

Depression

Student Counselling Service

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Depression

What do we mean by depression?

We all feel sad, fed-up, discouraged, or down at times. This is part of being human. Sometimes people say they are feeling 'depressed' when in fact they are experiencing a normal low period in their life perhaps following a disappointment or temporary set-back. If we suffer a major loss it is natural to grieve. During the period of bereavement some of the emotions we experience may be similar to those of depression. However grieving is a normal & indeed an important healing process. Depression is characterised by all pervasive feelings of gloom, hopelessness & a loss of interest & pleasure in life. The distinction between feeling 'low' or & being depressed is ultimately one of intensity & duration of feeling.

Depression commonly involves:

- Persistent low or sad mood
- Loss of interest or pleasure in life
- Feelings of worthlessness or guilt
- Pessimism/hopelessness about the future
- Feelings of helplessness
- Low self esteem
- Poor concentration/forgetfulness

Biological symptoms

- Disturbed sleep (insomnia/waking early/sleeping too much)
- Physical aches & pains
- Loss of appetite/compulsive eating
- Loss of energy/listlessness
- Loss of interest in sex
- Slowing of movement

The following associated symptoms may also be present:

- Bursts of anger or irritability
- Over sensitivity
- Anxiety/nervousness/agitation

Depression *(Continued)*

We all experience a few of these symptoms from time to time for a brief period but someone who is depressed will experience several of them (but not necessarily all of them) for a substantial amount of time. As a result their ability to function is considerably compromised.

Nevertheless depression is a very common mental health problem. It is estimated it will become the second most common disability after heart disease in the next decade.

Reasons why people get depressed

There is no simple answer to this. Sometimes people will be very aware of the triggers to their depression but in other cases the feelings of gloom & hopelessness will seem to come out of the blue. However below are some of the factors which can make us more vulnerable to depression.

- Life circumstances - poverty, social isolation, chronic physical illness.
- Certain life changes & events, especially bereavement/loss/ periods of transition which threaten our sense of self, eg death of a loved one, end of a relationship, leaving home, leaving country, leaving University, redundancy & unemployment.
- Certain childhood experiences eg abuse, excessive parental criticism, unrealistic/ inconsistent parental expectations, neglect, loss of parent, bullying.
- Perceived feelings of repeated failure.
- Chemical/hormonal imbalance eg following childbirth or during the menopause.
- Certain personality traits, particularly perfectionism, passivity, lack of assertiveness
- There can be a genetic link- depression sometimes runs in families.
- Drug & alcohol abuse.

Although the above factors can make us more vulnerable to depression, some people can be affected by several of them & yet not suffer from depression. Many of the predisposing factors have one thing in common - they have a negative effect on our self identity & self esteem.

Of course many of the factors are interlinked. If for instance someone has been abused, bullied or excessively criticised as a child, they may become very self critical & as compensation set excessively high standards for themselves. When they don't meet their self imposed perfectionist demands, they feel they are constantly failing in life. They may then find it difficult to allow anyone to really get to know them. So they can become socially isolated & have insufficient support. They may then turn to drink or drugs to fill the feeling of emptiness but this further depresses them. We can see in this scenario how the factors increasing vulnerability to depression can inter- react to create a vicious circle.

What to do about depression

One of the symptoms of depression is a feeling of hopelessness about the future. Being severely depressed can feel like being stuck inside a black hole from which there is no way out. So it is important to remind yourself that the great majority of people do recover & you won't always feel this bad.

Unfortunately, the thoughts & feelings we experience when depressed tend to change our behaviour in ways which further exacerbate the depression.

- When you're depressed lack of energy & low self esteem may make you feel like cutting yourself off from others. You may also have a tendency to drop activities which you used to enjoy. In fact social contact & activity can lift your mood. So encourage yourself to continue to see friends & pursue your interests even if you don't feel like it. Isolation & withdrawal are actually likely to increase feelings of depression.
- If possible spend time with people who are understanding, supportive & with whom you don't feel you have to put up a front. Allow yourself to express your feelings. But don't take up all their time & see if you can listen to what's going on in their life too.
- If many tasks feel like insurmountable mountains, break them down into smaller more manageable chunks & deal with them one at a time. It can be helpful to give yourself a little reward or treat after completing each step of a task. Start with the tasks you find easier & build up to the ones which you find more challenging. Make sure you focus on & acknowledge what you have achieved. This will help boost your confidence & motivation.
- Exercise regularly eg go for a walk, swim or bike ride, do aerobics, go to the gym, play a game of tennis. Strenuous physical activity releases mood enhancing chemicals in the brain.
- Look after yourself. It may feel tempting to block out negative feelings by resorting to drugs & alcohol. Remember that although they provide a temporary numbness or "high" they are likely in the longer run to exacerbate your feelings of depression.
- Some people find self help books useful. The counselling service has a selection of these which you can borrow.
- Depression & anxiety often run hand in hand. Meditation & other forms of relaxation can help. The counselling service has relaxation tapes which you can borrow. We also run a stress & anxiety management workshop in the Autumn & Spring terms. Contact the counselling service administrator for further details (7919 7472)

