

Family Education Series

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Understanding Anxiety and Depression

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Brainstorm

- What do we already know about depression and anxiety?
- Jot some things down, share in chat or briefly describe in group.



Anxiety



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What is Depression?

- Depression is a common illness that negatively affects how you feel, the way you think and how you act. Depression symptoms can vary from mild to severe but the main symptom of depression is a sad mood that is present for at least two weeks. Other symptoms of depression include sleep problems, changes in appetite or weight, fatigue, loss of interest in activities, difficulties with memory or concentration, and thoughts of suicide or self-harm. Someone suffering with depression cannot just “snap out of it”. Depression is more than just feeling sad or down and requires treatment.
- According to the DSM-5 to meet criteria for a diagnosis of major depression, symptoms must include either depressed mood or lack of interest.

- <https://www.psychiatry.org/patients-families/depression/what-is-depression>



What is Depression?

Depression is a mental illness that negatively impacts how a person feels, thinks and acts. It is often characterized by feelings of sadness, loneliness and/or loss of interest and pleasure in things a person once enjoyed. Depression can also produce a number of emotional and physical symptoms that can affect a person's overall well-being and functioning (APA, 2013). Depression is considered to be a disorder of mood. Individuals who are depressed, describe low mood that has persisted for longer than two weeks.



Depression

- Depression is a common illness worldwide, with an estimated 3.8% of the population affected, including 5.0% among adults and 5.7% among adults older than 60 years (1). Approximately 280 million people in the world have depression. At its worst, depression can lead to suicide. <https://www.who.int/news-room/fact-sheets/detail/depression>



Types of Depression

- Major Depressive Disorder
- Persistent Depressive Disorder
- Mild or Moderate Depression



What is anxiety?

- We all experience occasional anxiety in our daily lives. But anxiety disorders involve more than temporary worry or fear. For a person with an anxiety disorder, the anxiety does not go away and can get worse over time, interfering with daily activities such as job performance, school work, and relationships.
- There are specific types of anxiety disorders but all types include **irrational and excessive fears, apprehension, and difficulty managing daily tasks as a result of the excessive worry. Other symptoms of anxiety include avoiding feared situations, excessive physical reactions (e.g. heart racing, nausea, and dizziness), having anxious thoughts, and making anxious predictions (e.g. I'm going to say the wrong thing and humiliate myself) or engaging in safety behaviors.**

<https://www.nimh.nih.gov/health/topics/anxiety-disorders/index.shtml>



What is Anxiety?

- Fight/flight response, anxiety is an important emotion that serves to protect us from harm. For people with anxiety the fight/flight response becomes activated in situations where no real danger is present, and the thoughts and behaviors that accompany this perpetuate the distress.
- An anxiety disorder is usually diagnosed when a person cannot manage to function adequately in their daily life due to the frequency and severity of the symptoms of anxiety. It is important to keep in mind however, that some anxiety is functional, enabling us to get to work on time, meet demands, cross busy streets and remain aware of our surroundings



What is the Cause of these Disorders?

- **Biological Factors** -based on family studies, it has been suggested that individuals may inherit a vulnerability to developing an anxiety or depressive disorder
- **Psychological Factors**- having this genetic vulnerability does not imply that those individuals will develop an anxiety disorder. A great deal depends on the lifestyle of that person, the types of life stressors they have encountered and their early learning. If we were taught to fear certain neutral situations it can become difficult to extinguish these learned patterns of behaviour. Therefore, we may have developed certain patterns of thinking and behaving which contribute to the development of an anxiety disorder. In addition environmental factors and attachment styles in childhood can also increase the vulnerability to developing negative core beliefs that can lead to depressive symptoms.

<https://www.cci.health.wa.gov.au/What-is-Anxiety.pdf>



Stress Diathesis Model

FIGURE 1 REPRESENTING DIATHESIS-STRESS WITH THE CUP ANALOGY



How to Assess for Anxiety and Depression

- A family Physician, Psychiatrist, Psychologist or Nurse Practitioner can provide a diagnosis of depression or anxiety disorder.
- There are a number of scales that can help assess if a person may be facing symptoms of depression or an anxiety disorder.



Scales to Assess

- The PHQ-9 and the GAD-7 are the two most commonly used scales to measure symptoms of depression and anxiety.
- Even without a diagnosis many people can access evidence based treatment for depression or anxiety through a variety of programs throughout Ontario.

