



Depression



Centre for Addiction and Mental Health
Centre de toxicomanie et de santé mentale



Citizenship and
Immigration Canada

Citoyenneté et
Immigration Canada

Mental illness and addictions are 24-hour-a-day problems.

Now there's 24-hour-a-day help.

HOURS OF OPERATION

Visit us at:
Suite 3B,
219 Dufferin Street,
Toronto

Walk-in:
9 a.m. – 5 p.m.
Monday – Friday

Support Line:
(Available in English only.)
3 p.m. – 9 p.m.
Monday – Friday

Information Line:
Staff-assisted calls:
9 a.m. – 9 p.m.
Monday – Friday

Recorded messages:
24 hours a day,
7 days a week

**Ontario Toll-free
Information and
Support Line:**

1 800 463 6273
or
in Toronto,
416 595 6111

Web site:
www.camh.net/McLaughlin



If you need someone to talk to about mental health or addiction problems, or just have a question, we can help.

Simply pick up the phone, your mouse or drop by our location in Toronto.

Real people with reliable answers. Totally confidential.

Sometimes knowing *who* to ask for help is hard.

Now finding *where* to ask isn't.



The R. Samuel McLaughlin Addiction and Mental Health Information Centre provides:

Up-to-date information on mental health and addiction problems, trends, facts, programs, treatments, and prevention strategies through a toll-free Information and Support Line, a Web site, recorded messages and storefront.

Confidential and anonymous telephone support.

Our recorded messages span a wide range of topics, including:

- *facts on mental health, alcohol and drugs*
- *information guides*
- *help for families.*

Information about prevention, support and treatment resources in Ontario.



Centre for Addiction and Mental Health
Centre de toxicomanie et de santé mentale
There is help. There is hope.

Information is available in English and French.
Some services are available in a variety of other languages.



Dear Readers,

The Centre for Addiction and Mental Health is proud to publish this series of mental health and addiction stories in photographs. It is our hope that the stories - which describe drinking, gambling, depression, drugs, and post-traumatic stress - will dispel common misconceptions about these illnesses, infuse hope that help is available and also stimulate action to secure such support.

Throughout the duration of this project, we collaborated with diverse community organizations to better understand the needs of each group. We hope that each language version provides helpful and accurate addiction and mental health information to communities that may not have had full access to such materials.

We would like to thank the many dedicated individuals, and community partners, who have given their time to assist us with the best approaches in disseminating this material for their respective communities. We also thank the Ontario Region Settlement Branch of Citizenship and Immigration Canada, which generously funded this initiative.

My colleagues and I hope that these resources help you to meet your information needs in an effective and informative manner. We expect, however, that there is room for improvement. Please do not hesitate to suggest ways of improving these materials, or strengthening access to such information, if you feel that your community might be better served. Many thanks for your kind consideration.

Akwatu Khenti
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DEVELOPMENT

The Centre for Addiction and Mental Health (CAMH) managed the OASIS contract. The project manager was Antoine Dérose, Project Consultant for Central East Region, and Saroj Bains was the photo-novellas' Project Co-ordinator/Consultant. For the reprint and new translations, the project manager was Akwatu Khenti, Director of International Health, and Norma Hannant was the photo-novellas' Project Co-ordinator/Consultant.

