One of today’s all-too silent health crises is caregiver depression. A conservative estimate reports that 20% of family caregivers suffer from depression, twice the rate of the general population. Of clients of California’s Caregiver Resource Centers, nearly 60% show clinical signs of depression. And former caregivers may not escape the tentacles of this condition after caregiving ends. A recent study found that 41% of former caregivers of a spouse with Alzheimer’s disease or another form of dementia experienced mild to severe depression up to three years after their spouse had died. In general, women caregivers experience depression at a higher rate than men.

Caregiving does not cause depression, nor will everyone who provides care experience the negative feelings that go with depression. But in an effort to provide the best possible care for a family member or friend, caregivers often sacrifice their own physical and emotional needs and the emotional and physical experiences involved with providing care can strain even the most capable person. The resulting feelings of anger, anxiety, sadness, isolation, exhaustion—and then guilt for having these feelings—can exact a heavy toll.

Unfortunately, feelings of depression are often seen as a sign of weakness rather than a sign that something is out of balance. Comments such as “snap out of it” or “it’s all in your head” are not helpful, and reflect a belief that mental health concerns are not real. Ignoring or denying your feelings will not make them go away.

People experience depression in different ways; the type and degree of symptoms vary by individual and can change over time. The following symptoms, if experienced for more than two consecutive weeks, may indicate depression:

- A change in eating habits resulting in unwanted weight gain or loss;
- A change in sleep patterns—too much sleep or not enough;
- Feeling tired all the time;
- A loss of interest in people and/or activities that once brought you pleasure;
- Becoming easily agitated or angered;
- Feeling that nothing you do is good enough;
- Thoughts of death or suicide, or attempting suicide;
- Ongoing physical symptoms that do not respond to treatment, such as headaches, digestive disorders and chronic pain.

Early attention to symptoms of depression may help to prevent the development of a more serious depression over time.
The National Institute of Mental Health offers the following recommendations:

- Set realistic goals in light of the depression and assume a reasonable amount of responsibility.
- Break large tasks into small ones, set some priorities, and do what you can as you can.
- Try to be with other people and to confide in someone; it is usually better than being alone and secretive.
- Participate in activities that may make you feel better, such as mild exercise, going to a movie or ballgame, or attending a religious, social or community event.
- Expect your mood to improve gradually, not immediately. Feeling better takes time.
- It is advisable to postpone important decisions until the depression has lifted. Before deciding to make a significant transition—change jobs, get married or divorced—discuss it with others who know you well and have a more objective view of your situation.
- People rarely “snap out of” a depression. But they can feel a little better day by day.
- Remember, positive thinking will replace the negative thinking that is part of the depression. The negative thinking will be reduced as your depression responds to treatment.
- Let your family and friends help you.

The most frequent treatment for depressive symptoms that have progressed beyond the mild stage is antidepressant medication such as Prozac or Zoloft, which provides relatively quick symptom relief, in conjunction with ongoing psychotherapy, which offers new strategies for a more satisfying life. A mental health professional such as a psychologist or psychiatrist can assess your condition and arrive at the treatment most appropriate for you.

Respite care relief, positive feedback from others, positive self-talk, and recreational activities are helpful in avoiding depression. Look for classes and support groups available through caregiver support organizations to help you learn or practice effective problem-solving and coping strategies needed for caregiving. For your health and the health of those around you, take some time to care for yourself.

The FCA Fact Sheet Caregiving and Depression offers a more in-depth discussion of this issue. The Fact Sheet is available in both English and Spanish on the FCA website or by sending $1 to Family Caregiver Alliance, 180 Montgomery Street, Suite 1100, San Francisco, CA 94104.

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