



Depression

Information about depression, its symptoms and possible causes, and how you can access treatment and support. Includes tips on caring for yourself, and guidance for friends and family.

If you require this information in Word document format for compatibility with screen readers, please email: publications@mind.org.uk

Contents

What is depression?	2
What are the symptoms of depression?.....	3
What causes depression?.....	6
What can I do to help myself for depression?.....	9
What treatments are there for depression?	12
How can friends and family help?	17
Useful contacts	18

What is depression?

Depression is a low mood that lasts for a long time, and affects your everyday life.

In its mildest form, depression can mean just being in low spirits. It doesn't stop you leading your normal life but makes everything harder to do and seem less worthwhile. At its most severe, depression can be life-threatening because it can make you feel [suicidal](#).

"It feels like I'm stuck under a huge grey-black cloud. It's dark and isolating, smothering me at every opportunity."

When does low mood become depression?

We all have times when our mood is low, and we're feeling sad or miserable about life. Usually these feelings pass in due course.

But if the feelings are interfering with your life and don't go away after a couple of weeks, or if they come back over and over again for a few days at a time, it could be a sign that you're experiencing depression. See our section on the symptoms of depression for more information.

"It starts as sadness then I feel myself shutting down, becoming less capable of coping. Eventually, I just feel numb and empty."

[> Read Amy's blog about living with depression](#)

[> Read about Sam's experience of opening up about depression](#)

Are there different types of depression?

If you are given a diagnosis of depression, you might be told that you have mild, moderate or severe depression. This describes what sort of impact your [symptoms](#) are having on you currently, and what sort of [treatment](#) you're likely to be offered. You might move between different mild, moderate and severe depression during one episode of depression or across different episodes.

There are also some specific types of depression:

- **Seasonal affective disorder (SAD)** – depression that occurs at a particular time of year, or during a particular season. See our page on [SAD](#) for more information.
- **Dysthymia** – continuous mild depression that lasts for two years or more. Also called persistent depressive disorder or chronic depression.
- **Prenatal depression** – depression that occurs during pregnancy. This is sometimes also called antenatal depression.
- **Postnatal depression (PND)** – depression that occurs in the weeks and months after becoming a parent. Postnatal depression is usually diagnosed in women, but it can also affect men.

See [our page on postnatal depression and perinatal mental health](#) for more information. [The PANDAS Foundation](#) also has information and support for anyone experiencing prenatal or postnatal depression.

Is premenstrual dysphoric disorder (PMDD) a type of depression?

PMDD is a severe form of premenstrual syndrome (PMS). Many women experience PMS, but for some women their symptoms are severe enough to seriously impact their daily life. This is when you might receive a diagnosis of PMDD.

PMDD is not a type of depression, but most women who experience PMDD find that depression is a major symptom. See [our page on PMDD](#) for more information.

“Sometimes it feels like a black hole but sometimes it feels like I need to cry and scream and kick and shout. Sometimes I go quiet and lock myself in my room and sometimes I have to be doing something at all times of the day to distract myself.”

What are the symptoms of depression?

There are many signs and symptoms of depression, but everyone’s experience will vary. This section covers:

- common signs and symptoms of depression
- psychotic symptoms
- self-harm and suicide
- the risk of isolation
- anxiety
- depression as a symptom of other mental health problems.

“I had constant low mood, hopelessness, frustration with myself, feeling like I could cry at any moment.”

Common signs and symptoms of depression

Some common signs of depression include:

How you might feel

- down, upset or tearful
- restless, agitated or irritable
- guilty, worthless and down on yourself
- empty and numb
- isolated and unable to relate to other people
- finding no pleasure in life or things you usually enjoy
- a sense of unreality
- no self-confidence or self-esteem

- hopeless and despairing
- suicidal.