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CENTRE FOR ADDICTION AND MENTAL HEALTH PROJECT TEAM

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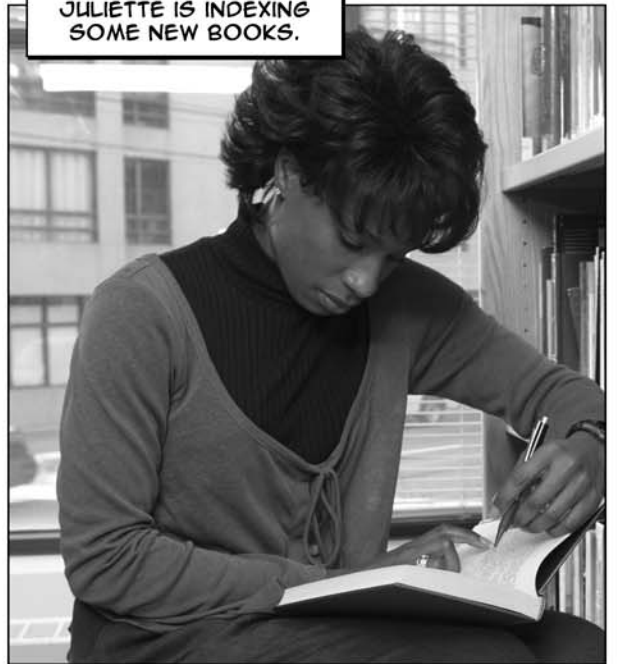
CAST

Juliette – Karen Currie
Juliette's Husband – Peter Cunningham
Juliette's Daughter – Shireen Biggart
Rosie/Marie-Jo – Diane Gardish
Doctor – Sophia Tieu
Young Employee – Kirsten Sibert

AFTERNOON -
SCHOOL LIBRARY



JULIETTE IS INDEXING
SOME NEW BOOKS.



GOOD
AFTERNOON,
JULIETTE. HOW
ARE YOU TODAY?

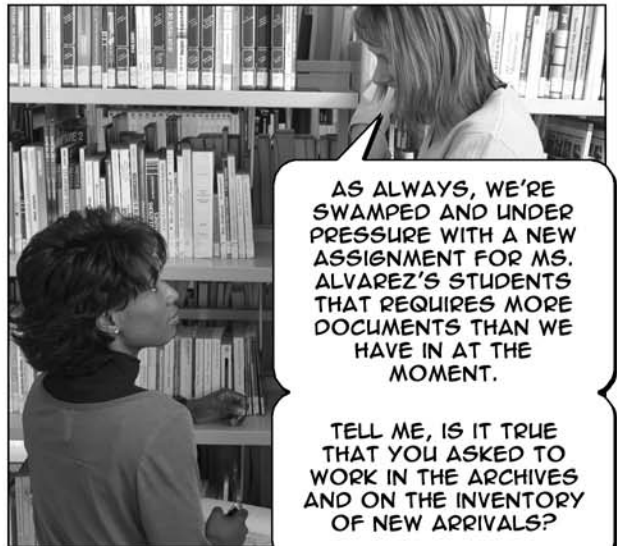
FINE.

HOW ARE YOU?
HOW ARE THINGS
GOING?



AS ALWAYS, WE'RE
SWAMPED AND UNDER
PRESSURE WITH A NEW
ASSIGNMENT FOR MS.
ALVAREZ'S STUDENTS
THAT REQUIRES MORE
DOCUMENTS THAN WE
HAVE IN AT THE
MOMENT.

TELL ME, IS IT TRUE
THAT YOU ASKED TO
WORK IN THE ARCHIVES
AND ON THE INVENTORY
OF NEW ARRIVALS?



BUT DON'T YOU FEEL
LONELY, CLOSED IN HERE
ALL DAY? YOU'RE SO ALIVE
AND WARM. YOU MUST MISS
IT, THE CONTACT WITH THE
STUDENTS AND
COLLEAGUES, DON'T YOU?

YOU KNOW, THIS JOB GIVES ME
A BIT OF TIME TO THINK AND
DREAM. IT'S QUITE PLEASANT
NOW AND THEN. AND YOU'RE
RIGHT THERE, I CAN SEE YOU
THROUGH THE WINDOW.

MMM, HMM.

WELL...



THEY ARE INTERRUPTED BY A
YOUNG EMPLOYEE.



