

## **Depression in Black Americans**

### **Not “Just the Blues”**

Clinical depression is more than life’s “ups” and “downs.” Life is full of joy and pain, happiness, and sorrow. It is normal to feel sad when a loved one dies, or when you are sick, going through a divorce, or having financial problems. But for some people, sadness does not go away or keeps coming back. If your “blues” last more than a few weeks or cause you to struggle with daily life, you may be suffering from clinical depression.

### **Clinical depression is more than life’s “ups” and “downs.”**

Life is full of joy and pain, happiness, and sorrow. It is normal to feel sad when a loved one dies, or when you are sick, going through a divorce, or having financial problems. But for some people sadness does not go away or keeps coming back. If you feel down and cannot get back up, you should talk to a health care professional about clinical depression.

### **Clinical depression is not a personal weakness.**

Gracelessness or faithlessness is a common, yet serious, medical illness. Clinical depression is a “whole-body” illness that affects your mood, thoughts, body, and behavior. Without treatment, symptoms can last for weeks, months or years. Appropriate treatment, however, can help most people who have clinical depression.

### **Clinical depression can affect anyone.**

Anyone can experience clinical depression, regardless of race, gender, age, creed, or income. Every year more than 19 million Americans suffer from some type of depressive illness. According to a Surgeon General report, Black Americans are over-represented in populations that are particularly at risk for mental illness.

Depression robs people of the enjoyment found in daily life and can even lead to suicide. A common myth about depression is that it is “normal” for certain people to feel depressed—older people, teenagers, new mothers, menopausal women, or those with a chronic illness. The truth is that depression is not a normal part of life for any human being, regardless of age or life situation.

Unfortunately, depression has often been misdiagnosed in the Black community.

### **Myths about depression**

The myths and stigma that surround depression create needless pain and confusion and can keep people from getting proper treatment. Here are some myths and facts about clinical depression that affect Black Americans.

“When did you become depressed?” “Why are you depressed? If our people could make it through slavery, we can make it through anything.”

“Dealing with emotional issues is acting white.”

“Black women are supposed to be strong.”

“If you’re depressed you should pray more.”

“The only Black psychiatrists wanted to study us.”

“When a black woman suffers from a mental disorder, the opinion is that she is weak. And weakness in black women is intolerable.”

“You should take your troubles to Jesus, not some stranger/psychiatrist.”

The truth is that getting help is a sign of strength. People with depression cannot just “snap out of it. Black Americans can and do experience depression.

Also, spiritual support can be an important part of healing, but the care of a qualified mental health professional is essential. And the earlier treatment begins, the more effective it can be.

### **What causes clinical depression?**

Many factors can contribute to clinical depression, including cognitive issues (e.g., negative thinking patterns); biological and genetic factors; gender (it affects more women than men); other medications; other illnesses; and situational factors. For some, a number of these factors are involved, while for others a single factor can cause illness. Mental illness does not discriminate against race.

Often, people become depressed for no apparent reason. To cope with the emotional pain caused by depression, some people try to “self-medicate” through the abuse of alcohol or illegal drugs, which only leads to more problems.

### **Clinical depression is a treatable illness.**

The good news is that, like other illnesses such as heart disease or diabetes, clinical depression is treatable with the help of a health care professional. Research strongly supports medication and/or psychotherapy as effective treatments. In fact, over 80 percent of people with depression can be treated successfully.

### **Symptoms of clinical depression**

Depression may be exhibited differently among Black Americans due to cultural backgrounds. To help decide if you—or someone you care about—needs an evaluation for

clinical depression, review the following list of symptoms. If you have been experiencing five or more for longer than two weeks, if you feel suicidal, or if the symptoms interfere with your daily routine, see your doctor, and bring this sheet with you.

- \* Persistent sad, anxious, or “empty” mood, or excessive crying
- \* Reduced appetite and weight loss or increased appetite and weight gain
- \* Persistent physical symptoms that do not respond to treatment, such as headaches, digestive disorders, and chronic pain
- \* Irritability, restlessness
- \* Decreased energy, fatigue, feeling “slowed down.”
- \* Feelings of guilt, worthlessness, helplessness, hopelessness, pessimism
- \* Sleeping too much or too little, early-morning waking
- \* Loss of interest or pleasure in activities, including sex
- \* Difficulty concentrating, remembering, or making decisions
- \* Thoughts of death or suicide, or suicide attempts

A quick, easy and confidential way to determine if you may be experiencing depression is to take a mental health screening. A screening is not a diagnosis, but a way of determining whether your symptoms warrant an evaluation by a health professional. Visit [www.mhascreening.org](http://www.mhascreening.org) to take a depression screening.

