Suggested Reading


The Depression Sourcebook, 1997, by Brian P. Quinn, C.S.W., Ph.D.

An Unquiet Mind, 1997, by Kay Redfield Jamieson, Ph.D.

I Can See Tomorrow: A Guide for Living with Depression, 1994, by Patricia L. Owen, Ph.D.

On the Web

www.nimh.nih.gov The National Institute of Mental Health. Click on “Health Information” to find general information on depression, clinical trials, and on locating treatment services in your area.

www.mentalhealth.org SAMHSA’s National Mental Health Information Center. Click on “Newsroom” for a recent American Psychological Association article documenting increased help-seeking of college students at university counseling centers. Click on “Resources” to locate treatment services in your area.

www.nami.org The National Alliance for the Mentally Ill. Click on “Communities” for information about NAMI on Campus, an advocacy group comprised of college students from campus chapters across the U.S. These students aim to increase public awareness, provide support, and to end stigma associated with behavioral health conditions. Click on “Inform Yourself” for further information on depression and other behavioral health conditions.

“Understanding Depression” was compiled by staff at the College Life Study Office at the University of Maryland. Special acknowledgement for research and writing of this brochure is given to Ms. Dawn Fitzelle, M.S.W.

The overarching goal of the College Life Study (CLS) is to measure the impact of health-related behaviors on student lives—how these behaviors might change a student’s path, or how they might narrow choices, opportunities, and experiences over time. For more information about the College Life Study, please contact:

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Sources


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What Causes Depression?

Most likely, there is no single cause, as depression is influenced by many factors unique to the individual. For example, two college freshmen with similar stressors may experience differences in the influences and severity of their symptoms. Student A, having no history of depression, might have mild symptoms, while Student B with a self and family history might have severe ones. For Student A, the environment likely plays a major role. However, Student B’s underlying biological and genetic makeup likely plays a dominant role, with his environment merely acting as a trigger. Though the causes vary, research suggests that the condition is linked to a disruption in neurotransmitter activity. Neurotransmitters are chemicals that help transmit electrical signals between brain cells and regulate mood. Norepinephrine, serotonin, and dopamine are common neurotransmitters.

What are the Symptoms?

People with depression experience many of the following symptoms, which tend to occur at the same time, last more than two weeks, and disrupt their normal daily activities:

- Chronic physical discomfort unresponsive to routine medical treatment (i.e., headaches, pain, digestive problems).
- Physical slowing or agitation.
- Drastic changes in sleep, appetite, and energy.
- Difficulty thinking, concentrating, and remembering.
- Persistent sad, anxious, or irritable mood.
- Loss of interest or pleasure in activities once enjoyed.
- Feelings of hopelessness, pessimism.
- Feelings of guilt, worthlessness, and helplessness.
- Recurrent thoughts of death or suicide.

How is Depression Treated?

A variety of short-term, research-based treatments are available. The type(s) used depends on the person and the severity and patterns of symptoms. The most common types are psychotherapy and medication. They may be used alone or in combination.

Psychotherapy

Also known as “talk therapy.” Either cognitive behavior therapy (which emphasizes problem-solving and constructive thought processes) and interpersonal therapy (which emphasizes improvement of personal relationships) used alone, are highly effective in treating mild to moderate depression.

Medication

Generally used in combination with psychotherapy to help treat more severe symptoms. Antidepressant medications can help restore neurotransmitter imbalances.