

# What Do These Students Have in Common?



When I took a part-time job and started living off-campus, my course work fell apart. I couldn't concentrate or sleep, and I was always IRRITABLE and angry.  
- Leah, sophomore year



After two years of straight A's, I couldn't finish assignments anymore. I felt exhausted but couldn't sleep, and drank A LOT. I couldn't enjoy life like my friends did anymore.  
- John, junior year



I've always been anxious and never had much confidence. College was harder than I expected, and then my parents divorced, which was traumatic for me. After a while, all I did was cry, sleep, and feel waves of panic.  
- Marta, freshman year

## They are college students who got depressed...got treatment...and got better.

College offers new experiences and challenges. This can be exciting – it can also be stressful and make you, or someone you know, feel sad. But when “the blues” last for weeks, or interfere with academic or social functioning, it may be clinical depression. Clinical depression is a common, frequently unrecognized illness that can be effectively treated.

### What is Clinical Depression?

Clinical depression can affect your body, mood, thoughts, and behavior. It can

change your eating habits, how you feel and think about things, your ability to work and study, and how you interact with people.

Clinical depression is *not* a passing mood, a sign of personal weakness or a condition that can be willed away. Clinically depressed people cannot “pull themselves together” and get better.

Depression *can* be successfully treated by a mental health professional or certain health care providers. With the right treatment, 80 percent of those who seek

help get better. And many people begin to feel better in just a few weeks.

### Types of Depressive Illness

Depressive illnesses come in different forms. The following are general descriptions of the three most prevalent, though for an individual, the number, severity, and duration of symptoms will vary.

**Major depression** is manifested by a combination of symptoms that interfere with your ability to work, sleep, eat, and

enjoy once pleasurable activities. These impairing episodes of depression can occur once, twice, or several times in a lifetime.

### Symptoms of Major Depression

- Sadness, anxiety, or “empty” feelings
- Decreased energy, fatigue, being “slowed down”
- Loss of interest or pleasure in usual activities
- Sleep disturbances (insomnia, oversleeping, or waking much earlier than usual)
- Appetite and weight changes (either loss or gain)
- Feelings of hopelessness, guilt, and worthlessness
- Thoughts of death or suicide, or suicide attempts
- Difficulty concentrating, making decisions, or remembering
- Irritability or excessive crying
- Chronic aches and pains not explained by another physical condition

A less intense type of depression, **dysthymia**, involves long-term, chronic symptoms that are less severe, but keep you from functioning at your full ability and from feeling well.

In **bipolar illness** (also known as **manic-depressive illness**), cycles of depression alternate with cycles of elation and increased activity, known as mania.

### How to Recognize Depression

The first step in defeating depression is recognizing it. It’s normal to have some signs of depression some of the time. But **five or more symptoms for two weeks or longer**, or noticeable changes in usual functioning, are all factors that should be

evaluated by a health or mental health professional. And remember, people who are depressed may not be thinking clearly and may need help to get help.

**I kept asking myself, •How could I be depressed? I-d had a normal family life, had been getting good grades, and hadn-t experienced any big trauma - where did my depression come from? - John**

### What Causes Depression?

The causes of depression are complex. Very often a combination of genetic, psychological and environmental factors is involved in the onset of clinical depression. At times, however, depression occurs for no apparent reason. Regardless of the cause, depression is almost always treatable.

**Family History** - Depression often runs in families, which usually means that some, but not all, family members have a tendency to develop the illness. On the other hand, sometimes people who have no family history also develop depression.

**Stress** - Psychological and environmental stressors can contribute to a depressive episode, though individuals react differently to life events and experiences.

In coping with stress, some people find writing in a journal, exercising, or talking with friends helpful. But in clinical depression you need some form of treatment (usually medication and short-term psychotherapy) to start feeling better soon.

**I had a period of nearly constant turmoil when I wanted to •come out• to my friends about being gay but didn-t want to be treated like an outsider. A good friend made jokes about homosexuals and I was afraid of what he-d say about me. That stress played a big part in my becoming depressed. - Josh**

**My family wanted me home every other weekend and I didn-t fit in there anymore. I-d argue constantly with my father, who still treated me like a child. My sister thought I was •uppity•. Everyone was miserable and I felt guilty. - Kim**

### College and Stress

Common stressors in college life include:

- Greater academic demands
- Being on your own in a new environment
- Changes in family relations
- Financial responsibilities
- Changes in your social life
- Exposure to new people, ideas, and temptations
- Awareness of your sexual identity and orientation
- Preparing for life after graduation

**Psychological make-up** can also play a role in vulnerability to depression. People who have low self-esteem, who consistently view themselves and the world with pessimism, or are readily overwhelmed by stress may be especially prone to depression.

For Marta, her feelings of being “not good enough” were worsened by the stress of the academic demands of college and the emotional conflict caused by her parents’ divorce, which combined to trigger her episode of major depression.

### Bipolar Disorder (Manic Depression)

As mentioned earlier, bipolar disorder is a type of depressive illness that involves mood swings that go from periods of depression to periods of being overly “up” and irritable. Sometimes the mood swings are dramatic or rapid, but most often they occur gradually, over several weeks. The “up” or manic phase

can include increased energy and activity, insomnia, grandiose notions and impulsive or reckless behavior, including sexual promiscuity.

Medication usually is effective in controlling manic symptoms and preventing the recurrence of both manic and depressive episodes.

**During a manic episode, I stayed awake for five days straight, but had a lot of energy. I spent my tuition on a major shopping spree and long distance phone calls. I also had sex with several guys that I hardly knew. At the time, I felt so great that I couldn't see that there were serious problems with what I was doing.**

- Teresa

## Suicide

Thoughts of death or suicide are usually signs of severe depression. "If you're feeling like you can't cope anymore, or that life isn't worth living, *get help*," advised Darrel, a student who tried to kill himself during his freshman year. "Talking to a professional can get you past those intense feelings and save your life."

