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MEN

GET

DEPRESSION



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TABLE OF CONTENTS

INTRODUCTION	page ii
MEN AND DEPRESSION	page 1
• Signs and Symptoms of Depression	
• What Causes Depression?	
• Types of Depression	
GETTING HELP	page 8
• Talking to a Professional	
• Treatment Options	
• Questions to Ask	
• Managing Depression	
INFORMATION AND RESOURCES	page 14
• Information and Resources for Depression	
• Information and Resources for Suicide Prevention	
FOR FRIENDS AND FAMILY	page 15
• Warning Signs to Act On	
DVD DISCUSSION GUIDE	page 17
• Let's Talk About It	
• Planning a Screening	
• Discussion Tip for Facilitators	
• Beginning the Screening	
• Questions for Discussion	
• Watch the Video	
• Wrap-up Questions	
• Ending the Discussion	
• Ordering Info	

INTRODUCTION

Depression is a serious but treatable health condition that affects more than six million American men.

You are not alone. Men of all ages, ethnic origins, and walks of life get depressed. At each stage in life, men face stressful changes and events that may lead to depression.

Depression can touch every part of your life – how you eat, sleep, work, study, and spend your free time. It can take the joy out of life and the things you like doing. And, it affects all the people who care about you – friends, spouses, partners, parents, and children.

Depression can also be related to serious setbacks, including divorce or loss of one's job and livelihood. It is estimated that over 80% of suicides involve depression. Suicide is the second leading cause of death among college-age men. And, a large number of suicides involve men over the age of 70, especially those that are widowed or not married.

But, you can do something about it. Depression can be managed and overcome.

Depression isn't a moral failing. It has nothing to do with the kind of person you are. It's a health condition, and, like other health issues it can be treated and even cured. The first step is seeing that you need help. The second step is asking for that help, which takes courage and strength.

You may have depression and not know it. This booklet will help you find out.

Maybe you know that you are depressed but don't know where to get help. We'll show you some safe places to start looking.

Maybe you know a man who seems depressed. We'll show you how to help.

Getting help for your depression can make a big difference in your life and in the lives of those you love and those who love you.

“You can go out there and conquer the world, but then there's that voice say, 'who are you? You know you can't do that. That cancerous attitude, that self-defeatest attitude and it's always there.”

James
Iraq War Vet



MEN AND DEPRESSION

It's thought that women get depressed a lot more than men, but that's only part of the picture. Men don't look for treatment as often as women, so there are many men who are depressed, but never diagnosed.

Why don't men look for help? They may feel there is a shame or stigma that comes with depression – that it's not "manly" to feel sad or weak. A lot of men are raised to be "strong" and "in control" of their emotions.

*"Men are the worst.
I was reluctant to go
to a psychiatrist."*

Tom Johnson
Former CEO, CNN,
& Publisher LA Times



To feel in control, some men deny how they're feeling and never ask for help. Some turn to alcohol or drugs to feel better. Others may become frustrated, angry, or even violent and abusive. And, may even turn that violence on themselves.

According to the National Institutes of Mental Health (NIMH), depression puts men at high risk for suicide. In fact, four times more men die by suicide than women. But there's good news – NIMH also says that with the right treatment depression improves about 80% of the time.

Signs and Symptoms of Depression

Depression has a number of signs and symptoms. Sometimes men or those closest to them, may not see the signs. Men are each affected in different ways, but three of the most common signs are pain, risk taking, and anger.

Pain

Depression may show up as physical signs like constant headaches, stomach problems, or pain that doesn't seem to be from other causes or that doesn't respond to normal treatments.

