Feature Story

Depression: More Than the Blues

by kathy a. johnson, Forum features editor

I'm feeling desperate! I am just filled to the brim with emotions, fears, worries, frustrations. I can't sit and think without feeling overwhelmed, so I just stuff everything. Oh, God, help me. This is just about the worst I have ever felt.

I wrote those words on July 3, 2001. I knew I needed professional help when I began to understand why people who kill themselves believe their families will be better off without them. After all, why would my family want me around when I am so much trouble? I never actually wanted to die, but I did wish fervently to be beyond the pain I was feeling, and I could see no way to make it through that pain.

Women and depression

When I entered the ranks of the depressed, I joined the nearly 19 million Americans who suffer from the illness each year. Most researchers say women suffer from depression at twice the rate men do. There are several theories regarding why this is so. Margaret McLaughlin, a medical writer and member of the Bergen County, NJ Chapter 40 noted, "Three female clinicians published a report in the November 1999 Journal of Personality and Social Psychology demonstrating the key factors that predispose women to depression are-surprise!-directly related to lifestyle. According to researchers Susan Nolen-Hoeksema, Carla Grayson and Judith Larson, 'The results of this study suggest that women carry a triad of vulnerabilities to depressive symptoms compared to men: more chronic strain, a greater tendency to ruminate when distressed, and a lower sense of their mastery over their lives."

In fact, according to Valerie Davis Raskin, M.D. in When Words Are Not Enough, "The single highest known situational risk factor for depression is being a homemaker caring for

small children, a condition that increases a woman's vulnerability to depression by two and one-half times. That's not too surprising, since caring for children is a high-stakes job with many competing and conflicting demands, little predictability, no breaks, no pay, isolation from adult company, and no genuine societal appreciation of its importance."

Dru Van Doren of the Ft. Collins, CO Chapter 68 admitted "being overwhelmed and depressed by the inability to make things happen, whether it's 'having' to be hither, thither and yon with the children or the fact that laundry, no matter how much you do it, is never, ever completed. As an employed woman, I had choices galore... who I worked for, where I worked, when I worked and very often how I worked. Now I have things that I 'must' do, simply because they are part of the job I chose and am now 'stuck' with. And on top of it all, I now have lots and lots of time to think about the things I dislike doing, simply because many of those things are mindless tasks. I know for some women the daily duties of children, house and home are not stressful... but for me, the monotony and repetitiveness make me crazy, even without adding hubby and kids to the mix."

What is depression?

"We usually think of depression as describing a blue or sad mood," said Toni A.P. Brown, a therapist in private practice in Florida. "Genuine depression, however, is more serious. While everyone has times of sadness, or days when we just can't seem to get going, depression is a true illness that affects our physical health as well as our emotional outlook. It is an illness, not a weakness," she added.

Most researchers feel a number of factors contribute to depression, genetic, biochemical and environmental. "There is biochemical process in depression, but the individual has been made susceptible to depression through life experiences," wrote Richard O'Connor in his book *Undoing Depression*. "The current episode may be precipitated by an external event, but the event has set in motion a change in the way the brain functions." •

O'Connor went on to say, "We confuse depression, sadness and grief. But the opposite of depression is not happiness, but vitality—the ability to experience a full range of emotion, including happiness, excitement, sadness, and grief."

Van Doren indicated that life events played a role in her depression. "In 1996, a number of people key to my world passed away unexpectedly, including my father and father-in-law, within two months of each other. In between, I gave birth to my second child. A friend my age passed away later

that summer, and in the fall of that same year, a beloved grandparent died also. To compound matters, I was forced to sell a house I loved and move into a much larger (and more time-consuming) house to accommodate my mother coming to live with us. There was no time to grieve, only to live through it."

Van Doren sought help after losing her temper with her son over something trivial. "That was the final straw for me. I called a therapist that day and saw her for four weeks. She is amazing, and I've seen her a few more times in the last eight years. After my first four sessions, I asked her if she could fix me. She replied that I wasn't broken, and that if I wasn't currently a little depressed/stressed she'd be really concerned about me. That reassurance really made a huge difference for me. It was suddenly OK for me to have feelings, too."

Depression and parenting

Some women have their first encounter with depression after giving birth. Postpartum "blues" are experienced by most women, according to O'Connor, and true postpartum depression occurs in 10 to 15 percent of new mothers. (Postpartum depression is the equivalent of a major depressive episode.)

Coping with depression makes everything harder, even, and sometimes especially, parenting. Van Doren noted, "The process of parenting well is exhausting, and when your resources are limited by depression or other physical illness, there is very little left over for you." The flip side is that your children can also provide you with motivation to take care of yourself. "Caring for my children forced me to realize sooner that I needed to take action to help myself," said Leanne Price of the Harford County, MD Chapter 182. "If I couldn't take care of me, how could I be a good and happy mom for my kids? The pure joy and pride in being a mom actually helped me to combat my depression, for I'm motivated, hopeful, enriched and encouraged by my children (most of the time!)."

Treatment and prevention

If you feel you are depressed, your first step should be to visit your doctor for a physical. Some conditions, such as thyroid conditions, anemia and even Lyme disease, can mimic depressive symptoms. It is important to rule out any physical cause for the way you feel.

