRICARE Regional Contacts  
North: 877-874-2273  
South: 800-444-5445  
West: 877-988-9378

**After Deployment**  
[afterdeployment.dcoe.mil](http://afterdeployment.dcoe.mil)

**Senior Adult Support**  
Elder Care Locator  
[www.eldercare.gov](http://www.eldercare.gov)  
800-677-1116

**Substance Abuse Support**

**Substance Abuse and Mental Health Services Administration**  
[www.samhsa.gov/treatment/index.aspx](http://www.samhsa.gov/treatment/index.aspx)  
800-662-4357

**Alcoholics Anonymous**  
[aa.org](http://aa.org)

**Suicide Prevention Support**

**National Suicide Prevention Lifeline**  
[suicidepreventionlifeline.org](http://suicidepreventionlifeline.org)  
800-273-TALK (8255)

**Youth Support**

**National Youth Crisis Hotline**  
[samaritanshope.org](http://samaritanshope.org)  
877-870-HOPE (4673)

**Boys Town National Hotline**  
[yourlifeyourvoice.org](http://yourlifeyourvoice.org)  
800-448-3000

**Parent/Caregiver Support**

**Boys Town National Hotline**  
[parenting.org](http://parenting.org)  
800-448-3000

**Parent Helpline**  
[nationalparenthelpline.org](http://nationalparenthelpline.org)  
855-427-2736

**Postpartum Progress**  
[postpartumprogress.org](http://postpartumprogress.org)

**If you, or someone you know, is in suicidal crisis or emotional distress please call 911 or go to your nearest emergency room.**

# What Does Depression **Look** or **Feel** Like?

Depression is a serious medical condition. People with depression may have feelings of deep sadness, worthlessness, or hopelessness. Depression can be linked to alcohol and drug abuse, and even suicide.

**If you or someone you know has said or felt any of the following things for more than two weeks, it could be depression.**

## I think/believe:

- Nobody likes me.
- I can't do anything right.
- I wish I were dead.

## I am:

- Not interested in things I used to enjoy.
- Irritable, sad, or angry—all the time and at every little thing.
- Acting differently than usual.

## I feel:

- Tired all the time and lack my usual energy.
- Unexplained aches in my joints and muscles, and/or stomachaches, backaches, and headaches for no medical reason.

## I struggle with:

- Meeting my everyday duties—work, family, and other responsibilities.
- Drinking more than anticipated and/or increasing my drug use.
- Changes in my appetite—significant weight loss or gain.

## Thoughts of Suicide?

Call the National Suicide Prevention Lifeline at **1-800-273-TALK (8255)**

## What's the Difference Between Depression & Feeling Sad?



Feeling sad, down, or having "the blues" is a normal reaction to tough life situations like the death of a loved one, relationship problems, or worries about money, school or work. In response to situations like these, about 25 percent of Americans will experience sadness that may seem like depression, but the good news is that these feelings are temporary, rarely causing thoughts of suicide. If you have feelings like this, usually with the help of a good listener and with time, you will begin to feel like yourself again.

The illness of depression is different in that you will not only have feelings of sadness, but also feelings of worthlessness and hopelessness. It can cause you to become physically unable to function, resulting in absences from work, school, or everyday duties.

Depression causes significant changes in your mood, thoughts, behaviors, and bodily functions, and can lead you to have thoughts of ending your life. If you have any of these symptoms, every day, for two weeks or more, it's time to talk to your doctor or a mental health professional.

## Symptoms of Depression:

- **Loss of interest** in once-enjoyable activities
- **Change in eating habits**
- **Excessive sleeping** or insomnia
- **Being agitated** and restless, or lethargic and sluggish
- **Feeling tired** and worn out
- **Feeling guilty** or worthless
- **Having a hard time concentrating** or making decisions
- **Fixation with death**, suicidal thoughts

*"I think the most important thing to recognize is that depression will tell you or make you feel like you don't want to do anything to help yourself. You have to push yourself hard to seek out help and treatment."*

—JOE, 41, who has struggled with depression for most of his life

# What *Causes* Depression?

There is no one cause of depression. Doctors think depression results from a combination of things: family and relationship history, the place where you live and work, where and how you grew up, and your emotional health. Based on all these factors, some people are more likely to face depression.

## Here are some risks for depression to look for in yourself or someone you care about:

- **Personal or family history** of mental illness, including depression, suicide, or bipolar disorder
- **Having a medical illness** and/or chronic pain
- **A recent loss** or severe stress
- **Unexplained physical problems**
- **History of using alcohol or drugs** to feel better
- **Recently having a baby** (this kind of depression is called postpartum depression)—women who have had depression before are at greater risk

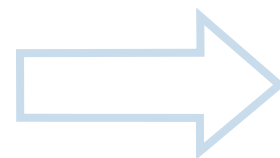
**ASK YOUR DOCTOR.** If you have a medical illness like cancer, diabetes, or heart disease, you have a higher risk for developing depression. With serious illnesses like these, you will probably have big life changes. If you have been diagnosed with a medical illness and are struggling with symptoms of depression, talk to your doctor about how you are feeling. Depression is NOT a normal response to having a serious medical condition.