Risk Taking

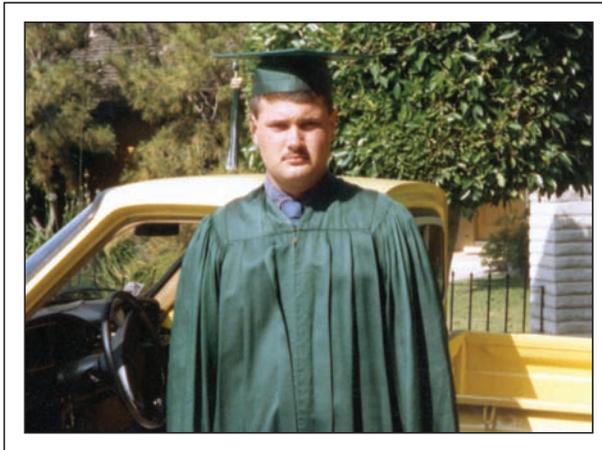
Sometimes depressed men will start taking risks like dangerous sports, compulsive gambling, reckless driving, and casual sex.

Anger

Anger can show itself in different ways like road rage, having a short temper, being easily upset by criticism, and even violence.

*“ People just felt like
I was ready to snap.
I remember being a
teenager and tearing
apart my room.
I remember people
saying, ‘Why are you
so angry?’”*

Allen



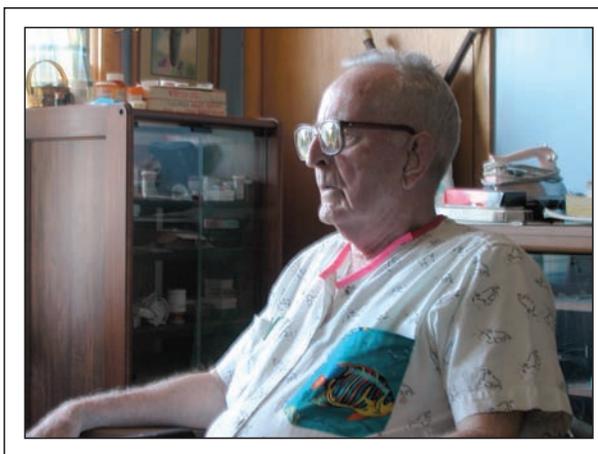
Here are some other common signs, especially if they last for a few weeks or months:

- Feeling guilty, worthless, or that you always fail
- Feeling restless and/or irritable
- Having no energy
- Problems sleeping (not sleeping or sleeping too much)
- Feeling angry or violent
- Feeling like you can't work or get things done
- Using alcohol or drugs to feel better
- Sexual inability
- Losing interest in hobbies, work, and/or sex
- Having problems focusing, remembering, or making choices
- Missing work, class, or appointments
- Not caring about anything or feeling “blank”

- Always feeling sad or nervous
- Changes in appetite and/or weight
- Working too much
- Feeling alone
- Being negative about everything
- Thinking about death or suicide

“Since my wife passed away and since I’m on my own, I had quite a few dips. You get depressed. It’s like living in hell.”

Bruce
Retired WWII veteran



SUICIDE WARNING SIGNS TO ACT ON

HAVE YOU FOUND YOURSELF:

- Talking about wanting to hurt or kill yourself
- Looking for ways to kill yourself like trying to get a gun, pills, etc.
- Unusual talking or writing about death, dying, or suicide

IT MAY MEAN THAT YOU NEED SUPPORT RIGHT AWAY. FREE HELP IS HERE: 1-800-273-TALK OR 1-800-273-8255.

Other serious signs to watch out for include:

- Using alcohol or drugs more than usual
- Talking about having no reason to live or having no purpose in life
- Feeling anxious or worried
- Not sleeping or sleeping all the time
- Feeling trapped like there's no way out