Suicidal feelings, thoughts, impulses, or behaviors *always* should be taken seriously. If you are thinking about hurting or killing yourself, **SEEK HELP IMMEDIATELY**. Contact someone you trust to help you: a good friend, academic or resident advisor, or:

- Staff at the student health or counseling center
- A professor, coach, or advisor
- A local suicide or emergency hotline (get the phone number from the information operator or directory)
- A hospital emergency room
- Call 911

If someone you know has thoughts about suicide, the best thing to do is help him or her get professional help.

"I'm back from the edge," Darrel continued. "Now that I've gotten some treatment, I know how to keep from being out there again."

## Depression and Alcohol and Other Drugs

A lot of depressed people, especially teenagers, also have problems with alcohol or other drugs (Alcohol is a drug, too.) Sometimes the depression comes first and people try drugs as a way to escape it. (In the long run, drugs or alcohol just make things worse!) Other times, the alcohol or other drug use comes first, and depression is caused by:

- the drug itself, or
- withdrawal from it, or
- the problems that substance use causes.

And sometimes you can't tell which came first... the important point is that when you have both of these problems, the sooner you get treatment, the better.

## Getting Help - Treatment Works

If you think you might be depressed, discuss this with a qualified health care or mental health professional who can evaluate your concerns. Bring along an understanding friend for support if you are hesitant or anxious about the appointment.

Several effective treatments for depression are available and can provide relief from symptoms in just a few weeks. The most commonly used treatments are psychotherapy, antidepressant medication, or a combination of the two. Which is the best treatment for an individual depends on the nature and severity of the depression.

Sharing your preferences and concerns with your treatment provider helps determine the

course of treatment. Certain types of psychotherapy, particularly cognitive behavioral therapy, can help resolve the psychological or interpersonal problems that contribute to, or result from, the illness. Antidepressant medications relieve the physical and mood symptoms of depression and are not habit-forming. In severe depression, medication is usually required.

Individuals respond differently to treatment. If you don't start feeling better after several weeks, talk to the professional you are seeing about trying other treatments or getting a second opinion.

## Making a Decision

Don't let fear of what others might say or think stop you from doing what's best for you. Parents and friends may understand more than you think they might, and they certainly want you to feel better.

## Taking the First Step

**I knew I was depressed but thought I could pull out of it by myself. Unfortunately, friends reinforced this attitude by telling me to just toughen up. When that didn't work, I felt even worse because I had failed again. When a friend suggested I talk to his counselor, I resisted at first. In my mind, professional help was for weak, messed up people. But then, I hit a bottom so low that I was willing to try anything.** - John

**I decided to try treatment when my friends got fed up with me. They didn't want to talk about my problems any more, but my problems were the major focus of my life. I needed someone who could help me understand what was happening to me. I'd seen ads for the counseling center and decided to give it a try.** - Kim

**When I began considering suicide, I knew I needed serious help. My resident advisor helped me call a local hotline where I got some good referrals. It was just a phone call, but it was the starting point that got me to the professional help I needed.**

- Leah

## Help Yourself:

### Be an Informed Consumer

#### Don't give in to negative thinking.

Depression can make you feel exhausted, worthless, helpless and hopeless, making some people want to give up. Remember, these negative views are part of the depression, and will fade as treatment takes effect.

**Take an active role in getting better.** Make the most of the help available by being actively involved in your treatment and by working with a qualified therapist or doctor. Once in treatment, don't hesitate to ask questions in order to understand your illness and the way treatment works. And, if you don't start feeling better in a few weeks, speak with the professional you are seeing about new approaches.

**Be good to yourself while you're getting well.** Along with professional help, there are some other simple things you can do to help yourself get better, for example: participating in a support group, spending time with other people, or taking part in activities, exercise, or hobbies. Just don't overdo it and don't set big goals for yourself. The health care professional you are seeing may suggest useful books to read and other self-help strategies.

### Helping a Depressed Friend

The best thing you can do for a depressed friend is to help him or her get treatment. This may involve encouraging the person to seek professional help or to stay in treatment once it is begun. The next best thing is to offer emotional support. This involves understanding, patience, affection, and encouragement. Engage the depressed person in conversation or activities and be gently insistent if you meet with resistance.

Remind that person that with time and help, he or she will feel better.

### Helpful Resources

The professionals at a student health center or counseling service, the Resident Advisor in your dorm, your family health care provider, and your clergy can be helpful resources for getting treatment. You also might contact any of the following organizations in your area for mental health services or referrals:

- A community mental health agency
- A hospital psychiatric outpatient department or clinic
- A private or nonprofit counseling center
- Your local Mental Health Association

The telephone directory or information operator at your school or in your community, or a local hotline, should have telephone numbers for these and other mental health services.

### Finding Affordable Treatment

People are sometimes reluctant to seek help because they are concerned about the cost of treatment. Services at college counseling centers are often low-cost or free. Also city or county mental health services are often offered on a "sliding scale" (the fee is based on your financial resources). Check out any health insurance you may have and see if it pays for private mental health services.

### Is It Worth It?.....Yes!!

**Actually, while the depression was painful, working to get better has taught me a lot about who I am and how to stay healthy. - Marta**

**Getting treatment definitely changed my life for the better and helped me avoid flunking a semester. - John**

### For Additional Information About Depression Write To:

6001 Executive Boulevard, Room 8184,  
MSC 9663  
Bethesda, MD 20892-9663

For free brochures on depression and its treatment, call: 1-800-421-4211.

### For More Information About NIMH

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