How you might behave

- avoiding social events and activities you usually enjoy
- self-harming or suicidal behaviour
- difficulty speaking, thinking clearly or making decisions
- losing interest in sex
- difficulty remembering or concentrating on things
- using more tobacco, alcohol or other drugs than usual
- difficulty sleeping, or sleeping too much
- feeling tired all the time
- no appetite and losing weight, or eating too much and gaining weight
- physical aches and pains with no obvious physical cause
- moving very slowly, or being restless and agitated

“It felt like I was really tired, all the time. I had no energy or emotion about anything.”

Psychotic symptoms

If you experience an episode of severe depression, you might also experience some psychotic symptoms. These can include:

- delusions, such as [paranoia](#)
- hallucinations, such as [hearing voices](#).

If you experience psychotic symptoms as part of depression, they're likely to be linked to your depressed thoughts and feelings. For example, you might become convinced that you've committed an unspeakable crime.

These kinds of experiences can feel very real to you at the time, which may make it hard to understand that these experiences are also symptoms of your depression. They can also be quite frightening or upsetting, so it's important to seek [treatment and support](#).

You might feel worried that experiencing psychotic symptoms could mean you get a new diagnosis, but psychosis can be a symptom of depression. Discussing your symptoms with your doctor can help you get the right support and treatment.

See our pages on [psychosis](#) for more information.

Self-harm and suicide

If you are feeling low, you might use self-harming behaviours to cope with difficult feelings. Although this might make you feel better in the short term, self-harm can be very dangerous and can make you feel a lot worse in the long term. See our pages on [self-harm](#) for more information.

“The hardest thing for me is I can never forget I am a carer. Even if I get some ‘me time’, first I have to organise alternative care and if I can’t get it, I have to cancel what I wanted to do.”

When you're feeling really low and hopeless, you might find yourself thinking about suicide. Whether you're only thinking about the idea, or actually considering a plan to end your life, these thoughts can feel difficult to control and very frightening.

If you're worried about acting on thoughts of suicide, you can call an ambulance, go straight to A&E or call the [Samaritans](#) for free on 116 123 to talk.

See our pages on [how to cope with suicidal feelings](#) for more information.

The risk of isolation

It can sometimes be hard to explain your thoughts and feelings to others. You might find it difficult to talk about your depression and instead you might cut yourself off from other people. The more overwhelming your symptoms, the more isolated and lonely you might become.

Without treatment and support, depression can have an impact on your relationships, work, finances and overall health, so it's important to get help as early as possible. See our pages on [treatment and support](#) for more information.

Anxiety

It's very common to experience depression and anxiety together. Some symptoms of depression can also be symptoms of anxiety, for example:

- feeling restless
- being agitated
- struggling to sleep and eat.

See our pages on [anxiety](#) for more information.

“I flit between states of anxiety and depression. At times, each seems to fuel the other.”

Can depression be a symptom of other mental health problems?

Depression can be a part of several mental health problems, such as:

- [bipolar disorder](#)
- [borderline personality disorder](#) (BPD) and other [personality disorders](#)
- [schizoaffective disorder](#).

If feelings of low mood or suicidal thoughts are the reason you first speak to your doctor about your mental health, your GP might offer you treatment for depression without realising that you are also experiencing other symptoms.

If you think you're experiencing other symptoms, you can talk to your doctor about this to make sure you're getting the right treatment to help you. See our pages on [seeking help for a mental health problem](#) for information on how to make sure your voice is heard, and what you can do if you're not happy with your doctor.

What causes depression?

There are several ideas about what causes depression. It can vary a lot between different people, and for some people a combination of different factors may cause their depression. Some find that they become depressed without any obvious reason.

In this section you can find information on the following possible causes of depression:

- childhood experiences
- life events
- other mental health problems
- physical health problems
- genetic inheritance
- medication, recreational drugs and alcohol
- sleep, diet and exercise.

Is depression caused by a chemical imbalance?