Treatment options abound, and the good news, according to the National Institute of

Mental Health, is that treatment succeeds in 80 percent of those seeking it. The important thing is to recognize the need for help and seek the treatment necessary. Personally, I tried several natural medicine remedies before settling on medication and therapy. Price has used therapy and medication, as well, especially postpartum. "Being in support groups at my church and Mothers & More

has also been a tremendous help, as well as [getting support from] family and friends," she added.

In order to safeguard your mental health, "Exercise, eat well and have a lifestyle that includes a lot of doing good for others and spending time with friends," encouraged Van Doren. "Mothering can be very isolating, which I think often leads to depression."

Brown echoed the need for a support system. "It's really important for women to have a positive social life. I can't emphasize this enough. Research shows that at all stages we need a social support network. It is absolutely essential for women to have friends. No husband and no job can substitute for that," she said. "It's important to take a look at all the areas of your life—physical, mental, spiritual and social, and to ask, 'Are the different areas of my life being well-tended?"

"Even today women still carry the burden of responsibility for handling the family's mental health. I would encourage women to take seriously depressive symptoms in themselves, in their children or their husbands. Don't allow other people to blow you off. Women's instincts and insights are really good. Trust your intuition," said Brown.

McLaughlin, who has had episodes of depression since she was a teenager, said, "For mild to moderate depression, consider therapy. It's effective and long-lasting... For more serious depression, or for mild depression that has gone on for a long time, you might consider medication. The problem here is that it's all trial and error. There's no way to know ahead of time which will be effective for you and which will not. There's no way to know which will give you side effects and which will not... If a drug doesn't work for you or if you hate the side effects, don't just give up! (We depressed people tend to do that.) Go back to your doctor and try another."

Price said, "My advice is to take care of yourself. Eat properly, sleep as much as possible, get some sort of enjoyable exercise, make time for yourself and your interests, have a support system through family, friends, church, neighborhood, Mothers & More, etc. If it is hard to function and cope, please seek a professional for therapy and/or medication. It's nothing to be ashamed of. Depression is a disease which needs to be treated!"

She continued, "I believe that a woman needs to nurture herself as well as others and do things that make her happy. It's quite a challenge with children, a household and/or a job, but it must be done. How can we take care of others in a happy manner if we don't take care of ourselves?"

Kathy A. Johnson is happy to report that her own depression has been under control for more than two years. She is the Forum Features Editor and lives with her family in Lithia, FL. She is a member of the Brandon, FL Chapter 139.

Resources

To find a free, anonymous depression screening site in your area visit www.mentalhealthscreening.org

The National Institute of Mental Health (NIMH) Information Resources and Inquiries Branch (301) 443-4513 www.nihm.org

The National Institutes of Health (NIH) Mental Health and Mental Illness hotline (866) 615-6464 www.nih.gov

National Mental Health Association (NMHA) (800) 969-6942 or (703) 684-7722 www.nmha.org

National Foundation for Depressive Illness, Inc. (212) 268-4260 or (800) 239-1265 www.depression.org

Books

Undoing Depression, Richard O'Connor
When Words Are Not Enough, Valerie Davis Raskin
Out of the Darkened Room, William R. Beardslee
The Wisdom of Depression, Jonathan Zuess.
The Depression Workbook, Mary Ellen Copeland
The Feeling Good Handbook, David Burns.
This Isn't What I Expected: Overcoming Postpartum
Depression, Karen R. Kleiman and Valerie Davis Raskin

SYMPTOMS OF DEPRESSION

Persistent sad, anxious, or "empty" mood

- Sleeping too much or too little, middle of the night or early morning waking
- Reduced appetite and weight loss, or increased appetite and weight gain
- Loss of pleasure and interest in activities once enjoyed, including sex
- · Restlessness, irritability
- Persistent physical symptoms that do not respond to treatment (such as chronic pain or digestive disorders)
- Difficulty concentrating, remembering or making decisions
- · Decreased energy, fatigue, being "slowed down"
- · Fatigue or loss of energy
- · Feeling guilty, hopeless or worthless
- · Thoughts of suicide or death

—From the National Mental Health Association fact sheet: "Depression: What You Need to Know"

Please see your doctor or a qualified mental health professional if you experience five or more of these symptoms for longer than two weeks or if the symptoms are severe enough to interfere with your daily routine.

TYPES OF DEPRESSION

According to the National Institute for Mental Health, depressive disorders come in different forms, just as is the case with other illnesses. The three most common types are *major depression*, which is manifested by a combination of symptoms that interfere with the ability to work, study, sleep, eat and enjoy once pleasurable activities.

Dysthimia is the term for a less severe type of depression that involves long-term, chronic symptoms that keep you from feeling good or functioning well. Many people with dysthimia also suffer from periods of major depression as well.

The third most common type of depression is *bipolar disorder*, or manic-depressive illness. Bipolar disorder is not as common as the other two types of depression listed here, and is characterized by cycles of severe highs (mania) and lows (depression).

-From the National Institute of Mental Health website.