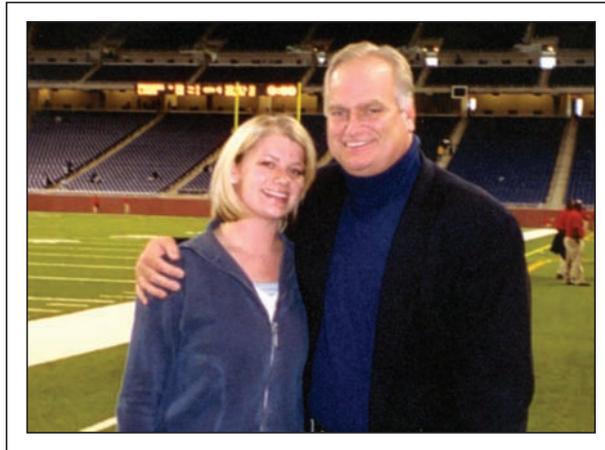
SUICIDE WARNING SIGNS TO ACT ON

- Feeling hopeless
- Staying away from friends, family, and people in general
- Not being able to control your anger or seeking revenge
- Acting reckless or taking dangerous risks without thinking
- Having major mood changes
- Suddenly giving away prized possessions

AGAIN, IF YOU RECOGNIZE THESE SIGNS, YOU MAY NEED SUPPORT RIGHT AWAY.
FREE HELP IS AVAILABLE HERE: 1-800-273-TALK (8255) OR 1-800-273-8255.

“I had a few of those episodes that were real, real serious like that. And, that’s why I don’t own a gun anymore.”

Eric
Former NFL Quarterback



What Causes Depression?

Research hasn’t found any one cause for depression. But, both genes and environment seem to play roles in changing the brain chemistry that affects your mood. In some cases, depression can run in the family, but people with no family history of depression can get it too.

Stress

Stress can also play a role in depression. Men of all ages go through major life changes like leaving home for work or college, moving to a new city or country, losing a job, retirement, or finding out that you have a health problem. Some common changes or events that can trigger depression are:

- Stress at school, work, or home
- Reaching or not reaching your goals

- Sudden money problems
- Relationship problems
- Being away from friends and family
- Combat experience
- The death of a loved one
- Verbal, physical, or sexual abuse
- A serious illness or accident
- Failing a test or class
- Dropping out of school
- Parents' divorce
- Experimenting with drugs and alcohol
- Starting a stressful job, college, or military service
- Moving or leaving home for the first time
- Questions about one's sexuality
- Losing or changing a job
- Starting a family
- Family responsibilities like caring for children, a spouse/partner, or aging parents
- Retirement

It's not just major events. Everyday stress can also trigger depression, including:

- Constant money problems
- Chronic illness
- Disability

THE STRESS OF RETIREMENT

Retirement can bring with it feelings of decreased social worth. And, it's true that as we age we attend more funerals and face more genuine sadness and grief from the loss of loved ones and friends. These feelings are normal, but they can lead to depression. Likewise, aging may be accompanied by a loss of independence and ability to do things that used to provide joy and meaning in life. That, too, can trigger depression.

Health Problems

Sometimes other health problems play a role. Finding out that you have a serious health condition, like cancer, or dealing with the chronic pain that comes with age can trigger depression also.

Nutrition can play a role, too – sometimes not getting enough folate or omega-3 fatty acids can make you feel like you're depressed. Or, sometimes problems with your thyroid (hypothyroidism) or not having enough testosterone can make you feel depressed, too. And, if you drink alcohol or take certain drugs, like sedatives or medications to reduce high blood pressure, you may be more likely to become depressed. Thankfully, most of these conditions can be treated or are problems that you can manage on your own.

There are also some health problems that occur more often with depression than others. One of the most common is heart disease. People with heart problems have higher rates of depression, and people who are depressed have higher rates of heart disease.

Other illnesses that are often seen with depression include:

- Alcohol and drug abuse
- Anxiety disorders
- Chronic illnesses like diabetes, cancer, HIV, Parkinson's disease, and Alzheimer's disease
- Post-traumatic stress disorder (PTSD)
- Stroke

For Young Men

Young men especially, can be depressed and suffer from other health issues at the same time. Some of the more common issues that young men experience with depression are anxiety disorders and substance abuse.

“It got to the point where I would look for different substances that would take me away from my depression.”