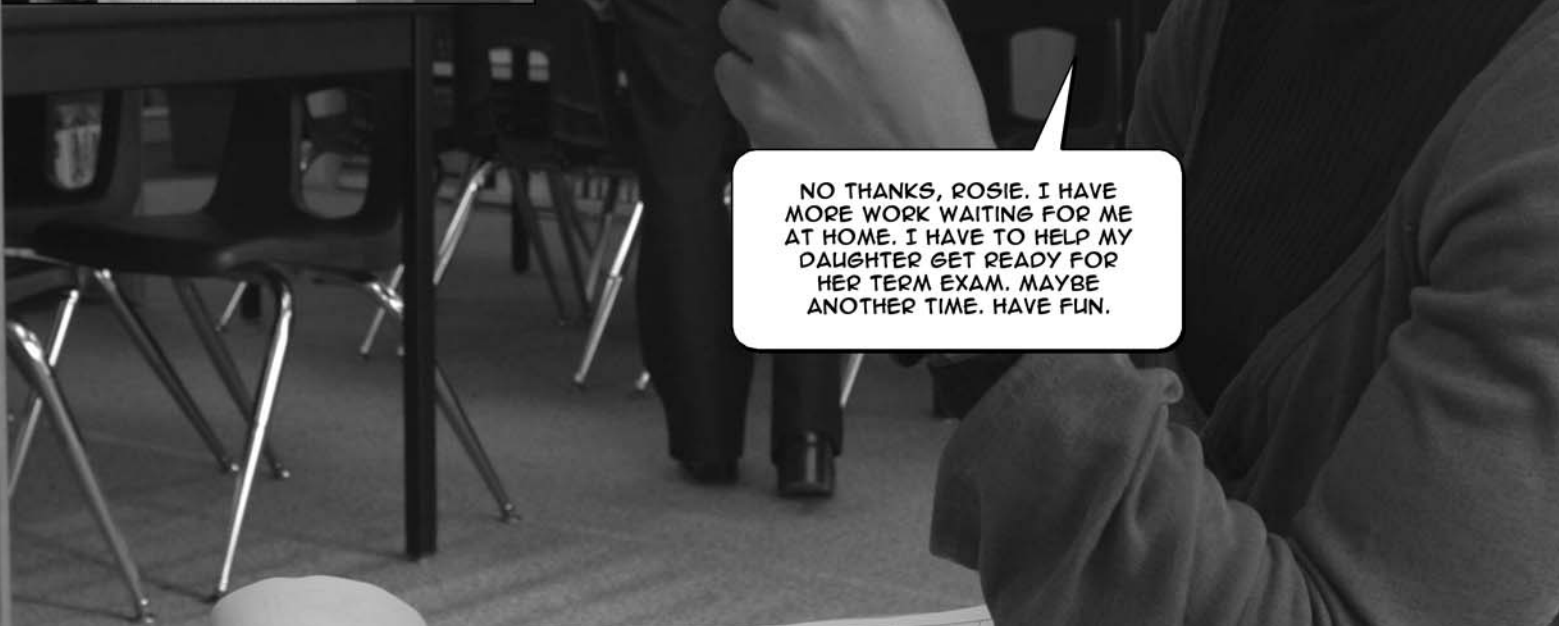
COMING!



JULIETTE, COME
WITH US AFTER
WORK. RAVIDA,
TANIA, MARIE AND
I ARE ALL GOING
TO GET A COFFEE
DOWN ON THE
CORNER. THAT
WILL GIVE US THE
CHANCE TO CHAT
A LITTLE.



NO THANKS, ROSIE. I HAVE
MORE WORK WAITING FOR ME
AT HOME. I HAVE TO HELP MY
DAUGHTER GET READY FOR
HER TERM EXAM. MAYBE
ANOTHER TIME. HAVE FUN.



