

PRISCILA MARIANE DE SOUZA

DELFINO

STUDENT NUMBER 2413796

MODULE CODE : LCHS 4008

MODULE NAME : INTRODUCTION PUBLIC HEALTH

TITLE:componente 2 Depression

TEACHER: Tonia Babalola

INTRODUCTION -

Depression is a common mental health disorder characterized by persistent low mood, loss of interest or pleasure, fatigue, and other cognitive and physical symptoms that impair daily functioning (NICE, 2022). According to the World Health Organization, more than 280 million people worldwide live with depression. In the United Kingdom, the Adult Psychiatric Morbidity Survey conducted by the Office for National Statistics reported that 1 in 6 adults experienced symptoms of common mental disorders, including depression, in 2023 (ONS, 2023). Depression is a significant public health issue as it contributes to disability, reduced work productivity, increased use of health services, and has wider social impacts on families and communities (NHS, 2024). Early identification and access to effective treatment are essential to reduce the burden of depression. This report will explore how depression is measured and monitored in the UK, how it is controlled, its consequences in the community, and the Health and Social Care support available.

2.1 How is depression measured and monitored in the UK?*

In the UK, depression is measured and monitored through standardized tools and national data collection systems. According to NICE guideline NG222, General Practitioners use validated questionnaires such as the Patient Health Questionnaire-9 (PHQ-9) to assess the severity of depressive symptoms and to monitor treatment progress (NICE, 2022). The PHQ-9 is widely used in primary care and NHS Talking Therapies services to provide consistent measurement across the health system.

At a national level, monitoring is conducted by NHS Digital through the NHS Talking Therapies for Anxiety and Depression programme, formerly known as IAPT. This service collects monthly data on referrals, treatment outcomes, and recovery rates, which are published to track service performance and identify areas of need (NHS Digital, 2024). In addition, population-level monitoring is carried out by the Office for National Statistics through surveys such as the Adult Psychiatric Morbidity Survey. These surveys provide prevalence data on depression in England and help inform public health policy and resource allocation (ONS, 2023). Together, these systems ensure that depression is measured at both individual and population levels to guide service planning and delivery in the UK.

Researchers are studying the causes of depression to find solutions that improve quality of life and provide the best possible comfort for those suffering from depressive episodes—a condition affecting thousands of people in the UK and worldwide. Various factors play a significant role in patients' quality of life; understanding them offers a chance for a better life and helps in delivering care that yields superior mental health outcomes. Depression can be caused by chemical changes in the brain—making this research vital for the well-being of those undergoing treatment—and can also be hereditary. It may be triggered by life events, such as trauma; certain types of trauma can permanently affect the brain, impairing learning and productivity. Additionally, other medical conditions can lead to the development of depression over time. Because there can be distinct triggers, this research is crucial for ensuring humane and dignified treatment for patients experiencing symptoms of depression. Depression can co-occur with other medical conditions—such as heart disease or cancer, as well as other mental health disorders—and lifestyle factors play a significant role in its development. Early diagnosis and treatment, particularly with the support of friends and family, are essential for a successful recovery and the restoration of complete well-being.

2.2 How is depression controlled?*

In the UK, depression is controlled through a stepped care model as recommended by NICE guideline NG222 (2022). This approach ensures that treatment is matched to the severity of the condition and that resources are used efficiently across NHS services.

At the lowest level, individuals with mild depression are supported through guided self-help, physical activity programmes, and online resources such as the NHS "Every Mind Matters" campaign. For moderate depression, the primary treatment offered is psychological therapy, particularly Cognitive Behavioural Therapy (CBT), delivered through NHS Talking Therapies services.

For moderate to severe depression, a combination of psychological therapy and antidepressant medication prescribed by GPs is recommended. NICE (2022) also advises regular monitoring using tools such as PHQ-9 to assess response to treatment and adjust care as needed.

Prevention and early intervention are further supported by public health campaigns and workplace mental health initiatives. By following national guidelines, the NHS aims to provide timely and evidence-based care to reduce the impact of depression on individuals and communities.

By starting treatment as soon as the diagnosis is made—and carrying it out safely with the help of a support network—you should begin to feel better within a few weeks, though achieving optimal results may take longer. It is important to maintain contact with the doctor overseeing your care; informing them if you are not improving is the best way to ensure you receive safe, high-quality treatment. Symptoms can persist for weeks, months, or even years, so early treatment can help prevent depression from returning.

