

Thank you to Rosamund Yu and the team at, the National Institute for Health Research, University College London for bringing healthcare research in to the community.

## **Depression and Anxiety**

Professor/Doctor Glyn Lewis, UCL Division of Psychiatry

The aim of the session was to talk to Deaf residents in Islington about mental well-being, how we can keep well, and local services that can support us to keep healthy.

### **The symptoms of depression**

There are many symptoms identified with depression. Many of us may have some of these symptoms but not have depression, and some of us may have several of these symptoms and yet not feel depressed. Therefore deciding at what point to formally diagnose someone with depression is fairly arbitrary.

Symptoms include the following:

- Depressed mood
- Fatigue
- Loss of pleasure/ interest in things
- Weight loss or weight gain
- Getting easily agitated
- Feeling worthless or very guilty
- Poor concentration or indecisiveness
- Repeatedly thinking about taking your own life.

Depression is an illness. It is different from a disease. You may have a disease but not actually feel ill. It emphasizes the personal experience, but it can't simply be cured by an effort of will.

### **Getting support**

If you are experiencing some of these symptoms you could talk to your doctor about it. The route to access support for depression is through the GP. All of these symptoms are very common, and many of us experience them without this leading to depression. About 20-30% of the population show no symptoms at all.

### **Support for Deaf people**

Participants talked about the links between Deafness, social exclusion and mental well-being and highlighted SignHealth, a charity working to improve the health of Deaf people: <https://www.signhealth.org.uk/>

## **Is society getting more depressed?**

There is only a slight increase in the number of people diagnosed with depression since the 90s and the present day.

## **How to know when support is needed**

It was noted that stigma (feeling the need to hide symptoms of mental illness) were less of a barrier to us disclosing our symptoms to health care professionals that we may not recognise the symptoms in order to raise them with our GP. Whether the healthcare professional detects the symptoms will depend largely on how these are presented on the day.

Participants recognized that this can be further exacerbated where consultations are not carried out in the patient's first language, through an interpreter, where words may not translate precisely and interpretation could further mask symptoms.

Research shows that giving GPs more training to detect mental health needs doesn't directly result in more people being diagnosed with mental health needs. Maybe this means that people don't feel able to talk to their GP about their mental health, or maybe it is that patients and the GP don't make links between the physical symptoms the patient raises and underlying health needs. 10 minute appointment times may not help this.

## **Treatments: Anti-depressants**

The rise in anti-depressant use is much greater than the rise in the incidence of depression. Part of the cause of this is some people taking this medication for years, even decades. There isn't a great deal of research in to whether this is beneficial for the patients. The effectiveness of these medications has generally been examined only over the short term. Talking therapies on the other hand, were shown to have a long term effect for some users. The best evidence for long term effects is for cognitive behavioural therapy (CBT), with evidence for an impact nearly four years after the treatment.

## **Treatments: Talking Therapies**

SignHealth runs a talking therapy service for Deaf people. You can be referred by your GP, or can self-refer on-line if this is accessible to you.  
<https://www.signhealth.org.uk/our-projects/psychological-therapies-service/get-referred/>

Participants talked about a hearing friend who had taken a book out of the library on Cognitive Behavioural Therapy (CBT) and as a result had no longer needed to attend the treatment. There are a lot of self-help materials for CBT and a website (living life to the full) that explains the principles.

**There are some written resources available at the library although these may not be accessible to all Deaf residents:**

<https://www.islington.gov.uk/libraries-arts-and-heritage/libraries/reading-learning-and-outreach-services/books-for-health>

<https://reading-well.org.uk/books/books-on-prescription>

## Keeping well

Mental well-being is pretty much the opposite of depression. It is a dynamic state in which the individual is able to develop their potential, work productively and creatively, build strong and positive relationships with others and contribute to their community.

One resident asked whether meditation and exercise can help you stay healthy. Although the research so far is not conclusive that physical exercise impacts on mental health there are people who report that this makes people feel better and it is good for your physical health anyway. Mindfulness, which is very similar to meditation, is often used by psychologists and can be used alongside **Cognitive Behavioural Treatment (CBT)**.

Manor Gardens Welfare Trust run a mental health and well-being service. They are based on a street called Manor Gardens, off Holloway Road opposite the Odeon cinema. Their representative, Stephen talked about their database of over 130 local services supporting well-being. At present, we don't know which are readily accessible to British Sign Language users, but Stephen will find out and record this. Stephen talked about how if a resident needed to come in to the office to talk about what is available locally, Manor Gardens could provide an interpreter.