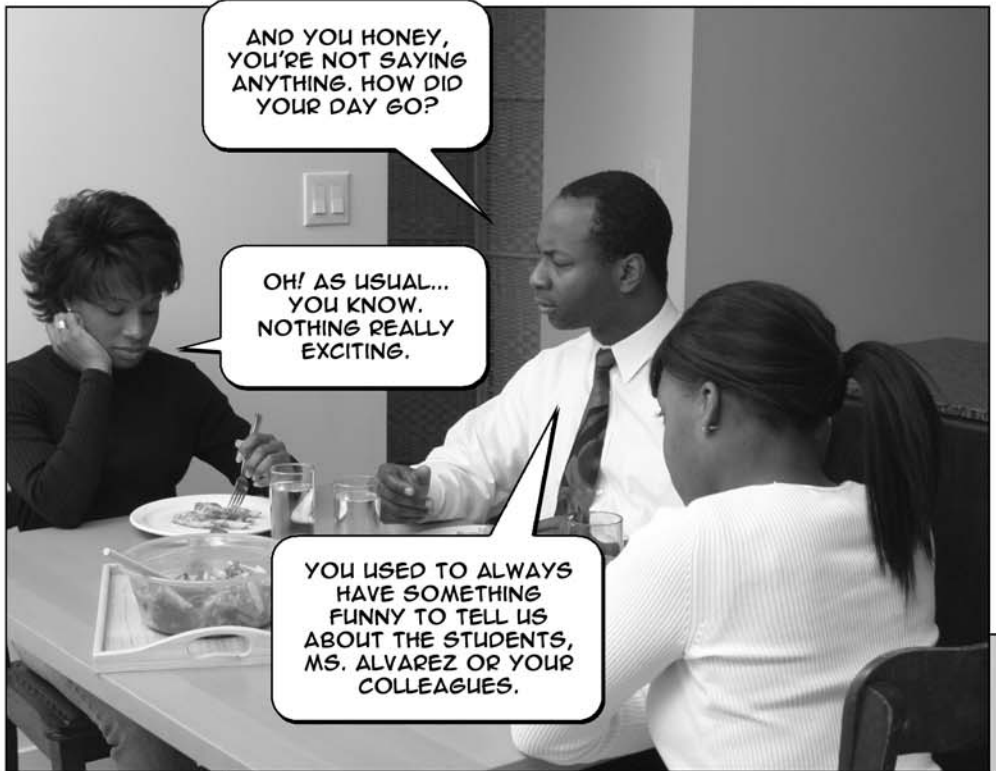
THE FOLLOWING
MORNING AT JULIETTE'S
APARTMENT



DINNERTIME AT JULIETTE'S APARTMENT



AND YOU HONEY, YOU'RE NOT SAYING ANYTHING. HOW DID YOUR DAY GO?



OH! AS USUAL... YOU KNOW. NOTHING REALLY EXCITING.

YOU USED TO ALWAYS HAVE SOMETHING FUNNY TO TELL US ABOUT THE STUDENTS, MS. ALVAREZ OR YOUR COLLEAGUES.

COME ON MOM, WHO WROTE SOMETHING DIRTY ON MR. LA PAGE'S DESK AGAIN? NO! TELL US AGAIN WHAT ROSIE DID WHEN SHE GOT A BOOK BACK LATE FROM A TEACHER.



ARE YOU NOT FEELING WELL, HONEY?



I THINK I'M A BIT TIRED, THAT'S ALL.

DO YOU THINK YOU'RE COMING DOWN WITH THE FLU?



DON'T WORRY. I'M GOING TO GO TO BED EARLY, AND THEN I'LL FEEL BETTER. I'LL GIVE YOU SOME HELP ON THE WEEKEND FOR YOUR EXAM. GOOD NIGHT.



IN THE BEDROOM

JULIETTE, I'M WORRIED ABOUT YOU. YOU'RE NOT YOURSELF, YOU'RE TIRED ALL THE TIME AND YOU AVOID PEOPLE'S QUESTIONS. YOU DON'T INVITE PEOPLE OVER ANY MORE AND YOU NEVER WANT TO COME OUT WITH US. YOU DON'T EVEN TALK TO ME ANY MORE ABOUT YOUR GYM!

YOU'RE BOTHERING ME WITH ALL OF YOUR CHATTER. THERE'S NOTHING WRONG WITH ME. I'M JUST A BIT TIRED RIGHT NOW. LIKE EVERYBODY ELSE. IT'S BEEN A LONG WINTER, AND I'M NOT SLEEPING WELL. TURN OFF THE LIGHTS AND LET ME GET TO SLEEP. WE'LL TALK TOMORROW.