The human brain is extremely complicated. Because antidepressants work by changing brain chemistry, some people have assumed that depression is caused by changes in brain chemistry which are then 'corrected' by the drugs. Some doctors may tell you that you have a 'chemical imbalance' and need medication to correct it.

But the evidence for this is very weak, and if changes to brain chemistry occur, we don't know whether these are the result of the depression or its cause.

Childhood experiences

There is good evidence to show that going through difficult experiences in your childhood can make you vulnerable to experiencing depression later in life. This could be:

- physical, sexual or emotional abuse
- neglect
- the loss of someone close to you
- traumatic events
- an unstable family situation.

Research shows that going through lots of smaller challenging experiences can have a bigger impact on your vulnerability to depression than experiencing one major traumatic event.

Difficult experiences during your childhood can have a big impact on your [self-esteem](#) and how you learned to cope with difficult emotions and situations. This can make you feel less able to cope with life's ups and downs, and lead to depression later in life.

[NAPAC](#) support anyone who experienced abuse in childhood – including sexual, physical and emotional abuse, and neglect.

“I first experienced depression at 15, after psychological abuse and domestic violence (both myself and my mother) at the hands of my father, for many years.”

Life events

In many cases, you might find your depression has been triggered by an unwelcome, stressful or traumatic event. This could be:

- losing your job or unemployment
- the end of a relationship
- [bereavement](#)
- major life changes, like changing job, moving house or getting married
- being physically or sexually assaulted
- being bullied or abused.

“I started to feel that depression really took a hold after a torrid time in my job, where I was bullied – I just crumbled.”

It's not just negative experiences that cause depression, but how we deal with them. If you don't have much support to help you cope with the difficult emotions that come with these events, or if you're already dealing with other difficult situations, you might find that a low mood develops into depression.

“My depression seems to flare up during times when I am stressed and isolated from other people.”

When does grief become depression?

Grief, and the low mood that comes with it, is a natural response to losing someone or something we love. How long your grief, or bereavement, lasts will be individual to you. This period of feeling low is referred to as [bereavement](#).

But if you feel that what you're experiencing might be something more than just grief, you can talk to your doctor about it.

You might want to try bereavement counselling first, as this may be more helpful for you than general treatment for depression. [Cruse Bereavement Care](#) offers support and counselling for anyone affected by bereavement.

“For me, it started when my mother died. After struggling and burying things deeper, I finally cracked.”

Other mental health problems

If you experience another mental health problem, it's common to also experience depression. This might be because coping with the symptoms of your mental health problem can trigger depression. You may find you experience depression if you also experience:

- [anxiety](#)
- [eating problems](#)
- [PTSD](#).

Physical health problems

Poor health can contribute to your risk of developing depression. Many health problems can be quite difficult to manage, and can have a big impact on your mood. These could be:

- chronic (long-term) physical health problems
- life-threatening physical illnesses
- physical health problems that significantly change your lifestyle.

You might be offered support for your mental health at the same time as you are treated for a physical health problem, as part of your overall treatment.

There are some physical health problems that can cause depression:

- conditions affecting the brain and nervous system
- hormonal problems, especially thyroid and parathyroid problems
- symptoms relating to the menstrual cycle or the menopause
- low blood sugar
- sleep problems.

If you think any of the above conditions apply to you, make sure your doctor knows about them. Some can be diagnosed by simple blood tests – your doctor may suggest these are done to help make the right diagnosis, or you can ask for blood tests if you think they may be relevant.

Genetic inheritance

Although no specific genes for depression have been identified, research has shown that if you have a close family member with depression, you are more likely to experience depression yourself.

While this might be caused by our biology, this link could also be because we usually learn behaviour and ways of coping from the people around us as we grow up.

Medication, recreational drugs and alcohol

Depression can be a side effect of a lot of different medicines. If you are feeling depressed after starting any kind of medication, check the patient information leaflet to see whether depression is a side effect, or ask your doctor. If you think a drug is causing your depression, you can talk to your doctor about taking an alternative, especially if you are expecting your treatment to last some time.