Types of Anxiety Disorders

- Generalized Anxiety Disorder (GAD)
- Social Anxiety Disorder (SAD)
- Specific Phobias
- Panic Disorder
- Health Anxiety
- OCD
- PTSD



Treatments for Anxiety and Depression

- Medications such as SSRI or mood stabilizers or benzodiazepines, sometimes antipsychotic medications
- Cognitive Behavioral Therapy
- Interpersonal Psychotherapy
- Acceptance and Commitment Therapy, Mindfulness



Medications

SSRIS-

Examples: Zoloft, Prozac, Paxil, Cipralex, Celexa

SNRIS-Cymbalta, Pristiq, Effexor, Wellbutrin

Mood Stabilizers Lithium, Epival,

Sometimes antipsychotics ie. Seroquel, Abilify,
Latuda etc.



ECT

- Electroconvulsive Therapy (ECT) is a safe and effective medical treatment for certain psychiatric conditions such as major depressive disorder, bipolar disorder and some episodes of schizophrenia. The procedure is done under general anesthesia. Patients are assessed by the ECT treatment team in collaboration with the attending psychiatrist. Treatment is administered by a specially trained team of Psychiatrists, Anesthetists and Registered Nurses.



rTMS

- rTMS (or TMS), is a non-invasive treatment option for those who have treatment resistant depression and are unable to receive ECT but would benefit from a similar type of treatment. It delivers a series of short magnetic pulses directed at the brain to stimulate nerve cells. Patients are able to return to their regular activities immediately following treatment, which lasts about three to eight minutes.



Interpersonal Psychotherapy

- **Interpersonal psychotherapy (IPT)** is a brief, attachment-focused **psychotherapy** mostly used to treat major depression that centers on resolving **interpersonal** problems and symptomatic recovery. It is an empirically supported treatment follows a highly structured and time-limited approach and is intended to be completed within 12–16 weeks.
- Relates Depression to the Interpersonal Context by relating depressive symptoms to interpersonal relationships and conducting the Interpersonal Inventory
- Rational for IPT is that interpersonal issues are connected to depressive symptoms, events in ones environment affect mood and moos affects social roles
- Events---behaviors---mood



Interpersonal Psychotherapy

- Major Problem Areas
 - Interpersonal Role Disputes
 - Grief
 - Role Transitions
 - Interpersonal Deficits (Lonely/Isolated)

Choose area related to current depression--→ set goals



Cognitive Behavioral Therapy

- Cognitive Behavior Therapy (CBT) is a form of psychotherapy that was developed about 40 years ago by Dr. Aaron Beck as a highly effective treatment for depression. Since then, because of CBT's success in treating depression, it has been adapted to be used with other problems as well.
- CBT focuses on identifying the thoughts that lead to problem feelings and actions. Through countless research studies, CBT has been shown to be highly effective in the treatment of a wide range of problems. Some of these include struggles with depression and sadness, eating, excessive worry, obsessive compulsive disorders, panic, anger, social anxiety, generalized anxiety, procrastination, perfectionism, substance use, fears, psychosis etc.



