

NEWS RELEASE: Joan Blundall, Executive Director,
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ARTICLE 1 - Why Communities Should be Concerned About Depression

More than likely you, a family member, a friend, or a co-worker is suffering from symptoms of depression while you read this. Sadly, in most cases, they're not receiving appropriate treatment. The Institute of Medicine of the National Academies states that fewer than 50% of people in community and primary care settings are correctly diagnosed for depression. Even though Depression causes more disability than any other disorder in the United States, and is recognized as a major public health problem, symptoms are often perceived as signs of personal weakness. This problem is compounded when the depressed don't seek treatment because they've been led to believe that nothing will help them feel better.

Common misunderstandings like these can do irreparable damage to families. Depression symptoms break down normal family communication. Negativity prevents family members from feeling good about themselves, their accomplishments, and their relationships. If a parent's symptoms go untreated, their children are at greater risk of developing depression themselves because of family stress and diminished parenting skills.

Left untreated, the depressed become more isolated, have fewer satisfying friendships, suffer more accidents and have lower job performance. These problems cause ripples throughout the whole community, since Depression can cause lost time at work and decreased business revenue. According to a report issued by Iowa's Center for Health Workforce Planning, Bureau of Health Care Access, Iowa is at particular risk for these problems. The report identifies that "mental health professionals are at greatest risk of having a shortage of all licensed professionals."

The good news is that Depression can be treated, and that the benefits of getting help, as well as the risks of ignoring treatment options, have their foundation in the best information that modern science has to offer:

Treating Depression:

1. Increases ability to care for self and others
2. Reduces long term health costs
3. Improves lives and relationships in the community
4. Helps families stay together
5. Promotes positive parenting skills
6. Helps people regain enjoyment of life

Not Treating Depression:

1. Hurts families and friends
2. Complicates the treatment of chronic health conditions
3. Is often the basis for suicide and suicide attempts
4. Decreases work performance
5. Makes simple decisions hard
6. Makes it impossible to feel joy

For more information, you can obtain Beyond Depression Toolkits about best practice treatment for depression by contacting beyonddepression.info or higherplain.org. This project has been sponsored by the Wellmark Foundation.

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ARTICLE 2 – How Family and Friends Live With Depression

Everyone in close contact with a person suffering from depression is hurt by the symptoms of the disease. Family, friends and co-workers take the brunt of the fallout, but help is rarely offered to those who are closely related to the depressed person, even when their own mental health is vulnerable. People are torn between putting the needs of the depressed first, needing to spare themselves from pain, and coping with the needs of family and friends. It's no surprise that untreated depression is closely associated with marital breakdown.

Anne Sheffield, in her book *How You Can Survive When They're Depressed*, describes five stages family and friends go through when a family member is depressed:

- 1 **Confusion:** We try to change our behavior, believing that things will improve. We don't know what depression is and what it can do to families. We don't recognize the person we valued before symptoms created barriers within the relationship.
- 2 **Self Doubt:** The free flowing negativity of those we love deflates our mood and we begin to believe the critical remarks. We blame ourselves and question our abilities to hold things together.
- 3 **Demoralization:** We lose our spirit, our beliefs and our will to go on. We either withdraw emotionally from the depressed person or physically remove ourselves from the situation. Resentment builds.
- 4 **Anger:** Moods fluctuate from being numb or angry. The though anger that is experienced builds, we try to minimize or deny the feeling. The stress is too great to admit. The lack of admission prevents us from investing in the relationship.
- 5 **Desire to escape:** There is a desire to separate from the pain of negativity and from the guilt we have about abandonment of someone with whom we have a committed relationship. The day-to-day tension is exhausting.

How you survive when your loved ones are depressed will depend on your coping skills and the support resources that you take advantage of in caring for yourself, but you can best take care of those close to you by taking care of yourself. Just as in dangerous situations, a flight attendant warns adults to put on their own oxygen mask before putting on a child's, relatives and friends first need to stabilize themselves.

Education about Major Depression, treatment for the depressed and family members, and diligence in looking out for oneself are necessary to ride out difficult periods. You can get started on all these things by obtaining a copy of *Beyond Depression: Toolkit for Those Who Live With Depression* by contacting beyonddepression.info or higherplain.org. This project is supported through The Wellmark Foundation.

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ARTICLE 3 – How Depressed Parents Affect Children

Any medical condition that is left untreated ultimately impacts the family. Research regarding how children of depressed parents develop is sobering. These children are at increased risk of having school difficulties, using drugs or alcohol to “feel better”, being isolated, and according to the most current research from the National Institute of Mental Health, parental depression puts children at risk for developing depression themselves. The negativity and inability to feel hopeful interferes with a child’s need to feel positive about themselves and the world in which they live.

The child of a depressed parent expects criticism and may begin to believe they are inadequate. They have difficulty solving problems, probably because their parents, overwhelmed, aren’t modeling good problem-solving behavior themselves. They may feel helpless to deal with small and large challenges. They may in some cases be providing care for their parent when they are the ones who need to be cared for.

Teachers, family members, clergy and friends can help when they point out the child’s strengths and capabilities, provide normal experiences that include laughter and fun, and create a safe space where a kid can just be a kid. Children need a childhood where they do not have to become caregivers, and other adults can make that a reality.

Children do not need to suffer from the negative consequences of having a parent with depression – the risks don’t have to become the reality. A better life is possible when family and community members recognize that depression is a medical condition, get treatment, and increase emotional and social support to families. Being a good neighbor, encouraging connections to enlarge the family, and sharing the warmth of church and community activities can all provide buffers against emotional pain. Make plans for time away from pressure, where children can laugh and get excited about life.

Help children understand that their parents’ moods are not their responsibility or their fault. Encourage parents to seek help and to discuss their feelings with their medical provider. The best gift a depressed parent can give to their children and their spouse is to get treatment for their depression.

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