

Singing the Blues...NOT!--Handout

Depression Statistics

- Women are more likely than men to be diagnosed with depression: in and out of the military
- Depression in the general population is approximately 3-5% (3.2 % in military overall); 5-13% in those seen by VA primary care physician
- Cost of depression annually is \$83.1 billion (direct care, mortality, morbidity)
- Suicide rate for depressed people is 8 times higher than in general population
- Depressed patients have more heart-related issues than the general population.

What to Know About Depression

- Most people do not seek care
- 50% recurrence rate after first episode
- Most patients present with somatic complaints
- Best treatment is considered to be both medication and psychotherapy.
- Normal to feel depressed after significant sad life events

Symptoms

- Feelings of depression and/or anhedonia
- Appetite disturbance
- Sleep disturbance
- Psychomotor agitation or retardation
- Fatigue or loss of energy
- Feeling worthless or excessive guilt
- Poor concentration or indecisiveness
- Suicidality

Must cause significant impairment or distress in social, occupational, or other areas of functioning.

Triggers

- Recent significant loss
- Disease or Trauma
- Unfinished Psychological Issues
- Substance Use/Abuse
- Feeling undervalued or overly criticized
- Having limited options

Myths About Depression

- The causes are clear
- It always resolves on its own
- There are no physical symptoms
- Emotional stress is the only cause
- Depressed people just need drugs or cheering up
- It is a sign of mental weakness
- Good treatment is always long-term

Helping Yourself

- Don't isolate—socialize and TALK!!
- Exercise, eat regularly, and sleep on a schedule
- Watch your drug and alcohol use
- Keep to a schedule and set small goals
- Do some things you are good at
- Do something for yourself/others
- Surround yourself with positive people and laugh!!

Helping Your Wingman

- Become a good listener
- Offer support and reassurance
- Avoid 'canned' responses
- Remind them of past successes
- Emphasize that this state is temporary
- Help them to focus on small, attainable goals
- Continue to involve them socially

Please contact your Wing Director of Psychological Health for further information.

Name: Dr. Roger A. De Noyelles, LCSW-R.

CE Building #202, Room 100. 2665 Johnson St., Niagara Falls, NY, 14304

Cell Phone: 716-534-4209; Office: 716-236-2401

References

American Psychiatric Association. (2000). *Diagnostic and statistical manual of mental disorders* (Revised 4th ed.). Washington, DC: Author.

Bray, R. M., Pemberton, M. R., Lane M. E., Hourani, L. L., Mattiko, M. J., & Babeu, L. A. (2010). Substance use and mental health trends among U. S. Military active duty personnel: key findings from the 2008 DoD health behavior survey. *Military medicine*, 175(6), 390-399.

Maguen, S., Ren, L., Bosch, J. O., Marmar, C. R., & Seal, K. H. (2010). Gender differences in mental health diagnoses among Iraq and Afghanistan veterans enrolled in Veterans Affairs health care. *American Journal of Public Health*, 100(12), 2450-2456.

Skoop, N. A., Luxton, D. D., Bush, N., & Sirotin, A. (2011). Childhood adversity and suicidal ideation in a clinical military sample: Military unit cohesions and intimate relationships as protective factors. *Journal of Social and Clinical Psychology*, 30(4), 361-377.