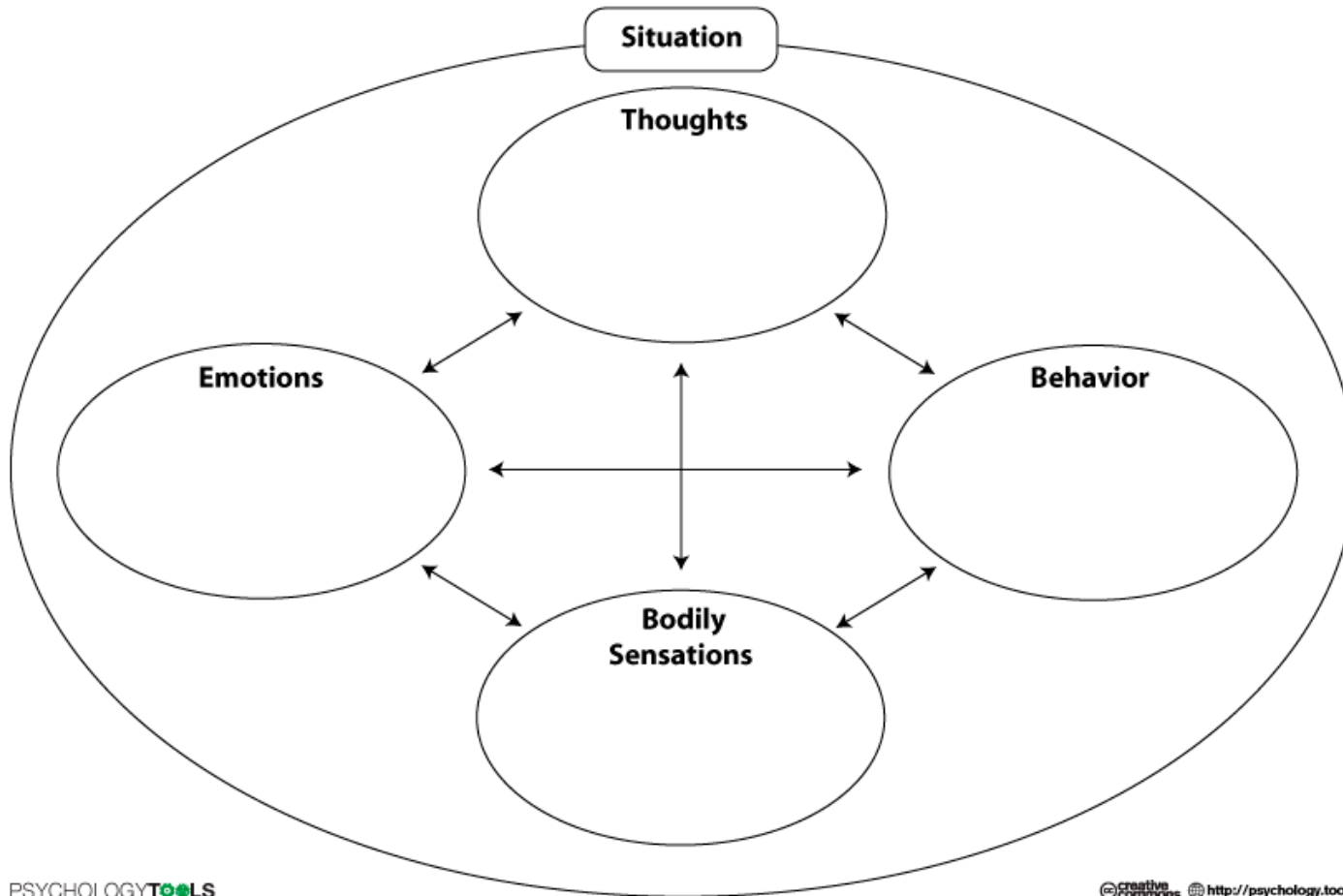
Cognitive Behavioral Therapy

- CBT teaches individuals how to understand their problems by using the 5 factor model. The therapy also validates individuals' experiences and their ways of thinking about themselves the world and others, based on their life experiences and other environmental factors. CBT is a present focused therapy that teaches clients how to think about things more flexibly to reduce intensity of distress.
- CBT also looks at the impact on how behaviors have the consequence of enhancing one's distress in the long term and how to change behaviors to reduce distress and challenge thinking.



Cognitive Behavioral Therapy

Cross Sectional Formulation



Thoughts

Thinking

Individuals who are depressed or anxious tend to think in certain ways, and this thinking is an essential feature of their difficulties. Those who are depressed tend to see themselves in a negative light. They dwell on how bad they feel, how the world is full of difficulties, how hopeless the future seems and how things might never get better. People who are depressed often have a sense of guilt, blaming themselves for everything, including the fact they think negatively. Often their self-esteem and self confidence become very low.

Individual's with anxiety disorders tend to experienced perceived threats and a perception of being unable to cope.



Physical

Physical

Some people experience physical symptoms of depression. Sleep patterns could change. Some people have difficulty falling asleep, or have interrupted sleep, others sleep more and have difficulty staying awake. Appetite may decline and weight loss occurs, while others eat more than usual and thus gain weight. Sexual interest may decline. Energy levels may fall, as does motivation to carry out everyday activities.

Anxiety can cause racing heart, sweating, shaking, stomach upset, tension, dizziness, blushing.



