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Introduction To Public Health

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Introduction

Depression

Depression is a common mental health disorder that affects how an individual thinks, feels, and behaves. The world health organisation (WHO,2023.) defines depression as a mental health condition characterised by persistent sadness, loss of interest or pleasure in activities, feelings of guilt or low self-worth, disturbed sleep or appetite, low energy and poor concentration. Unlike normal responses to life events, depression is a serious medical condition that can significantly impair an individual's ability to function at work, in education, and within family and social relationships.

The signs and symptoms vary between individuals but commonly include persistent low mood loss of motivation fatigue difficulty concentrating changes in appetite or weight sleep disturbances, feelings of hopelessness irritability, and reduced self-esteem (National institute of care and excellence (NICE),2022).

Depression represents a major public health challenge due to its high prevalence and impact on families and a wider society. The world health organisation (WHO,2023). estimates that approximately 280 million people worldwide live with depression, making it one of the leading causes of disability globally. In the UK data shows from the office of national statistics (2024) that one in six adults experience moderate to severe depressive symptoms, although prevalence varies according to age, gender and socioeconomic status.

Main body

How is depression measured and monitored

In the UK, there are several approaches used to measure and monitor depression. This includes clinical interviews, standardised questionnaires, and diagnostic criteria. (NHS,2024).

1. PHQ-9 (Patient Health Questionnaire-9) this is the most used depression screening tool in UK primary care and NHS services. Contains nine questions based on symptoms of depression. (National institute for health and care excellence NICE,2022)
2. Beck depression inventory-II(BDI-II) is commonly used in psychological services, research, and specialist mental health settings. Consists of twenty-one questions and measures severity of depressive symptoms. (Beck, Steer and Brown, 1996)
3. Hospital Anxiety and Depression scale (HADS) HADS is frequently used in hospital and outpatient settings, especially for people with physical health conditions. It consists of fourteen questions. Seven measure anxiety, seven measure depression. (Zigmond and Snaith, 1983).
4. Clinical interview using ICD-11 or DSM-5 criteria. A GP, a psychiatrist, or psychologist will carry out structured clinical assessments alongside questionnaires. (World Health Organisation,2022)
5. Core outcome measures in NHS talking therapies. Talking therapies monitor depression using: PHQ-9 for depression and GAD-7 for anxiety. (NHS, 2024)

Risk factors for depression

Depression develops through a combination of biological, psychological, and social factors. The main risk factors are:

1. Family history and genetics. People with close family members who have suffered from depression are at a higher risk. Genetics can increase vulnerability, but it does not always mean someone will develop depression.
2. Previous mental health conditions. A history of mental health disorders can increase likelihood.

3. Stressful life events. Bereavement, relationship breakdowns, job loss or unemployment, financial difficulties, abuse or neglect and serious illness can trigger depression.
4. Chronic physical health conditions. Long-term illnesses such as diabetes, heart disease, cancer, stroke, chronic pain, and neurological conditions can increase the risk of depression.
5. Substance misuse. Such as alcohol and drugs.
6. Personality traits. People who have low self-esteem or worry excessively.
7. Social isolation. Limited social support, loneliness, and living alone.
8. Socioeconomic factors. Poverty, unemployment, poor housing, low educational attainment, and social inequality are associated with depression.
9. Hormonal changes. Pregnancy, postnatal period, menopause, and thyroid disorder can contribute to depression.
10. Adverse childhood experiences (ACEs). Experiences such as physical, emotional, sexual abuse, neglect, domestic violence, and parental substance abuse can cause depression in later life. (NHS, 2024) (World Health Organisation, 2023) (National Institute for Health and Care Excellence, 2022)

Control of depression

The UK uses a range of prevention and early intervention strategies to reduce the risk of depression and improve mental wellbeing

1. Early intervention and access to mental health services. The NHS provides early access to talking therapies, such as cognitive behavioral therapy (CBT), through NHS Talking therapies services. (NHS UK 2024)
2. Mental health promotion and public awareness campaigns. For example, Every Mind Matters is a campaign that encourages people to look after their mental wellbeing through exercise, good sleep, stress management and seeking help early. These campaigns improve mental health literacy and reduce stigma around depression. (gov.uk)
3. The prevention concordat for better mental health. This government strategy promotes collaboration between the NHS, local authorities, schools and community organisations. It aims to strengthen protective factors such as good housing, employment, education, social connections and community support while reducing risk factors including poverty, loneliness, and discrimination. (gov.uk)

4. Support in schools and workplaces. Mental health teams in schools can identify problems early and provide support for young people and children. There are also workplace wellbeing programmes to reduce stress and support employee's mental health (NHS England)
5. Reducing health inequalities. Public health organisations work to address wider social determinants of health, including unemployment, poor housing and
6. financial hardship, which are known risk factors for depression (NHS England)

Health and social care services available to support individuals with depression

Depression affects millions of people across the United Kingdom. A range of statutory, voluntary, and community-based services provide support to help individuals manage symptoms, improve wellbeing, and recover. These services include the National Health Service (NHS), charities, community organisations, crisis helplines, and peer support groups.