Stephen
College Student



Types of Depression

Just as there are different signs of depression, there are different types:

- Stress-related depression may be caused by sudden stress or a major event like a breakup, losing a job, bad grades, or the death of a loved one. Stress-related depression can lead to more serious forms of depression, so you may want to seek help.
- Seasonal depression (seasonal affective disorder) tends to come around the same time each year usually in the fall or winter. Seasonal depression has many of the same signs as depression like feeling down, tired, short-tempered, craving sweets and starches, headaches, and having problems sleeping.
- Chronic depression (dysthymia) is not a severe type of depression, but symptoms can stay with you for a long time and affect your daily life. Without treatment, chronic depression can lead to major depression. Many people with chronic depression suffer from major depression at least once in their lives.
- Major depression is a severe form that can lead to problems at home, school, and work. It can keep you from being able to study, sleep, and find joy in things like sports, music, friendship, and sex. While some people only suffer from major depression once in their life, others suffer from it many times.
- Bipolar disorder (manic-depression) can involve extreme changes in mood. You may change from feeling depressed to feeling very active or talkative to feeling “normal.”

All types of depression, no matter how severe, should be talked about with a health professional. Depression is serious. Without help, depression can spiral you into a deep sadness or put you at risk for suicide. Men especially need to take depression very seriously if not for themselves, then for those they love.

GETTING HELP

If you think you may be depressed, seeing a professional can help you figure out if you really are or not. And, if you are, they can come up with the best treatment plan for you. Your regular doctor or school health service is a good place to start.

Since there is no lab test for depression, figuring out whether someone is depressed or not can be a real challenge, even for a trained health professional. To diagnose depression, doctors or counselors use a set of questions to learn more about someone's mood. That's why it's important to let your doctor or counselor know how you're feeling – both in your mind and in your body. Your doctor may show you a list of signs and symptoms, like the one on page 6, to help you remember and describe how you're feeling.

A lot of men only tell their doctor about the physical symptoms, like back pain, not sleeping, or headaches. This is one of the reasons that depression in men is often overlooked and never treated. That's why it's important to be as open as you can with your doctor about how you are feeling – both in your mind and in your body. That way, your doctor can figure out if it is depression, or if other health problems are making you feel the way you do.

If your doctor decides that you are depressed, he or she may give you the name of someone like a psychiatrist or psychologist to talk with to learn what you can do to get better. Your doctor may also be able to prescribe some medications for you that will help with your depression.

“My life it was a living hell. And by being treated by him, it helped me, not just a lot, it gave me my life back.”

Javier
Maintenance Worker



TALKING ABOUT YOUR DEPRESSION

Even though many people don't think of depression as being shameful like they used to, talking about it still has some risks. However, most of the time the benefits of talking about it outweigh the risks. If your depression affects how well you are able to work, consider talking about it with your boss or someone in human resources. If your company has an employee assistance program (EAP), they may be able to help, too. If depression affects your schoolwork, think about talking to your advisor or a professor that you trust. Many schools offer counseling services to their students.

Don't be embarrassed or afraid to talk about it with the people you trust. Depression is just like other health problems, and talking about it is a major part of dealing with it.

Talking to a professional

There are different types of mental health professionals that you can talk to.

- Family doctors or primary care physicians are the doctors you normally see for other health problems. These doctors can help figure out if you are depressed or not and can prescribe medications if you are. But, they are not trained in counseling or talk therapy. While some people feel better just by taking medications, some people prefer counseling or both.
- Psychiatrists, like your regular doctor, can prescribe medications. Many also have training in counseling or “talk therapy.” If they prescribe medications for you, they should be checking to make sure that they are working for you.
- Psychologists are therapists who are trained in psychotherapeutic counseling. They are not medical doctors, but most psychologists who see patients have a doctorate degree like a PhD or PsyD. In general, they can't prescribe medications (each state is different), but may work with a psychiatrist who can, and should be checking to make sure they are working for you.
- Psychotherapists or counselors are trained mental health professionals. These terms are often used loosely, and may refer to a psychologist, psychiatrist, social worker, or other type of counselor who uses psychotherapy (also referred to as “talk therapy” or counseling) with patients. Some have a master's degree in social work and are called licensed clinician social workers (LCSW).
- Pastoral Counselors are certified and/or licensed as therapists. These professionals are dually degreed (masters or doctoral) in the behavioral health