12:04



2:15AM



2:17AM



2:24AM



2:26AM



2:30AM



SIGNS OF DEPRESSION

THESE SYMPTOMS SEEM VERY FAMILIAR TO WHAT I'M EXPERIENCING.

DIFFERENT NEUROTRANSMITTERS, SAME RESULTS

THE BRAIN IN SCIENCE

THE FRONTAL CORTEX, where dopamine produces feelings of joy, is the brain's command center. It's the seat of the intellect, where dopamine normally helps regulate mood and attention. In depression, dopamine levels are low, which can lead to feelings of sadness and loss of interest in activities.

THE HIPPOCAMPUS, which helps regulate mood and memory, is also affected. In depression, the hippocampus may shrink, leading to memory problems and feelings of hopelessness.

THE PINEAL GLAND, which produces melatonin, is also affected. In depression, melatonin levels are low, which can lead to sleep problems.

THE ADHYPHYSAL GLAND, which produces cortisol, is also affected. In depression, cortisol levels are high, which can lead to weight gain and fatigue.

THE THYROID GLAND, which produces thyroid hormone, is also affected. In depression, thyroid hormone levels are low, which can lead to fatigue and weight gain.

THE PANCREAS, which produces insulin, is also affected. In depression, insulin levels are low, which can lead to weight gain and fatigue.

THE SPLEEN, which filters toxins from the blood, is also affected. In depression, the spleen may enlarge, leading to feelings of fullness and discomfort.

THE LIVER, which processes toxins, is also affected. In depression, the liver may become inflamed, leading to feelings of fatigue and discomfort.

THE KIDNEYS, which filter waste from the blood, are also affected. In depression, the kidneys may become inflamed, leading to feelings of fatigue and discomfort.

THE BLADDER, which stores urine, is also affected. In depression, the bladder may become inflamed, leading to feelings of urgency and discomfort.

THE RECTUM, which stores feces, is also affected. In depression, the rectum may become inflamed, leading to feelings of urgency and discomfort.

THE ANUS, which expels feces, is also affected. In depression, the anus may become inflamed, leading to feelings of urgency and discomfort.

THE VAGINA, which is part of the female reproductive system, is also affected. In depression, the vagina may become inflamed, leading to feelings of discomfort and pain.

THE PENIS, which is part of the male reproductive system, is also affected. In depression, the penis may become inflamed, leading to feelings of discomfort and pain.

THE TESTES, which produce sperm, are also affected. In depression, the testes may become inflamed, leading to feelings of discomfort and pain.

THE OVARIES, which produce eggs, are also affected. In depression, the ovaries may become inflamed, leading to feelings of discomfort and pain.

THE UTERUS, which houses the fetus, is also affected. In depression, the uterus may become inflamed, leading to feelings of discomfort and pain.

THE CERVIX, which is the lower part of the uterus, is also affected. In depression, the cervix may become inflamed, leading to feelings of discomfort and pain.

THE VAGINA, which is the canal leading from the cervix to the outside, is also affected. In depression, the vagina may become inflamed, leading to feelings of discomfort and pain.

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FAMILY CLINIC -
2 MONTHS LATER



JULIETTE? THE
DOCTOR WILL SEE
YOU NOW.

GOOD
MORNING,
JULIETTE, HOW
MAY I HELP
YOU?



WELL, FOR A FEW MONTHS I'VE
BEEN FEELING AS IF I HAVE NO
ENERGY. I'VE BEEN HAVING A
LOT OF TROUBLE
CONCENTRATING.

MY COLLEAGUES AND MY
FAMILY ARE AFTER ME FOR
SHUTTING MYSELF AWAY
AND, FOR MY PART, I'M NOT
GOING OUT OR EATING WITH
THEM ANYMORE. I JUST
DON'T FEEL WELL...




CAN YOU
BE MORE
SPECIFIC?

WELL, I OFTEN FEEL LIKE
CRYING FOR NO REASON. WHEN
I HEAR MY DAUGHTER AND
HUSBAND TALKING ABOUT WHAT
THEY DO DURING THE DAY, I
FEEL THAT MY LIFE IS
UNINTERESTING AND THAT I'M
NOT CONTRIBUTING A LOT TO
SOCIETY.

