

Where can I get help?

If none of your usual supports seem to be working, talk to your GP. The earlier a health professional knows what you're going through and treatment begins, the better your chances of recovery and a return to your usual enjoyment of life.

Sometimes, especially if you are feeling down, it is hard to remember exactly what the doctor says. Consider having a supportive friend or whānau member accompany you.

If you don't exercise regularly, ask your GP about a green prescription (a plan to help you be more active).

Treatment for depression may include seeing a counsellor and/or taking medication, such as an antidepressant.

If you are prescribed medication, remember that you are entitled to know its name, what symptoms it is treating, how long it will be before it takes effect, how long you have to take it for, and what the side effects are. This is very important if you are already taking other medication.

Medication can take a few weeks to start working. If you feel no better after two to three weeks, go back to your GP as something else may suit you better. Don't just stop taking the medication without talking to your doctor first.



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Tips and tools

For free tools to manage stress and lift your mood, see www.smallsteps.org.nz or www.aroawellbeing.co.nz

Helplines

Talking with a trained professional can help.
Call or text **1737** to speak to a trained counsellor, 24/7.
Find other helplines at:
mentalhealth.org.nz/helplines

Further information

Age Concern New Zealand: 0800 65 2 105
www.ageconcern.org.nz

Seniorline: 0800 725 463
www.seniorline.org.nz

Eldernet: www.eldernet.co.nz

Resources

The Mental Health Foundation has a range of free mental health and wellbeing information and resources. Visit shop.mentalhealth.org.nz

Find us online

To find out more about our work, visit:

- ✉ resource@mentalhealth.org.nz
- 🌐 www.mentalhealth.org.nz
- 📷 [mhfnz](https://www.instagram.com/mhfnz)
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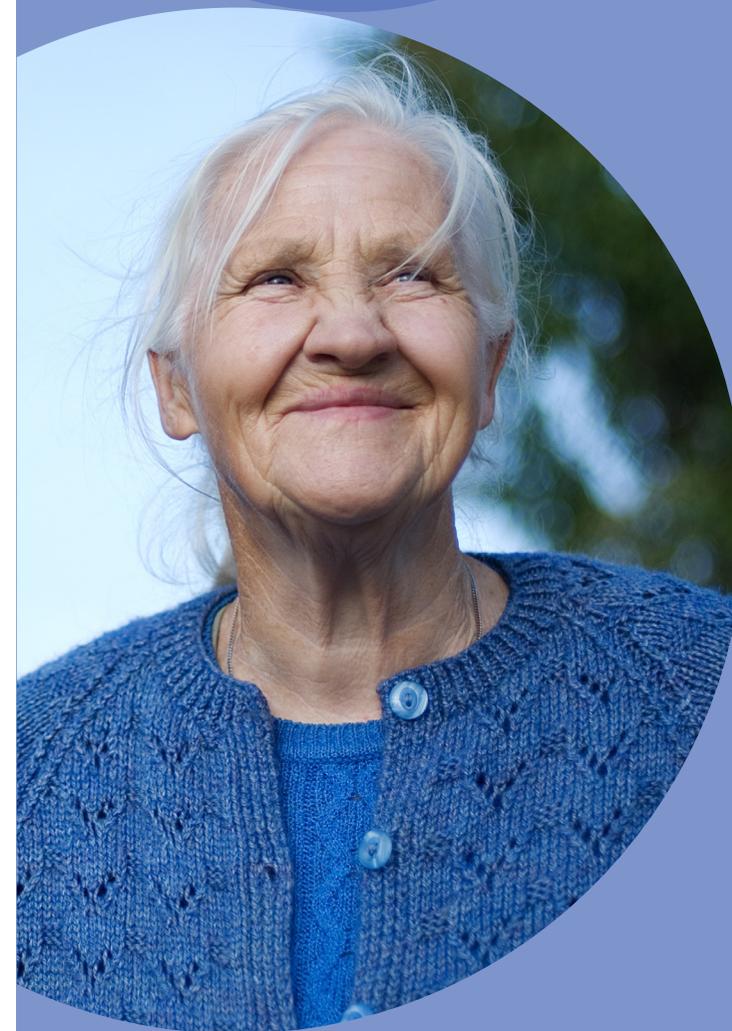
Help us, to help others

The Mental Health Foundation is a charity, and we rely on donations to support our work.
Visit www.mentalhealth.org.nz to find out more.