Changing negative thoughts

The way we experience a situation & the impact it has on us is influenced by the way we interpret it - or the assumptions we make about it. Negative self talk can induce & exacerbate feelings of depression. We can get into such a habit of thinking negatively that these thoughts become automatic & we cease to be aware of how they are clouding our view of ourselves & others. Negative self talk leads to negative feelings which lead to negative behaviour which in turn reinforces the negative self talk. A vicious circle is thus set up. Below is an example of the respective consequences of negative & positive self-talk.

Event

Tutor points out some mistakes in your essay & gives you ideas for improving future essays:

Negative self-talk

"There's no point trying"
"I always get everything wrong"
"The tutor thinks I'm not up to standard"
"I'm stupid"



Negative feelings

Hopeless
Discouraged
Angry



Possible negative behaviour

Avoid Tutor
Avoid Work eg by watching telly, drinking
Don't incorporate tutor's suggestions

Positive self talk

"I've gained useful tips for next time"
"The tutor thinks I have potential"
"I won a place at University & I'm going to develop as a learner"



Positive feelings

Hopeful
Energised



Possible positive behaviour

Get help from tutors when you need to
Give yourself time to write
Use tutor's advice when writing next essay

We can see from the above example how negative self-talk creates a self fulfilling prophesy.

Challenging negative self-talk

- Become aware of your negative assumptions. We can get so used to giving ourselves discouraging messages that they become almost out of our awareness. So make a conscious effort to notice your appraisal of situations. Perhaps write down all the beliefs you are giving yourself around a particular situation & then reframe the negative assumptions so that you give yourself a more balanced picture. An example is given below:

Situation

Arrange to meet friend in
Loafers. She doesn't stay long
with you & seems distracted.

Negative thoughts

Friend doesn't like me. I bore
her. I'm not interesting enough.

Other explanation

Friend is preoccupied because she has a lot on her plate at the moment. Her many concerns may be making it difficult for her to relax but she did make the effort to meet with me.

Once you become more aware of your negative thinking patterns try & encourage yourself to give yourself alternative explanations to situations. Notice that your "catastrophising" explanations are not THE TRUTH & there may be many other interpretations of a given situation.

Common distorted thinking patterns

*(Adapted from NEC Training Manual,
D.Clarke & S Palmer)*

Although we all have our own idiosyncratic self -talk, there are nevertheless some common underlying patterns in negative thinking & these can make us more prone to depression. Below are common examples.

● **All or nothing thinking**

You look at everything in all or nothing terms eg either I'm completely in control or I'm out of control or either I'm really clever & understand everything really quickly or I'm stupid.

● **Over generalisation**

You view a negative event as a never ending pattern of defeat . This thinking pattern can often be detected by the use of words like 'never', 'nobody', 'always' eg My friends went out without me tonight, nobody ever wants my company.

● **Mental filter**

You dwell on the negatives & avoid the positives eg The party was awful, although I chatted with my friends several people didn't bother to talk to me.

● **Magnification of shortcomings & minimisation of strengths**

eg I tried to support my friend when he was going through a bereavement - I contacted him frequently & listened to him but I'm not a strong person & I easily get upset myself so I doubt I helped him.

● **Automatic discounting**

eg Writing an excellent essay but telling yourself it was easy & anyone could have done it.

● **Emotional reasoning**

eg I feel very anxious & nervous about my exams, I must be incompetent.

● **Inappropriate use of moral imperatives**

ie tendency to tell yourself that you "must" "ought" "should" behave, think, feel in a certain way eg I'm having to read this article several times, I should understand it straight away, or I ought always be nice to people & mustn't show I'm angry.

Common distorted thinking patterns

Adapted from NEC Training Manual, D.Clarke & S Palmer

(Continued)

- **Labelling**

eg I'm feeling weepy & emotional since leaving home & I'm needing a lot of support from friends. I'm weak.

It might be useful, when considering a particular situation, to write down your negative thoughts & explore which of the above thinking patterns you are adopting yourself. Then find counter examples:

If you think people are always criticising you, list the times people have paid you compliments.

Clarify your meaning. If you think you are weak, ask yourself what you mean by this - can one aspect of your behaviour justify this blanket label?

Befriend yourself, develop a caring internal voice which challenges the internal critical voice. What would you be saying to a friend in the same situation?

Think in increments. If you tend to see things in absolute terms try to see them in gradations eg " This is a set-back, I haven't done as well as I hoped rather than I am a failure".