THIS HAPPENS FOR NO
PARTICULAR REASON. I FEEL
VERY ISOLATED. I TRY TO
MAKE MYSELF BUSY, BUT I
JUST END UP EATING ALL THE
TIME. SUDDENLY I CAN
BARELY FIT IN MY SKIRTS, I
FEEL FAT AND UGLY AND
UNABLE TO DO ANYTHING
ABOUT IT...





YOU MAY BE SUFFERING FROM DEPRESSION. IT'S A PROBLEM THAT A LOT OF US HAVE IN COMMON, BUT IT CAN BE DEALT WITH.

I'M GOING TO ASSIGN YOU A COUNSELLOR. SHE WILL BE ABLE TO ANSWER ALL YOUR QUESTIONS AND SHE WILL BE ABLE TO SEE, TOGETHER WITH YOU, WHAT OPTIONS ARE BEST FOR YOU.

THAT'S RIGHT, I READ AN ARTICLE IN A MAGAZINE. IT TALKED ABOUT IT. CAN YOU TELL ME EXACTLY WHAT IT IS?

SOME PATIENTS USE MEDICATION. OTHERS NEED TREATMENT WITH A THERAPIST. YOU MIGHT ALSO WANT TO PARTICIPATE IN GROUP SESSIONS. PASTOR TOUSAIN'T RUNS A GROUP EACH WEEK FROM THE CHURCH BASEMENT. I'LL GIVE YOU SOME PAMPHLETS TO READ FOR BACKGROUND INFORMATION. BUT FIRST WE NEED TO FIND OUT IF YOU ARE SUFFERING FROM DEPRESSION.

IT'S REALLY GOOD YOU TOOK THIS FIRST STEP. I HOPE YOU FEEL BETTER SOON. I'M AVAILABLE TO YOU IF YOU HAVE ANY FURTHER QUESTIONS.

WHAT SHOULD I DO IN THE MEANTIME?

DON'T BE TOO HARD ON YOURSELF ABOUT ANYTHING. YOU COULD ALSO TALK ABOUT IT WITH YOUR FAMILY, INFORM THEM ABOUT THE CHANGE IN YOUR BEHAVIOUR.

IT'S IMPORTANT THAT THEY UNDERSTAND WHAT IS GOING ON WITH YOU, SO THEY CAN HELP AND SUPPORT YOU. YOU ARE GOING TO NEED IT, IT'S NOT EASY. HERE'S INFO ABOUT SUPPORT GROUPS FOR THOSE DEALING WITH DEPRESSION IN THE FAMILY.

THANK YOU.



SEVERAL WEEKS LATER

HOW DID IT GO?



VERY WELL. SINCE STARTING MY VISITS WITH THE COUNSELLOR, IT SEEMS THAT THE PROBLEMS ARE BEING RESOLVED. MAINLY I DON'T FEEL SO SAD. THE COUNSELLOR IS VERY GOOD, LISTENS WELL AND IS VERY INTERESTING. SHE COMES FROM A FAMILY OF NINE AS WELL.

I'M GLAD TO HEAR YOU TALKING LIKE THAT. YOU LOOK BETTER.



I BUMPED INTO AN OLD STUDENT FROM SCHOOL. IT'S INCREDIBLE HOW MUCH HE'S GROWN, HE IS SO TALL.

HE TOLD ME THAT PASTOR TOUSAINT RUNS A GRIEF MANAGEMENT GROUP HERE. APPARENTLY AFTER THE DEATH OF HIS FATHER HE WASN'T WELL, SO HE JOINED THE GROUP.



I AM GLAD I FEEL BETTER. I FEEL THAT I HAVE SO MUCH MORE ENERGY TO SPEND WITH OUR FAMILY.

WHAT IS DEPRESSION?

Everyone feels sadness at times. This is a normal feeling following a disappointment, the loss of a loved one or any other unhappy event. Usually the sadness lessens with time. Sometimes, the sadness turns into a depression that persists and becomes a health problem.