Behaviors

Depressed individuals may stop doing the things they used to enjoy because they feel unmotivated or lethargic. Depression affects how people interact with others many depressed people express concern about their personal relationships. They may become unhappy and dissatisfied with their family, and other close, relationships. They may feel shy and anxious when they are with other people, especially in a group. They may feel lonely and isolated, yet at the same time, are unwilling or unable to reach out to others, even when they have the opportunities for doing so.

Anxiety can also cause avoidance of certain situations, or can lead to behaviors to reduce distress known as safety behaviors, for example checking, or reassurance seeking or excessive compensatory strategies or ritualization in the case of OCD.

Cognitive Restructuring

- There are a number of tools used to treat depression and anxiety that help individuals to change the way they think when they are depressed or anxious that can help reduce their distress and increase potential for behavioral change. A common tool used is a Thought Record.



Cognitive Behavioral Therapy

Thought Record Sheet – 7 column

Situation / Trigger	Feelings Emotions – (Rate 0 – 100%) Body sensations	Unhelpful Thoughts / Images	Facts that <u>support</u> the unhelpful thought	Facts that provide evidence <u>against</u> the unhelpful thought	Alternative, more realistic and balanced perspective	Outcome Re-rate emotion
<p>What happened? Where? When? Who with? How?</p>	<p>What emotion did I feel at that time? What else? How intense was it?</p> <p>What did I notice in my body? Where did I feel it?</p>	<p>What went through my mind? What disturbed me? What did those thoughts/images/memories mean to me, or say about me or the situation? What am I responding to? What 'button' is this pressing for me? What would be the worst thing about that, or that could happen?</p>	<p>What are the facts? What facts do I have that the unhelpful thoughts are totally true?</p>	<p>What facts do I have that the unhelpful thoughts are NOT totally true? Is it possible that this is opinion, rather than fact? What have others said about this?</p>	<p>STOPP! Take a breath....</p> <p>What would someone else say about this situation? What's the bigger picture? Is there another way of seeing it? What advice would I give someone else? Is my reaction in proportion to the actual event? Is this really as important as it seems?</p>	<p>What am I feeling now? (0-100%)</p> <p>What could I do differently? What would be more effective?</p> <p>Do what works! Act wisely. What will be most helpful for me or the situation? What will the consequences be?</p>

Treating Anxiety Disorders

- Different treatments target different fears as anxiety disorders vary; some treat fear of embarrassment, or uncertainty, or fear of contamination etc.
- If there is a particular anxiety disorder you would like to learn more about please note this in the chat.