When you find yourself over-generalising look for exceptions to the generalisation eg if you have a tendency to tell yourself you never have anything interesting to say, remind yourself of times when friends have listened attentively to you.

If you tend to think in emotive or absolute terms, try to rephrase your thoughts so that they become less overwhelming eg instead of telling yourself "I absolutely must arrive on time", tell yourself "I have a strong preference for arriving on time".

Seeking further help

Consider seeking further help if you are experiencing any of the following:

- your low mood & negative thoughts persist.
- you are finding it difficult to shake off feelings of hopelessness or helplessness.
- your low mood is interfering with your life, your relationships or your studies.
- You have no-one to confide in who can support you & help you understand your depression.

If your feelings of hopelessness are strong or you have suicidal thoughts or feelings you should contact someone for help as soon as possible.

Medical Help

You can talk to your doctor who can discuss the range of treatments available to you. S/he may prescribe anti depressant drugs. These may not be a cure in themselves but if you are severely depressed they can help lift your mood so that you have the resources to understand & address the factors contributing to your depression. Modern anti-depressant medication isn't chemically addictive but there can be some side-effects if you come off it too quickly, so it is important to come off the medication gradually under medical supervision. It usually takes 2 to 3 weeks before having any beneficial effects. If you have any concerns or questions make sure you discuss these with your doctor.

Seeking further help

(Continued)

Alternative and complementary therapies.

Treatments include acupuncture, massage, homeopathy and herbal medicine. Many people with depression have found them helpful. St John's wort is one of the herbal remedies that have become very popular, and may help to lift your mood. But if you are already taking other medication, it may not be safe to combine them. Consult your pharmacist or GP for more information.

Counselling

Talking to a counsellor who is not involved in your life provides a supportive space for you to express your feelings & concerns without being judged. The counsellor will help you explore & make sense of your patterns of thoughts, feelings, assumptions. S/he will help you gain new perspectives on your problems so that you can mobilise your own resources to resolve them.

Sometimes people worry that seeking counselling is a sign of weakness & indulgence, or they worry that it's a sign of mental illness. On the contrary it takes courage to address & confront our difficulties; to seek help in finding ways of living more productively when our usual self help measures don't seem to be working is an eminently sane decision!

Support from tutors

If you are depressed it is likely that your academic performance will be affected. You may feel overwhelmed by the sheer number of assignments to be completed. Some students avoid approaching tutors for help, imagining that they will be criticised or considered stupid. In fact tutors are there to help you achieve your academic potential & to provide advice & support if you are struggling with your studies for any reason. So try not to put off going to see your personal tutor or the departmental senior tutor if your academic work is suffering as a result of your depression.

How can I help a friend who is depressed?

Listen to a depressed person in a nonjudgmental way. Do not tell them to 'snap out of it' or 'cheer up'. Most depressed people feel full of guilt & self blame as it is. It can feel quite difficult to just stay with, & allow someone to express their negative feelings & thoughts. You might feel that you want to do something to make them feel better. However feeling heard & understood is very comforting for someone who is depressed.

Avoid saying you know how they feel, that you've felt down too. This may in fact make them feel that you are not attending to how they are feeling or that you don't want to see things from their perspective.

Be supportive & patient. Remind them that you are there for them. A depressed person can have a lot of self directed anger. Sometimes they can lash out at those closest to them as a way of reducing the pressure of this anger. They may feel that they don't deserve your friendship & so push you away. It may feel quite distressing to be on the receiving end of this sort of behaviour but try not to be put off by it.

Try when possible to encourage your friend to continue to do the things they enjoyed & which were important to them before they became depressed.

Look after yourself & don't forget about your own mental well-being. Don't let your own life become completely taken over by the need to support your friend, if possible let others contribute too & give yourself 'timeout'. Otherwise you may end up resenting your friend which would obviously be very counterproductive for you & your friend. Encourage your friend to seek support from their GP or the counselling service if the symptoms are persistent & interfering with their ability to get on with their life.

Books

Depression - the way out of your prison, Rowe D. (Routledge, 2003)

Coping with depression, Blackburn I. M. (Chambers, 1992)

Mind over Mood, Padesky & Greenberger (Guildford, 1995)*

Down with GLOOM! Or how to defeat depression, Pitt B. (Gaskell, 1994)

Coping with anxiety & depression, Trickett S. (Sheldon, 2002)*

Anxiety & depression - a practical guide to recovery, Priest R.
(Vermillion, 1996)*

* Can be borrowed from the counselling service library. Contact
counselling service administrator for details.

Organisations

- Depression Alliance
Tel. 0845 123 2320 www.depressionalliance.org
- Fellowship of Depressives Anonymous FDA
www.depressionanon.co.uk

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