sciences and in theology or religious studies. Many are ordained clergy. They address an array of mental health concerns and are sensitive to issues of religion or spirituality. They often work in concert with consulting psychiatrists.

FINDING HELP IN A RELIGIOUS SETTING

Some men find it helpful to seek counseling in a religious or spiritual setting by talking with one's faith leader or a certified pastoral counselor. Like other health conditions depression is best addressed with a team approach utilizing behavioral health services and medical treatment.

No matter which professional you see, he or she should know a lot about depression, not judge what you say, and keep what you say private. Even though they all have the skills to help you with your depression, the most important thing is that you are comfortable with them and can trust them with what you have to say.

You may feel that you can't afford to see a mental health professional, especially if you don't have health insurance. Your community may have mental health counseling services at reduced cost. See the resources section of this booklet for help finding such services.

If you don't have a regular doctor or don't have access to school medical facilities, there are still many options for finding help. Community clinics, area hospitals, and local mental health groups, even your place of worship, can help you find resources. If you are in high school, your guidance counselor may be able to point you in the right direction. Or, if you are in or near a college university, the school may offer private and/or sliding scale-fee clinics.

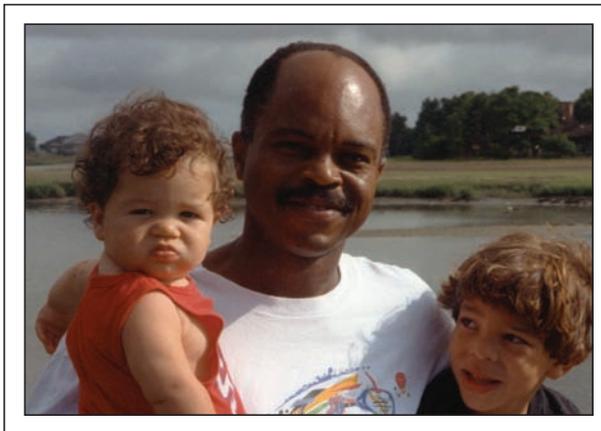
Other resources you may want to look into include:

- Your health plan or employee assistance program (EAP)
- Community mental health centers
- Health clinics at a state or local hospital
- Social service agencies
- Private clinics
- Local medical and/or psychiatric groups
- Campus health centers
- Chaplains' offices
- Pastoral counseling centers

A list of websites and phone numbers for places to start looking is on page 14.

“We actually went through several medications before we found one that was both effective and didn’t have side effects I couldn’t tolerate.”

John Head
Author



Treatment Options

Your treatment plan will depend on a few things, like the type of depression you have, and what you want and need. They may give you some options like medication or counseling. Severe depression may need a combination of these. Here are some common treatments for depression:

Prescription medicine

Prescription antidepressant medications don’t work like painkillers or other medications that work right away on physical problems. These affect your mood, and most of us don’t notice the small changes in our mood, compared to, say, how much your stomach or back hurts. And, it takes more time for them to show they are working.

Many people stop taking them because they think they are not working. But, you should never stop taking your medication without talking to your doctor first.

Some of the more common antidepressants that you may have heard of include selective serotonin reuptake inhibitors (SSRIs) like Paxil, Celexa, Lexapro, Zoloft, Cymbalta, or Prozac; tricyclic antidepressants like Norpramin or Pamelor; and mixed-reuptake antidepressants like Wellbutrin and Effexor.