Alcohol and recreational drugs can both cause depression. Although you might initially use them to make yourself feel better, or to distract yourself, they can make you feel worse overall. See our pages on [the mental health effects of recreational drugs and alcohol](#) for more information.

Sleep, diet and exercise

A poor diet and lack of sleep and exercise can affect your mood, and make it harder for you to cope with difficult things going on in your life.

Although a poor diet, or not getting enough sleep or exercise, cannot directly cause depression, they can make you more vulnerable to developing it.

See our pages on [food and mood](#), [sleep problems](#) and [physical activity](#) for more information.

What can I do to help myself for depression?

Experiencing depression can be very difficult, but there are steps you can take that might help. This section has some suggestions for you to consider:

- talk to someone you trust
- try peer support
- try mindfulness
- look after your physical health
- try to keep active
- keep a mood diary
- spend time in nature
- practise self-care.

Some people find these ideas useful, but remember that different things work for different people at different times. Only try what you feel comfortable with, and try not to put too much pressure on yourself. If something isn't working for you (or doesn't feel possible just now), you can try something else, or come back to it another time.

Talk to someone you trust

It might feel hard to start talking about how you are feeling, but many people find that just sharing their experiences can help them feel better. It may be that just having someone listen to you and show they care can help in itself.

If you aren't able to open up to someone close to you, the [Samaritans](#) run a 24-hour helpline that you can call to talk to someone confidentially.

[Read Jess' blog about how talking about her depression made her feel less alone.](#)

"[What helps is] surrounding myself with friends and family who understand without pointing it out, who treat me normally but recognise that everyday life can be a struggle sometimes."

Try peer support

Peer support brings together people who've had similar experiences to support each other. Many people find it helps them to share ideas about how to stay well, connect with others and feel less alone. You could:

- Contact a specialist organisation. For example, you can find details of support groups, forums and helplines on the [SANE](#) and [CALM](#) websites.
- Join [Elefriends, Mind's supportive online community](#).
- Contact [Mind's Infoline](#) and ask about support groups near you. Alternatively, you could use [our interactive map to find your local Mind](#), and contact them directly.

See our pages on [peer support](#) for more information about what peer support involves, and how to find peer support that suits you. If you're new to online peer support, you might find it helpful to read our information on [online mental health](#).

[Read Sue's blog about finding a place to fit in at her local peer support group.](#)

"[I find reading other people's experiences makes me feel less like I'm alone in this. It's actually made me feel more comfortable."

Try mindfulness

Mindfulness is a way of giving your full attention to the present moment. Some studies show that practising mindfulness can help to manage depression.

Some structured [mindfulness-based therapies](#) have also been developed to treat these problems more formally. For example, the [National Institute of Health and Care Excellence](#) (NICE) recommends mindfulness-based cognitive therapy for the management of depression.

See our pages on [mindfulness](#) for more information about what it involves and how to get started.

“Mindfulness does help me with my mental health issues. It's not the cure and it won't work every single time, but it has helped me to alleviate anxiety and depression by centring my thoughts.”

Look after your physical health

Experiencing depression can make it hard to find the energy to look after yourself. But taking steps to look after your physical health can make a difference to how you feel:

- **Try to get good sleep.** For lots of people who experience depression, sleeping too little or too much can be a daily problem. Getting good sleep can help to improve your mood and increase your energy levels. See our pages on [coping with sleep problems](#) for tips to help.
- **Think about your diet.** Eating regularly and keeping your blood sugar stable can make a difference to your mood and energy levels. See our pages on [food and mood](#) for more tips.
- **Try to do some physical activity.** Many people find exercise a challenge but activities like yoga, swimming or walking can be a big boost to your mood. If you don't feel confident doing exercise, you could start off with smaller activities - such as gentle chair-based exercises in your own home - and build from there. See our pages on [physical activity and your mental health](#) for more information.
- **Try to look after your hygiene.** When you're experiencing depression, it's easy for hygiene to not feel like a priority. But small things, like taking a shower and getting fully dressed whether or not you're going out of the house, can make a big difference to how you feel.
- **Try to avoid recreational drugs and alcohol.** While you might want to use recreational drugs or alcohol to cope with difficult feelings about yourself, in the long run they can make you feel worse and can prevent you from dealing with underlying problems. We have [more information about how recreational drugs and alcohol can affect your mental health](#).