Depression can take many forms. Here are the most common symptoms.

SYMPTOMS OF DEPRESSION

A person who is depressed has some of these symptoms:

- changes in appetite and weight
- sleep problems
- loss of interest in work, hobbies, people; loss of feeling for family members and friends
- feeling useless, hopeless, or overly guilty
- dwelling on failures or inadequacies; loss of self-esteem
- obsessive thoughts (putting too much importance on something, or not being able to stop thinking about it)
- feeling restless or too tired and weak to do anything
- slowed thinking, forgetfulness, trouble concentrating and making decisions
- decreased sex drive
- crying easily, or needing to cry but not being able to
- thoughts about suicide or killing someone.

People who have fewer than five of these symptoms for at least two weeks may be diagnosed with minor depression.

If someone has five or more of these symptoms for at least two weeks, it is called a major depressive episode. Some people have many symptoms, such as headaches, which cannot be attributed to a physical cause.

DEPRESSION IN WOMEN

Major depression occurs in 10 per cent to 25 per cent of women – almost twice as many as men. Hormonal factors may contribute to the increased rate of depression in women, particularly:

- during changes in the menstrual cycle
- during pregnancy
- after giving birth or miscarrying
- in the years leading to menopause and menopause itself, when periods stop.

DEPRESSION IN MEN

Men with depression are more likely than women to feel irritable, angry and discouraged. This can make it harder to recognize depression in men.

Men are more likely to die of suicide attempts due to depression. Although more depressed women attempt suicide than men, four times as many men actually kill themselves.

Many people with depression also use alcohol or drugs in the hope to feel better. This usually worsens depression.

IS THERE HELP FOR MY DEPRESSION?

Many people have depression for a long time before they visit a doctor or mental health professional. An untreated episode of depression can last 18 months or longer. However, once treatment is begun, significant improvement may be seen in two to six weeks.

People with depression are often seen first by their family doctor or general practitioner. In milder cases, family doctors can assess and treat you as an outpatient with medication and counselling. The doctor may refer you to other community resources.

If your depressive symptoms are more severe, you may be referred to a psychiatrist. You may be treated as an outpatient or, if necessary, admitted to a hospital.

The most commonly used treatments for depression are psychotherapy and antidepressant medication. In deciding on the best treatment, the doctor will think about:

- how severe your symptoms are
- possible “triggers” that bring on the depression
- any treatments for depression you have had in the past.

Some people also seek out alternative forms of treatment, such as herbs. It is best to discuss alternative treatments with your doctor to make sure they do not interfere with the medications.

WHERE TO GET HELP

Here are some places you can contact if you or someone you know needs help for depression:

Centre for Addiction and Mental Health
R. Samuel McLaughlin Addiction and Mental Health Information Centre
Toronto: 416 595-6111
Toll-free number: 1 800 463-6273
Website: www.camh.net

Telehealth Ontario
Toll-free: 1 866 797-0000
TTY: 1 800 387-5559
Website: www.health.gov.on.ca/english/public/program/telehealth/telehealth_mn.html

Ontario Women’s Health Network
Toronto: 416 408-4840
Toll-free: 1 877 860-4545
Website: www.owhn.on.ca

Mood Disorders Association of Ontario
Toronto: 416 486-8046
Toll-free: 1 888 486-8236
Website: www.mooddisorders.on.ca

Internet Mental Health
Website: www.mentalhealth.com

For information on addiction and mental health issues or other resources, please contact CAMH's R. Samuel McLaughlin Addiction and Mental Health Information Centre:

Ontario toll-free: 1 800 463-6273 • Toronto: 416 595-6111

To make a donation, please contact:
Centre for Addiction and Mental Health Foundation
Tel.: 416 979-6909 • E-mail: foundation@camh.net

If you have questions, compliments or concerns about services at CAMH, please call our Client Relations Co-ordinator at:
Tel.: 416 535-8501 ext. 2028.

Website: www.camh.net



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