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DEPRESSION in later life



Depression is more than 'feeling blue' or being 'in the doldrums' for a short while. Depression (mate pāpōuri) means persistent and ongoing unhappiness (pōuritanga).

Many older people and kaumātua experience depression and it can be a risk factor for suicide. Yet, depression often goes undetected and untreated.

Why is depression in later life often not recognised?

- As an older person, you can often compare tough times with much harder periods in your life. You may have learned to 'keep your chin up' and carry on without complaining.
- Many older people and kaumātua don't like to bother their GP about something other than a physical illness. You also may not like the idea of taking more pills.
- Putting troubled feelings into words can feel difficult. You may not know how to mention depression or how you are feeling.
- Those who remember people being placed in asylums and subjected to harsh treatment may be frightened of talking about their mental health.
- Many people think depression is an inevitable part of ageing. Instead, your elder years can be a time to thrive.

What causes depression?

Many factors can contribute to depression: grief, loss, change, loneliness, poverty, illness, reactions to medication and many others. Often depression is caused by a combination of factors. Sometimes, it just seems to come out of nowhere.

What about grief?

The signs of depression and grief can be similar, although people who have experienced both talk about the 'sadness' of grief compared with the 'numbness' or almost non-feeling state of major depression.

Grieving is a natural process. After a period of time it usually lessens or resolves. If you experience persistent distress, which continues for months after a bereavement or loss, you may need support from a doctor or counsellor.

Who is at risk?

People of all ages can experience depression. You may be more at risk if you have had previous episodes of depression, a family history of depression or suicide attempts, have lived with addictions or high substance use, or experienced childhood trauma, responsibilities for caring for others, or chronic or severe physical illness. Loneliness and loss can also increase your risk.

What can I do?

Many older people have developed strategies for dealing with feeling down. These can include gardening, walking in nature, visiting mokopuna (grandchildren), reading a good book, phoning friends or treating yourself to a small luxury. But people can also 'mask' or disguise depression by making themselves really busy and not getting the help they need.

Staying connected and having meaningful interactions with others is of real value. You may find that hobbies or voluntary work contribute to a sense of belonging in your community. Contact some organisations that offer activities and services (see the back page). Connect with others in activities like music, dance, kapa haka, weaving or crafts. Teach others your skills, like cooking or fixing things.

You may find comfort and meaning in spirituality or religious beliefs. Try to look after all aspects of your health: physical (tinana), mental and emotional (hinengaro), spiritual (wairua) and family and social relationships (whānau). These are all things that contribute to positive wellbeing.

Signs of depression

- Feeling sad (pōuri) or down, most of the day, nearly every day and for weeks or longer
- Changes in sleeping patterns
- Loss of appetite, or significant weight loss or gain
- Loss of interest and pleasure in life
- Loss of motivation
- Noticeable changes in behaviour, such as irritability or withdrawing from others
- Feeling hopeless or worthless
- Feelings of guilt
- Pain including headaches, abdominal and other pain for which a doctor can find no cause
- Thoughts of suicide
- Poor concentration, forgetfulness or finding it hard to make decisions.

GPs and mental health professionals recognise these signs as possible indicators of depression, especially if they last for two weeks or longer.

Depression can sometimes affect your short-term memory. You might be worried you have dementia. Your GP will be able to help work out what is going on for you. This is why having a check-up is so important.



Friends and whānau are part of recovery