During the first few months, your doctor or counselor needs to know how your medications are working for you. Set up a time to call or e-mail your doctor to let him or her know how you are doing on the medications. If you notice any side effects like gaining weight or not being able to sleep, you should tell your doctor about them. A lot of times, if one medication doesn’t work, another one will. Some medications work better for some people than others, and sometimes how much you need to take will change.

Some people have bad reactions to certain drugs, or they could act differently with some of the other drugs or vitamins you may be taking. Make sure to tell your doctor about all the drugs you are taking, including prescription, over-the-counter, and yes, illegal and any vitamins, herbs, or nutritional supplements you’re taking. And, make sure that any of your

other doctors or healthcare providers know which antidepressants you are taking. Don't worry, your doctor will keep all of this information private. Making sure that all of your doctors and health providers know all of the drugs and supplements that you take could save your life.

Psychotherapy (counseling or "talk therapy")

Not all men need medication to feel better. Talk therapy or even short-term counseling can work well. Psychotherapy normally means talking one-on-one with a therapist about your depression and the ways that you can feel better. For many people, a combination of medication and talk therapy helps, but cost may be an issue, depending on what type of health plan you have

There are other options besides talking one-on-one with a counselor. Therapy can also take place in a small group that is lead by a counselor or therapist. Some men find it helpful to talk to others who are going through the same thing. For them, group therapy and/or support groups may be a good option.

Electroconvulsive Therapy (ECT)

One approach to treating severe depression that doesn't respond to other treatments is called electroconvulsive therapy (ECT). Although it is often confused with the "shock therapy", this treatment uses safe, very low-level electrical pulses. It is often effective and has few side effects.

By talking with a trained professional, you can find out what treatment or combination of treatments is best for you.

Questions to Ask

Here are some questions you may want to ask that can help you and your doctor figure out the best treatment that fits you:

- What is causing my depression? Is it another health problem or medication?
- Which treatments are right for me (medication, counseling, or both)? Why?
- What medication side effects should I look out for?
- If I notice side effects, who should I contact, you or someone else in your office?
- Are there any foods, alcohol, or medications that I shouldn't take while I'm on this medication?
- How long will it take before I start feeling better?
- How long do I need to take this medication and/or be in therapy?
- What if this doesn't work? What's next?

- Will my insurance pay for it? How much will I have to pay?
- What if I can't pay for the medication? Are there any free samples from the company that makes it?
- Should I think about experimental treatments or clinical trials?
- Is there anything else I can do to feel better?
- How do I talk about my depression with other people?
- Should I talk to my advisor or my boss about it?
- What should I do if I start to feel suicidal?

Whatever treatment you choose, remember to give it time. Recovering from depression takes time just like any other health problem.

Managing Depression

There are other ways that you can feel better. Your doctor or counselor may have some ideas about the different things you can do to manage your depression every day. You can also learn more from books, articles, and websites written by mental health professionals.

In the meantime, here are some different ideas to get you started:

- Exercise, like walking, lifting weights, golf, martial arts, team sports (like basketball, football, ultimate Frisbee, softball etc.)
- Try to be with other people
- Get involved in activities that may make you feel better go to a game, movie, or concert with a buddy
- Talk to a buddy that you trust
- Volunteer

You may want to set some goals and make a plan for how you're going to fit these kinds of things into your busy life. Here are seven quick steps about doing that:

1. **Decide** what you want to do.
2. **Look** for ways to get there. Make a list of options and choose the one you think will work best.
3. **Develop** an *action plan*. Be specific, say what the action is and when you are going to do it.
4. **Carry out** your plan.
5. **Review** the results. Is your plan working?
6. **Adjust** your plan. Plans don't always work out, so tweak the parts that need it.
7. **Reward** yourself.

INFORMATION AND RESOURCES FOR DEPRESSION

National Institute of Mental Health (NIMH)

<http://menanddepression.nimh.nih.gov>

Call toll-free: 1-866-615-6464

Substance Abuse and Mental Health Services Administration (SAMHSA)

SAMHSA, part of the federal government, offers a program that helps people find mental health services near them.