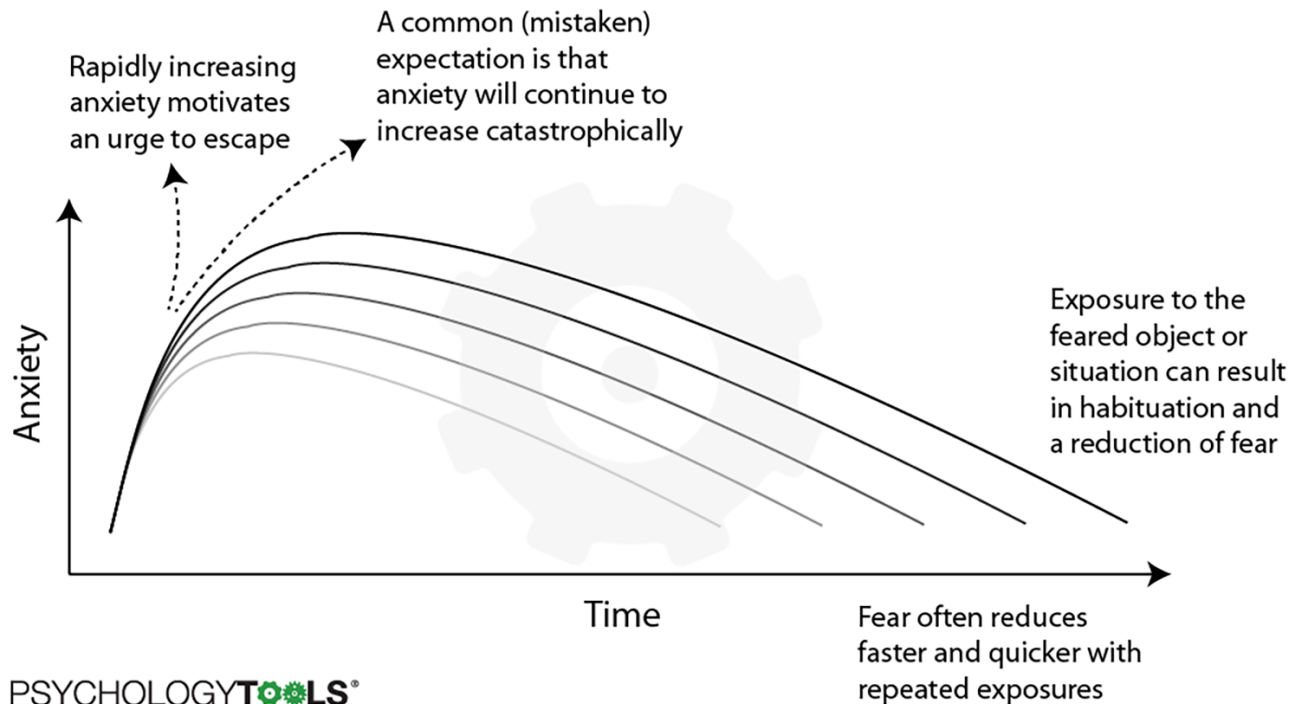
Behavioral Interventions

- When treating Depression Behavioral Activation or Behavioral Experiments are often used to challenge thoughts or predictions and improve mood.
- When treating Anxiety, exposure opportunities also help to challenge predictions and reduce distress over time.



Exposure

- Habituation: stay in situation until fear subsides



Inhibitory Learning

- New theory of exposure treatment for anxiety
- Well researched by Dr. Michelle Craske Psychologist
- Less emphasis on fear reduction like habituation model, more based on new learning and development of new memories that negate previous perceptions of threat.



Supporting a Family Member

- Sometimes it is hard to know what to say when speaking to a loved one about their symptoms. You might fear that if you bring up your worries they will get angry, feel insulted, or ignore your concerns. You may be unsure what questions to ask or how to be supportive.
- If you don't know where to start, the following suggestions may help. **But remember that being a compassionate listener is much more important than giving advice.** You don't have to try to "fix" the person; you just have to be a good listener. Often, the simple act of talking to someone face to face can be an enormous help to someone suffering from depression. Encourage the depressed person to talk about their feelings, and be willing to listen without judgment.
- Don't expect a single conversation to be the end of it. People with depression and anxiety tend to withdraw from others and isolate themselves. You may need to express your concern and willingness to listen over and over again. Be gentle, yet persistent.



Ways to start the conversation:

- "I have been feeling concerned about you lately."
- "Recently, I have noticed some differences in you and wondered how you are doing."
- "I wanted to check in with you because you have seemed pretty down lately."



Avoid Saying things like.....

- You never do anything anymore
- “YOU SHOULD” really get up and shower and go and do something
- YOU NEED to start getting on top of this
- When we are angry sometimes we just want the problem to go away, however this sometimes can make the person feel worse.



Questions you can ask

- "When did you begin feeling like this?"
- "Did something happen that made you start feeling this way?"
- "How can I best support you right now?"
- "Have you thought about getting help?"
- Remember, being supportive involves offering encouragement and hope. Very often, this is a matter of talking to the person in language that they will understand and respond to while in a depressed mind frame.



Supportive comments to say to a loved one

You are not alone in this. I'm here for you.

You may not believe it now, but the way you're feeling will change.

I may not be able to understand exactly how you feel, but I care about you and want to help.

When you want to give up, tell yourself you will hold on for just one more day, hour, minute—whatever you can manage.

You are important to me. Your life is important to me.

Tell me what I can do now to help you.



Questions Comments and Discussion

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Helpful Resources

Mood Disorder Association

<https://www.mooddisorders.ca/>

Family Services of Durham

905 666-6240

Durham Mental Health Services

1800 742 1890

Canadian Mental Health Association

905 436 8760

COPE Mental Health Services

905 668 6223 ext 227



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More Resources and References

- <https://www.cci.health.wa.gov.au/>
- www.psychologytools.ca
- www.anxietycanada.com
- <https://www.psychiatry.org>
- <https://www.nimh.nih.gov>



Where to get help

- www.ontarioshores.ca
- www.lakeridgehealthoshawa.ca
- www.connexontario.ca
- <https://www.psychologytoday.com/ca/therapists>
- https://www.durham.ca/en/living-here/counselling.aspx?_mid_=24458
- http://www.cfsdurham.com/english/Index_1.html