1. National health service (NHS)

The NHS is the primary provider of mental health services in the UK. Individuals experiencing depression can access support through their General Practitioner (GP), who can assess symptoms and refer patients to appropriate services. In England, many adults can self refer to NHS Talking therapies, which provide evidence-based treatments such as cognitive behavioural therapy (CBT), Counselling, interpersonal therapy, and guided self-help. Treatment is free at the point of use and may be delivered face to face, online, or over the telephone. The NHS also provide specialist community health teams for people with more severe or complex depression. (NHS England, 2022)

2. Mind

Mind is one of the UK's leading mental health charities. It offers information, emotional support, advocacy, peer support groups, and local community services across England and Wales. Local mind organisations provide counselling, wellbeing programmes, employment support, and social activities to help reduce isolation. Mind also operates telephone and online support services, helping individuals understand depression and access appropriate treatment. (Mind, 2023).

3. Samaritans

Samaritans is a UK charity providing free, confidential, emotional support 24 hours a day, seven days a week. Although it is widely recognised for supporting people in crisis, the organisation also helps individuals experiencing depression, loneliness, or emotional distress. Support is available by telephone, email, and at local branches, allowing people to speak openly without judgement. (mind)

4, SANE

Sane is a national mental health charity offering emotional support through its SANEline helpline, online resources and support forums. It provides guidance for people suffering with depression and their families helping individuals access information and cope with mental health challenges. (Mind, 2023).

5. Community and Peer Support services

Community support groups play an important role in helping people with depression by reducing loneliness and encouraging social interaction. Many local charities, community centres, and voluntary organisations support groups where people can share experiences in a safe and supportive environment. Peer support has been shown to improve confidence, reduce stigma, and encourage recovery. The NHS also recommends peer support alongside professional treatment for depression.

The implications of Depression on the Community

Depression affects not only the individual but also their families, and communities, according to (WHO), Depression is one of the leading causes of disability worldwide and contributes significantly to the global burden of disease (WHO,2023). Its effects extend beyond the individual, creating social, economic, and health related challenges within communities.

1. reduced productivity

Depression reduces a person's ability to concentrate, make decisions, and perform daily tasks effectively. In workplaces and educational institutions, this can lead to absenteeism, reduced productivity (presenteeism), and increased unemployment, ultimately affecting economic growth (WHO, 2023).

2. Increased healthcare costs

Communities experience increased demands on the NHS and social care services. Due to the need for mental health services, medication, hospital admissions, and long-term treatment. Depression is also linked to chronic physical illnesses, which further increase healthcare costs. (National Institute for Health and Care Excellence (NICE),2022).

NHS England (2023) reports increasing referrals to NHS Talking Therapies and specialist mental health services across England.

3. increased risk of poverty and inequality

Depression disproportionately affects disadvantaged communities experiencing poverty, unemployment, poor housing, and social exclusion. These inequalities contribute to poorer physical health and reduced life opportunities.

The marmot review (2020) highlighted that socioeconomic inequalities are closely linked to poorer mental health across England. Marmot et al (2020)

4. impact on UK families emotional and psychological effects

Depression can place considerable emotional strain on family members. Relatives often experience stress, anxiety, guilt, and feelings of helplessness while supporting a loved one with depression. Family relationships may deteriorate due to communication difficulties and emotional withdrawal. According to (NICE,2022), depression often affects interpersonal relationships and family functioning, making recovery more challenging without adequate support.

5. financial burden

Families may experience financial difficulties when an individual with depression is unable to work or requires additional expenses which may include transportation to healthcare appointments, counselling, medication, and informal caregiving responsibilities.

Mental health foundation (2024) reports that poor mental health can reduce employment opportunities and household income, increasing the risk of poverty.

Conclusion

In conclusion, depression is a significant public health issue that extends beyond the individual, creating substantial social, emotional and economic consequences for families and communities across the UK. Families often experience increased caregiving responsibilities , financial strain and relationship difficulties, while

communities face reduced workforce productivity, greater pressure on the NHS and social care services, and increased social inequalities. Although the UK has a wide variety of mental health services and awareness campaigns, barriers such as long waiting times, stigma and unequal access continue to limit effective treatment and recovery. Coordinated action across healthcare, education, employment and community sectors to tackle social determinants of mental health, including poverty, housing and social exclusion is needed to improve long term burden of depression and improve health outcomes and quality of life for individual's families and society.

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