[Read Karl's blog about how exercise helped him manage his depression.](#)

“I try to keep active, even if that's just getting out of bed, washed and ready before 10am, so that the days don't become an endless blur of nothingness.”

Try to keep active

- **Try joining a group.** This could be anything from a community project or a sports team to a hobby group. The important thing is to find an activity you enjoy, or perhaps something you've always wanted to try, to help you feel motivated.
- **Try new things.** Trying something new, like starting a new hobby, learning something new or even trying new food, can help boost your mood and break unhelpful patterns of thinking and behaviour.
- **Try volunteering.** Volunteering, or just offering to help someone out, can make you feel better about yourself and less alone. Your local [Volunteer Centre](#) and the charity [Do-It](#) can help match you with a volunteering opportunity in your area.
- **Set realistic goals.** Try to set yourself achievable goals, like getting dressed every day or cooking yourself a meal. Achieving these things can help you feel good and boost your self-confidence, and help you move on to bigger goals.

[Read Vidura's blog about how street dancing helped him treat his depression.](#)

Keep a mood diary

Keeping a mood diary can help you keep track of any changes in your mood, and you might find that you have more good days than you think. It can also help you notice if any activities, places or people make you feel better or worse. There are many freely available, including diaries from [Bipolar UK](#) and [MoodPanda](#).

Spend time in nature

Spending time in nature has been found to help with mental health problems like depression. For example, research into ecotherapy, a type of formal treatment which involves doing activities outside in nature, has shown it can help with mild to moderate depression. This might be due to combining regular physical activity and social contact with being outside in nature. See our information on nature and mental health for more tips.

Practise self-care

Taking time to look after yourself, such as doing something you enjoy, can help to support your recovery and improve your quality of life. Take a look at our information on [improving your self-esteem](#), [improving your wellbeing](#) and [managing stress](#) for further tips.

"I've made a list of things I usually enjoy, like knitting or playing the guitar, and I try to do little bits of these activities when I'm feeling low."

What treatments are there for depression?

There are various treatments that have been found to help with depression. This section covers:

- self-help resources
- talking treatments
- medication
- coming off medication
- alternative treatments
- treatment for severe and complex depression
- ECT
- repetitive transcranial magnetic stimulation.

There is also information that you may find useful if a treatment isn't helping you to feel better.

Remember: you have a right to be involved in your treatment.

The sort of treatment you're offered for depression will depend on how much your symptoms are affecting you, and it should take into account your personal preference for what sort of treatment you find helps you.

See our pages on [seeking help for a mental health problem](#) for more information on speaking to your doctor and having your voice heard.

"I really struggled with the SSRIs, even though my GP told me that was the only course of action. They made me feel worse than I did to start with, then incredibly tired. I fought for a referral for CBT and in the end it saved me."

Self-help resources

A self-help resource might be the first treatment option your doctor offers you, especially if your depression is mild. This is because it's available quite quickly, and there's a chance it could help you to feel better without needing to try other options.

Self-help could be delivered through:

- **A self-help programme.** For example, your GP might recommend you work through a self-help programme, often called a self-help manual. A healthcare professional should provide you with support and check your progress, either face-to-face or over the phone.
- **A computer-based CBT programme for depression.** Your GP might refer to this as computerised cognitive behavioural therapy (CCBT). Some people find CCBT helps them understand their depression and challenge negative thoughts. Beating the Blues is an example of a CCBT programme that you might find helpful.
- **A physical activity programme.** Your GP might recommend that you join a group exercise class. These are specifically designed for people with depression and run by qualified professionals.