2.3 Consequences of depression in the community*

Depression has significant consequences for individuals, families, and the wider community in the UK. At an individual level, depression can lead to reduced quality of life, social isolation, and increased risk of physical health problems (NHS, 2024). It is also a leading cause of disability and reduced work productivity.

In the workplace, depression contributes to absenteeism and presenteeism, resulting in economic costs for employers and the economy. The Office for National Statistics highlights the link between mental health and employment, showing that common mental disorders are associated with higher rates of unemployment and sickness absence (ONS, 2023).

Within families and communities, depression can affect relationships and increase the burden on informal carers. It also places pressure on Health and Social Care services, including GP appointments, NHS Talking Therapies, and emergency services. Furthermore, severe depression is associated with an increased risk of self-harm and suicide, which has a profound impact on communities (NICE, 2022).

Addressing these consequences requires coordinated support from health services, employers, and community organizations to promote recovery and reduce stigma.

2.4 Health and Social Care support available*

In the UK, a range of Health and Social Care support is available for individuals experiencing

depression. Primary care services, led by General Practitioners, are the first point of contact. GPs assess symptoms, provide initial treatment, and refer patients to specialist services where needed (NICE, 2022).

Although depression can manifest differently in each person, it is crucial for someone in crisis to undergo treatment whenever possible, as the patient's condition can affect the local community, as well as family and friends. Furthermore, having a support network is important for a patient experiencing a depressive crisis to ensure a healthy and mindful recovery.

NHS Talking Therapies for Anxiety and Depression provides evidence-based psychological treatments such as Cognitive Behavioural Therapy (CBT). This service is free at the point of access and can be accessed via GP referral or self-referral (NHS Digital, 2024). For individuals with moderate to severe depression, medication may be prescribed alongside therapy. Social care support includes community mental health teams, social prescribing, and support from local authorities to help with housing, employment, and daily living. Charities such as Mind and Rethink Mental Illness also play a key role by providing information, peer support groups, and helplines (Mind, 2024). For more severe cases, *Community Mental Health Teams (CMHTs)* offer support including psychiatric assessment, care coordination, and crisis intervention.

Social care support is also important. Local authorities may provide assistance with housing, benefits, and daily living through social workers. In addition, voluntary organisations play a vital role. *Mind* offers information, peer support groups and advocacy, while *Samaritans* provide a 24-hour helpline for people in distress.

These services work together to ensure that individuals receive both medical treatment and social support to manage depression and reduce its impact on the community.

CONCLUSION

In conclusion, depression is a major public health issue in the UK that affects individuals, families, and communities. It is measured and monitored through clinical tools such as PHQ-9 and national surveys conducted by ONS and NHS Digital, which provide essential data for service planning (NICE, 2022; ONS, 2023). The condition is controlled through NICE's stepped care model, offering treatments from self-help to medication and psychological therapy. The consequences of depression are wide-ranging, including impacts on work, relationships, and demand on Health and Social Care services (NHS, 2024). Fortunately, a range of support is available through the NHS, including GP services, NHS Talking Therapies, and community organizations such as Mind. Addressing depression requires continued investment in early intervention, accessible treatment, and public awareness to reduce stigma and improve outcomes for people across the UK.

The NHS also promotes prevention through public health campaigns like "Every Mind Matters", which offers advice on managing stress and improving wellbeing. This multi-level approach ensures that support is available across health, social, and community settings.

Johns Hopkins Medicine. (2026). _Major Depression_. Available at: <https://www.hopkinsmedicine.org/health/conditions-and-diseases/major-depression>
Mental Health Foundation. (2023). *Depression*. Available at: <https://www.mentalhealth.org.uk/explore-mental-health/a-z/depression> [Accessed: 09 August 2026]

Mind. (2024). *Depression*. Available at: <https://www.mind.org.uk> [Accessed: 09 August 2026]

NHS. (2024). *Depression in adults*. Available at: <https://www.nhs.uk/mental->

[health/conditions/depression-in-adults/](#) [Accessed: 09 August 2026]

NHS Digital. (2024). *NHS Talking Therapies for anxiety and depression monthly reports*. Available at: <https://digital.nhs.uk> [Accessed: 09 August 2026]

NICE. (2022). *Depression in adults: treatment and management*. NICE Guideline [NG222]. Available at: <https://www.nice.org.uk/guidance/ng222> [Accessed: 09 August 2026]

Office for National Statistics. (2023). *Adult Psychiatric Morbidity Survey: Mental Health and Wellbeing, England*. Available at: <https://www.ons.gov.uk> [Accessed: 09 August 2026]