### **Treatment Options**

The most common ways to treat clinical depression are with antidepressant medication, psychotherapy, or a combination of the two. The choice of treatment depends on how severe depressive symptoms are and the history of the illness.

### **Medication**

Research strongly supports the use of medication for more severe episodes of clinical depression. Antidepressant medication acts on the chemical pathways of the brain related to moods. There are two most common types: selective serotonin reuptake inhibitors and tricyclic antidepressants. Some doctors also prescribe monoamine oxidase inhibitors.

Antidepressant medications are not habit-forming. You will not feel the full effect immediately and it may take up to eight weeks before you notice an improvement in your symptoms. Patients are usually recommended to continue taking their medications for at

least four to nine months after the depressive symptoms have improved. Those with chronic or recurrent depression may need to stay on medication to prevent or lessen further episodes. Patients should be monitored by a doctor while taking antidepressants to ensure the best treatment with the fewest side effects. Do not stop taking your medication without first consulting your doctor, as some antidepressants can cause problems if stopped suddenly.

### **Psychotherapy**

Psychotherapy can help you learn better ways of handling life's problems by talking with a trained mental health professional. Therapy can be an effective form of treatment for clinical depression, particularly for people who experience less severe episodes of depression. Scientific studies have demonstrated that courses of therapy for 10-20 weeks are often helpful in treating depression.

### **Making the most of your treatment**

In addition to treatment, participation in a patient support group can be helpful during the recovery process. Members share their experiences with the illness, learn coping skills and exchange information on community providers. Recovery is possible. Also, be sure to take care of yourself. Get plenty of rest, exercise in moderation, stay away from alcohol and drugs, and eat regular, well-balanced meals. For some, strength comes from faith or spiritual support.

### **Commonly Asked Questions about Clinical Depression**

#### **How do I get help with clinical depression?**

The first step is to talk to your doctor who may recommend a physical checkup to determine if there is any physical cause for the depressive symptoms. If clinical depression is diagnosed, you will then be referred to as a mental health specialist. Mental health care professionals include psychiatrists, psychologists, pastoral counselors, and social workers.

#### **What if I do not feel comfortable talking to my doctor?**

Pastoral counselors are professionals that offer an integrated religious and spiritual approach to treatment. Many people find strength and support through their religious and spiritual beliefs. However, only your physician or a mental health professional can diagnose clinical depression.

#### **How do I pay for treatment?**

If you are enrolled in private insurance such as a health maintenance organization (HMO) plan your costs may be covered by your insurance. Contact your health insurance carrier for details.

If you are over 65 years old, Medicare will pay for 50 percent of the cost of mental health treatment and Medigap insurance will typically reimburse the other half of the costs. Depending on each state's rules, many low-income or disabled residents may also qualify for Medicaid coverage. If your pastoral counselor is licensed by the state, pastoral counseling is usually covered by health care plans.

Your workplace may also offer an employee assistance program (EAP) which will provide counseling or assist you in finding care.

If you do not have insurance or cannot afford treatment, there may be publicly funded mental health centers or programs in your community which will charge you based on what you can afford to pay. Many private care professionals offer a sliding-fee scale. University or teaching medical centers are also a reliable source of low-cost or free treatment. Since most publicly funded organizations have waiting lists or other barriers to treatment, if you have trouble accessing treatment, contact your local mental health association or MHA for help. You can live your life again! With diagnosis and treatment, clinical depression is overcome.

### **Other Resources**

#### **Suicide Hotline**

Phone or text 988  
[988lifeline.org/](http://988lifeline.org/)

#### **Depression and Bipolar Support Alliance (DBSA)**

800-826-3632

#### **[www.dbsalliance.org/](http://www.dbsalliance.org/) American Psychiatric Association**

703-907-7300

[www.psychiatry.org/](http://www.psychiatry.org/)

#### **International Foundation for Research and Education on Depression**

[www.ifred.org/](http://www.ifred.org/)

#### **National Institute of Mental Health**

Phone Number:301-443-4513

Toll Free Number: 1-866-615-6464

Website:[www.nimh.nih.gov](http://www.nimh.nih.gov)