Talking treatments for depression

There are many different talking treatments that can be effective in treating depression:

- [cognitive behavioural therapy](#) (CBT)
- group-based CBT
- interpersonal therapy (IPT)
- behavioural activation
- psychodynamic psychotherapy
- behavioural couples therapy – if you have a long-term partner, and your doctor agrees that it would be useful to involve them in your treatment.

Your doctor or mental health professional can talk through the options available in your area and help you find the right kind of talking treatment for you. Unfortunately, we know that in many places NHS waiting lists for talking treatments can be very long.

Our talking therapy and counselling page has more detail about these therapies, and information on how to access them – through the NHS, charities and privately.

In England, you may be able to refer yourself for therapy via [the Improving Access to Psychological Therapies](#) (IAPT) programme.

Should I stop therapy if I start to feel better?

If you're currently receiving a talking treatment, you don't have to stop just because you're feeling better. You can discuss your mood with your therapist and talk about what options might be right for you.

[NICE guidelines](#) recommend [CBT](#) or [mindfulness-based cognitive therapy](#) to help you stay well if *you've had episodes of depression in the past*.

"Talking things through with a counsellor or therapist really helps me to see things more rationally and make connections between reality and inside my head"

Medication for depression

If self-help, computerised cognitive behavioural therapy or physical activity have not helped you, you might also be offered an **antidepressant** medication, either on its own or in combination with a talking treatment. There are different types of antidepressant:

- [selective serotonin reuptake inhibitors \(SSRIs\)](#)
- [serotonin and norepinephrine reuptake inhibitors \(SNRIs\)](#)
- [tricyclics and tricyclic-related drugs](#)
- [monoamine oxidase inhibitors \(MAOIs\)](#)
- [other antidepressants](#)

Different people find different medications most helpful. You can talk to your doctor about your options – you might find you need to try out a few different types of medication before you find the one that works for you. See our pages on [antidepressants](#) for more information.

"Antidepressants have helped to put me in a place where I was more able to cope with counselling. This required a lot of hard work and I had to accept a completely different way of thinking"

Coming off medication

If you are taking medication for depression, it's important not to stop suddenly. Withdrawal symptoms from antidepressants can be difficult to cope with, and stopping suddenly can be dangerous. See our pages on [coming off antidepressants](#) and [coming off psychiatric medication](#) for more information.

If you decide to try coming off your medication, it's very important to:

- get support, preferably from others who have come off successfully and from a professional who understands the process

- find out the possible risks and how to minimise them
- come off gradually, over a period of time.

[NICE guidelines](#) recommend that you continue to take your antidepressants for at least six months after your episode of depression ends. If you've experienced several episodes of depression before, you might want to keep taking your medication if you feel it could help you prevent another episode.

"I've had three experiences of reducing/coming off medication all together with my GP: one was a successful reduction that led to 5 years full time work whilst the other two led to what I believe was 'rebound psychosis' (rather than 'a return to my underlying illness'). I believe this happened because I came off medication too quickly ie over months rather than over a year or more"

Alternative treatments

There are also options you can try instead of, or alongside, medication and talking treatments. These include:

- [arts therapies](#)
- [alternative and complementary therapies](#)
- [mindfulness](#)
- [ecotherapy](#)
- [peer support](#).

Your doctor may be able to refer you to some of these. You can also contact your local Mind to find out what they have available.