## DEPRESSION IS *REAL*.

*“Even though all I wanted to do once I got to college was go to class and get good grades, I had trouble focusing on my school work. I would just sit in the back of the class and not really participate. I didn’t really care too much. Obviously, I had been through a lot of suffering since returning home from the war in Iraq, but I thought college was going to be the fresh start I needed. But when I got there not only did I not relate to my fellow classmates, but I obviously was still suffering from depression and post-traumatic stress disorder.”*

—BRYAN, 26, US Army veteran and a junior at Rutgers University

**Help is near.** If you are concerned about yourself or someone you love, take a few minutes to complete a free, anonymous self-assessment at:



**HelpYourselfHelpOthers.org**

### Resources used to develop this material:

Jacobs, D., Davidson, J., Mischoulon, D., Zhang, W., Baldessarini, R. and Rosenbaum J. 2006. Depression and General Anxiety Disorder: A Guide for Health Care Clinicians. Screening for Mental Health, Inc. Pg. 3-7. Mental Health America (MHA). 2011. Depression: What you need to know. [www.nmha.org/go/information/get-info/depression/depression-what-you-need-to-know](http://www.nmha.org/go/information/get-info/depression/depression-what-you-need-to-know). National Institute of Mental Health (NIMH). 2011. What medications are used to treat depression? [www.nimh.nih.gov/health/publications/mental-health-medications/what-medications-are-used-to-treat-depression.shtml](http://www.nimh.nih.gov/health/publications/mental-health-medications/what-medications-are-used-to-treat-depression.shtml). Preventing Chronic Diseases; Public Health Research, Practice and Policy, Volume 2, No.1, January 2005. Anxiety and Depression Association of America (ADAA) 2012. Understanding Anxiety: Generalized Anxiety Disorder and Facts and Statistics for Anxiety <http://www.adaa.org/understanding-anxiety/generalized-anxiety-disorder-gad> and <http://www.adaa.org/about-adaa/press-room/facts-statistics>.

# How is Depression *Diagnosed*?

To diagnose depression, your doctor might use a physical examination, a list of questions, and even lab tests, but it’s what you tell your doctor that will help the most. Be sure to talk to your doctor about your symptoms, how long you’ve had them, when they started, and how you’ve treated them—if at all. Your doctor may ask questions about the way you feel, including whether you have any symptoms of depression.

To provide your doctor with the best information, it helps to make and bring a list of these items with you.

## Information for your doctor:

- **Any worries** about your mental and physical health
- **Any unusual behaviors**
- **Your past illnesses**
- **Your family history** of depression, if any
- **Medications** you are taking now and in the past (prescribed and over-the-counter)
- **Your lifestyle habits** (exercise, diet, smoking, alcohol or drug use)
- **Your sleep habits**
- **Your life stressors** (marriage, work, family, friends, and any others)
- **Questions** you have about depression and depression medications

# How is Depression *Treated*?

With depression, just like many illnesses, the sooner you get help, the better your treatment options. If you are diagnosed with depression, there are many ways to treat it. A combination of medication and psychotherapy (also known as “talk therapy”) can be very effective. By talking with you, your doctor will decide the best way to treat depression.

If you are prescribed medication, it may take up to three to four weeks for you to get the full effect, so it’s important to keep taking the prescribed dose. Do not stop or start any medication without talking to your doctor. If one medication does not work for you, another one may work well, so try not to get discouraged. You may need to try more than one medication before finding the right one for you.

The majority of people diagnosed with depression get better with a combination of medication and “talk therapy”.

*“I was completely overwhelmed following the birth of my baby, and I didn’t understand how—at this most joyous time in my life—all I wanted to do was cry. I couldn’t sleep (even when the baby slept), and worst of all, I was experiencing frightening thoughts of wanting to harm myself and even my baby. Upon sharing this with my doctor, I was diagnosed with depression and through a combination of medication and therapy, started to feel better. I later realized that I was not alone in how I was feeling, and learned that depression is common during and after pregnancy.”*

—KATHERINE, whose children are now older, has completely recovered and now supports other women who experience similar symptoms through her blog at [www.postpartumprogress.com](http://www.postpartumprogress.com)

Like Bryan, Joe, Katherine and countless others, don’t give up!  
**You can get help and feel better.**

