



Mental Health America of Franklin County

2323 W. Fifth Ave. Suite 160, Columbus, OH 43204

Telephone: (614) 221-1441 Fax: (614) 221-1491

info@mhafc.org

www.mhafc.org

Facts About Depression

Men:

- In the United States, depression affects nearly 7% of men (6 million men).ⁱ
- It remains unclear whether depression is actually less common among men, or if men are just less likely to recognize and acknowledge the symptoms than women.
- Four times as many men as women die by suicide in the U.S.ⁱⁱ
- Men often deal with depression by withdrawing from others and throwing themselves into their work, engaging in risky or dangerous behavior, and/or becoming angry, frustrated and abusive.ⁱⁱⁱ

Women:

- Women 18 to 45 years of age account for the largest proportion of people suffering from depression.^{iv}
- Twenty to 40 percent of menstruating women experience premenstrual mood and behavioral changes.
- Approximately 2 to 10 percent of women experience Premenstrual Dysphoric Disorder, a severe form of premenstrual syndrome that is characterized by severely impairing behavior and mood changes.
- In one major study, 100 percent of women who had experienced severe childhood sexual abuse developed depression later in life.
- Although bipolar disorder is equally common in women and men, research indicates that approximately three times as many women as men experience rapid cycling.^v
- Other research findings indicate that women with bipolar disorder may have more depressive episodes and more mixed episodes than do men with the illness.

Postpartum Depression:^{vi}

- As many as 10 percent to 15 percent of women experience a clinical depression during pregnancy or after the birth of a baby.
- There is a three-fold increase in risk of depression during or following a pregnancy among women with a history of mood disorders. Once a woman has experienced a postpartum depression, her risk of having another reaches 70 percent.
- As many as 80 percent of women experience the "postpartum blues," a brief period of mood symptoms that is considered normal following childbirth.

Depressive Illness and Latinos

- According to a 1997 National Ambulatory Medical Care Survey, the number of Latinos diagnosed with a depressive illness increased 72.9 % since 1992.
- A recent study (Minsky et al., 2003) found that Latinos are disproportionately diagnosed as having major depression compared with the other ethnic groups.
- Latinos are more likely to present "somatic" symptoms of depression, like body aches and nervousness.

- In the year 2002, 37% of Latinos were uninsured - nearly twice the rate as Caucasians.

Children:

- About 2% of school-aged children (i.e. children 6-12 years of age) appear to have a major depression at any one time. With puberty, the rate of depression increase to about 4% major depression overall. With adolescence, girls, for the first time, have a higher rate of depression than boys. This greater risk for depression in women persists for the rest of life. Depression is diagnosable before school age (e.g. ages 2-5) where it is somewhat more rare but definitely occurs. Overall, approximately 20% of youth will have one or more episodes of major depression by the time they become adults.^{vii}
- Bipolar disorder is more likely to affect the children of parents who have the disorder. When one parent has bipolar disorder, the risk to each child is estimated to be 15-30%. When both parents have bipolar disorder, the risk increases to 50-75%.^{viii}
- According to the American Academy of Child and Adolescent Psychiatry, up to one-third of the 3.4 million children and adolescents with depression in the United States may actually be experiencing the early onset of bipolar disorder.

Adolescents:

- About 4% of teenagers have major depressive disorder (MDD) at any one time. Among teens, girls are more often affected than boys. MDD frequently interferes with home, school and family life, including causing a lot of family stress. Suicide is the third leading cause of death among teenagers, with about half of these associated with depression. This makes depression a common and serious illness that is important to identify and treat early in the course of the disease. To understand which treatments work best for which depressed teenagers, TADS is comparing different treatments for major depression in teens, with the goal of improving the treatment and outcomes of young persons with this disorder.^{ix}
- Up to 90% of bipolar disorders start before age 20.^x

Older adults:^{xi}

- Depression in its many forms affects more than 6.5 million of the 35 million Americans who are 65 years or older.
- Symptoms in older persons may differ somewhat from symptoms in other populations. Depression in older people is often characterized by memory problems, confusion, social withdrawal, loss of appetite, inability to sleep, irritability, and, in some cases, delusions and hallucinations.
- Somatic symptoms of depressive disorders, such as aches and pains, can sometimes be obscured by other physical problems in older adults.

African Americans:^{xii}

- Adult Caucasians who have either depression or an anxiety disorder are more likely to receive treatment than adult African Americans with the same disorders even though the disorders occur in both groups at about the same rate, taking into account socioeconomic factors.
- More than 2.5 million African Americans have bipolar disorder.
- According to the 2001 Surgeon General's report on mental health, the prevalence of mental disorders is believed to be higher among African-Americans than among whites, and African Americans are more likely than whites to use the emergency room for mental health problems.
- African Americans with depression were less likely to receive treatment than whites (16 percent compared to 24 percent).
- Only 26 percent of African-Americans with diagnosed generalized anxiety disorder received treatment for their disorder compared to 39 percent of whites with a similar diagnosis, according to the 2001 Surgeon General's report on mental health.

Parental Depression:^{xiii}

- Preschool children of depressed mothers have been reported to have lower social competence.
- School age and adolescent children of depressed parents have more difficulty relating to peers, higher rates of depression and anxiety, and increased rates of disruptive behavior problems.
- Sons of depressed fathers show decreased levels of cognitive performance.

General Information about Mental Illness:

- Mental disorders are the leading cause of disability (lost years of productive life) in the North America, Europe and, increasingly, in the world. By 2020, Major Depressive illness will be the leading cause of disability in the world for women and children.
- Mental illnesses strike individuals in the prime of their lives, often during adolescence and young adulthood. All ages are susceptible, but the young and the old are especially vulnerable.
- 10-15% of all depressions are triggered by other medical conditions (such as thyroid disease, cancer or neurologic problems) or by medications. The use of drugs and alcohol can also cause depression.^{xiv}

ⁱ National Institute of Mental Health.

ⁱⁱ Robins L, Regier D. Psychiatric disorders in America. New York: Free Press, 1991.

ⁱⁱⁱ Cochran SV, Rabinowitz FE. Men and depression: clinical and empirical perspectives. San Diego: Academic Press, 2000.

^{iv} National Alliance for the Mentally Ill.

^v Depression and Bipolar Support Alliance.

^{vi} National Alliance for the Mentally Ill.

^{vii} National Alliance for the Mentally Ill.

^{viii} Depression and Bipolar Support Alliance.

^{ix} Treatment for Adolescents with Depression Study.

^x Depression and Bipolar Support Alliance.

^{xi} National Alliance for the Mentally Ill.

^{xii} Mental Health America.

^{xiii} Wyeth Pharmaceuticals, Go on and Live Campaign.

^{xiv} The American College of Obstetricians and Gynecologists.

Mental Health America of Franklin County is a private, not-for-profit organization, established in 1956. We help people navigate the mental health system. We are dedicated to promoting mental health in Franklin County through advocacy, education, and support services. Our programs include: information and referral to community mental health and alcohol/drug services; free support groups for people with mental illness and their families; an Ombudsman program that assists clients in navigating the mental health and alcohol/drug system; mental health screenings in English and Spanish; Pro Bono Counseling Program where underinsured and uninsured individuals can receive free counseling; community and professional mental health education including Get Connected; maternal mental health support and advocacy (POEM); and a quarterly newsletter featuring legislative updates and new happenings at MHAFC. We receive funding from the Franklin County ADAMH Board, United Way of Central Ohio, individuals, foundations, and corporations. To become a member or find out more information, please visit us online at www.mhafc.org.