"Taking care of my diet and body, talking and alternative methods work far better for me"

Treatment for severe and complex depression

If your depression is severe and complex, your doctor should refer you to specialist mental health services. They can discuss with you the following options:

- **Trying talking treatments and medication again.** Your healthcare team may suggest a different medication, or a combination of drugs with other treatments.
- **Medication for psychotic symptoms.** If you are experiencing depression with psychotic symptoms, your healthcare team may prescribe antipsychotic medication alongside your current treatment plan. See our pages on [psychosis](#) and [antipsychotics](#) for more information.
- **Crisis resolution services.** A crisis resolution and home treatment (CRHT) team is a team of mental health professionals who can support you at your home during a mental health crisis, rather than going into hospital. See our page on [crisis services](#) for more information.
- **Hospital admission.** If you are severely depressed and at risk of suicide, self-harm or self-neglect, you may need to be cared for in hospital as an in-patient. A hospital can provide a safe and supportive environment if you are in a state of distress. See our page on [hospital admission](#) for more information.

“A majority of the treatments I tried were ineffective – but at crisis point, about to be admitted to a psychiatric hospital, I started Interpersonal Psychotherapy and Sertraline. I can honestly say that they saved my life.”

ECT

Electroconvulsive therapy (ECT) should only be considered a treatment option for depression in extreme circumstances.

According to [NICE guidelines](#), this could be if you're experiencing a long and severe period of depression, and either:

- other treatments have not worked, or
- the situation is life-threatening.

If you feel like you're in this situation, your doctor should discuss this option with you in a clear and accessible way before you make any decisions.

See our pages on [ECT](#) for more information about this treatment and when it can be performed. Also see our legal pages on [consent to treatment](#) and the [Mental Capacity Act 2005](#) for information about your legal rights regarding treatment.

Repetitive transcranial magnetic stimulation

According to [NICE guidelines](#), you might be offered repetitive transcranial magnetic stimulation for severe depression that has not responded to other treatments.

Treatment involves daily sessions of about 30 minutes, lasting for a number of weeks.

The NICE guidelines say that it's safe enough and works well enough to be offered on the NHS. Currently this treatment is available at a limited number of NHS trusts and some private clinics.

Is neurosurgery ever used to treat depression?

Neurosurgery for mental disorder (NMD) is only performed very rarely, in extreme circumstances. NMD is only offered if all other treatments have failed and cannot ever be performed without your consent. See our pages on [NMD](#) for more information.

What if I don't feel better?

Different things work for different people, so if a particular medication or talking treatment doesn't work for you, your doctor should offer an alternative.

It's important to remember that recovery is a journey, and it won't always be straightforward. You might find it more helpful to focus on learning more about yourself and developing ways to cope, rather than trying to get rid of every symptom of your depression.

How can friends and family help?

This information is for friends and family who want to support someone with depression.

The support of friends and family can play a very important role in someone recovering from depression. Here are some suggestions for how you can help.

- **Support them to get help.** You can't force anyone to get help if they don't want it, so it's important to reassure your loved one that it's OK to ask for help, and that there is help out there. See our pages on [how to support someone else to seek help for their mental health](#) for more information.
- **Be open about depression.** Lots of people can find it hard to open up and speak about how they're feeling. Try to be open about depression and difficult emotions, so your friend or family member knows that it's OK to talk about what they're experiencing.

“The best things that friends and family can do is simply listen. They often don't need to say anything, just being willing to listen to your problems makes you feel less alone and isolated”

- **Keep in touch.** It might be hard for your loved one to have the energy to keep up contact, so try to keep in touch. Even just a text message or email to let them know that you're thinking of them can make a big difference to how someone feels.

“Talking... not even talking about how I felt. Just talking about stupid things that didn't matter over coffee, without pressure and knowing that I can talk about the tough stuff if I want to”

- **Don't be critical.** If you've not experienced depression yourself, it can be hard to understand why your friend or family member can't just 'snap out of it'. Try not to blame them or put too much pressure on them to get better straight away – your loved one is probably being very critical and harsh towards themselves already. Mind's information about depression can help you learn more about it.

“Just a simple call or text asking me how I am helps. I don't want sympathy, just to know they are there if I need them”

- **Keep a balance.** If someone is struggling, you might feel like you should take care of everything for them. While it might be useful to offer to help them do things, like keep on top of the housework or cook healthy meals, it's also important to encourage them to do things for themselves. Everyone will need different support, so talk to your friend or family member about what they might find useful to have your help with, and identify things they can try to do themselves.
- **Take care of yourself.** Your mental health is important too, and looking after someone else could put a strain on your wellbeing. See our pages on [coping as a carer](#), [managing stress](#) and [maintaining your wellbeing](#) for more information on how to look after yourself.

“Listen carefully, don't judge and most of all, don't say, ‘Cheer up.’ It's just not that simple. Sometimes solutions are unnecessary, so don't feel you have to provide one.”

Useful contacts

Mind's services

- **Helplines** – all our helplines provide information and support by phone and email. Our Blue Light Infoline is just for emergency service staff, volunteers and their families.
 - Mind's Infoline – 0300 123 3393, info@mind
 - Mind's Legal Line – 0300 466 6463, legal@mind
 - Blue Light Infoline – 0300 303 5999, bluelightinfo@mind
- **Local Minds** – there are over 140 local Minds across England and Wales which provide services such as [talking treatments](#), [peer support](#), and [advocacy](#). [Find your local Mind here](#), and contact them directly to see how they can help.
- **Elefriends** is a supportive online community for anyone experiencing a mental health problem. See our [Elefriends page](#) for details.

Anxiety UK

03444 775 774 (Monday–Friday 9.30am–5.30pm)

anxietyuk.org.uk

Advice and support for people living with anxiety.

Big White Wall

bigwhitewall.com

Online community for adults experiencing emotional or psychological distress. You need a paid subscription or NHS referral to join, although it is free for people living in some areas.

British Association for Counselling and Psychotherapy (BACP)

01455 883 300

bacp.co.uk

Provides a directory of accredited therapists.

Campaign Against Living Miserably (CALM)

0800 58 58 58 (5pm-midnight daily) Webchat (5pm-midnight daily)

thecalmzone.net

Offers support for men who are feeling down or in crisis.

Cruse Bereavement Care

0808 808 1677

cruse.org.uk

Charity providing information and support after someone you know has died.

Depression UK

depressionuk.org

A self-help organisation made up of individuals and local groups.

Do-it

do-it.org

UK volunteering opportunities, including environment and conservation options.

The National Association for People Abused in Childhood (NAPAC)

0808 801 0331 (Monday-Thursday 10am-9pm, Friday 10am-6pm)

napac.org.uk

A charity supporting adult survivors of any form of childhood abuse. Provides a support line and local support services.

National Institute for Health and Clinical Excellence (NICE)

nice.org.uk

Information and clinical guidelines on treatments for depression.

NCT

0300 330 0700 (Support Line: 8am to midnight daily)

nct.org.uk

National charity for parents, providing information and support for all parents.

NHS

nhs.uk

Provides information on treatments for depression available through the NHS.

Papyrus HOPELineUK

0800 058 41 41 (weekdays 10am-10pm, weekends 2pm-10pm, bank holidays 2pm-5pm)

07786 209697 (text message service)

pat@papyrus-uk.org

papyrus-uk.org

Confidential support for under-35s at risk of suicide and others who are concerned about them. Calls and texts are free from all providers and do not appear on bills.

Samaritans

116 123 (Freephone)_

jo@samaritans.org samaritans.org

Freepost RSRB-KKBY-CYJK

PO Box 90 90

Stirling FK8 2SA

24-hour emotional support for anyone feeling down or struggling to cope.

Sane Support Forum

sane.org.uk

Mental health forum for discussion and mutual support.

United Kingdom Council for Psychotherapy (UKCP)

020 7014 9955

psychotherapy.org.uk

Provides a directory of accredited psychotherapists and psychotherapeutic counsellors.