<http://www.mentalhealth.samhsa.gov/databases/>

Call toll free: 1-800-789-2647

Depression and Bipolar Support Alliance (DBSA)

<http://www.dbsalliance.org/>

Free information on depression and bipolar disorder as well as listings to over 1000 patient support groups across the country.

Call toll free: 1-800-826-3632

Mental Health America

<http://www.nmha.org>

Call toll free: 1-800-969-6MHA (6642)

National Alliance on Mental Illness (NAMI)

<http://www.nami.org>

Call toll free: 1-800-950-NAMI (6264)

Active Minds on Campus

<http://www.activemindsoncampus.org/>

Dedicated to the mental health of college students, this organization serves as the young adult voice in mental health advocacy on more than fifty college campuses.

INFORMATION AND RESOURCES FOR SUICIDE

American Foundation for Suicide Prevention (AFSP)

<http://www.afsp.org>

Call toll free: 1-888-333-AFSP

National Hopeline Network

<http://www.hopeline.com>

Call toll free: 1-800-SUICIDE (784-2433)

National Suicide Prevention Lifeline

<http://www.suicidepreventionlifeline.org>

Call toll free: 1-800-273-TALK (8255)

FOR FRIENDS AND FAMILY

“I did think John was depressed. It was just difficult for him to hear it and it was difficult for me to say it in a way that was effective, because clearly nagging wouldn’t be helpful.”

Claire Broome
John’s Wife



If a man you care about your husband, father, grandfather, son, boyfriend, friend, or co-worker seems depressed, don’t ignore the signs. First, try to talk to him. You want him to know that depression is a common illness among men and there’s nothing to be ashamed of. And most importantly, you want him to know that you care and want to help. Asking how someone is feeling isn’t being nosy. It’s a simple question that shows that you care.

Your friend or loved one may not know that he’s depressed. It often takes someone else a family member or friend to help them see the signs. And, even if he does know, he may not be willing to look for help because he’s embarrassed or afraid. That’s why he needs your help.

Try to get him to see a doctor to figure out if it is depression, and find out how it can be treated. If he’s willing to see a doctor, you may have to make the appointment and go with him. If he doesn’t want to see a doctor, see if he will talk to someone else, like a pastoral counselor or a friend that he trusts.

People rarely "snap out of" depression. But, they can feel a little better each day, and you can help.

This means trying to understand, be patient, show that you care, and encourage him, as he gets better. It may mean keeping track of how his mood changes, keeping an eye on whether he is taking his medications, and making doctor appointments. Remember that depression can sometimes make it harder to focus and remember things.

Listen to him, and don’t dismiss his feelings. Suggest that you go for a walk or to a movie together. Try not to nag, though. While he may need something to keep his mind off of his depression, too much pressure can make him feel like he’s failing.

Don't ignore any signs of suicide. If you notice anything, tell his doctor at once. It may feel like you are turning him in, but men are at a much higher risk for suicide. And, research suggests that men tend to go from suicidal thoughts to suicidal actions faster than women.

Warning Signs to Act On

Someone at high risk for suicide will often show warning signs, such as:

- Talking about wanting to hurt or kill himself
- Looking for ways to kill himself like trying to get a gun, pills, etc.
- Unusual talking or writing about death, dying, or suicide

Thinking about death and suicide in these ways should be taken very seriously.

If you notice any of these signs, seek help as soon as possible by contacting his doctor or counselor, or by calling 1-800-273-TALK or 1-800-273-8255.

Other warning signs of suicide include:

- Using alcohol or drugs more than usual
- Talking about having no reason to live or having no purpose in life
- Showing unusual anxiety or worry
- Unable to sleep or sleeping all the time
- Feeling trapped like there's no way out
- Feeling hopeless
- Staying away from friends, family, and people in general
- Rage, uncontrolled anger, seeking revenge
- Acting reckless or taking dangerous risks without thinking
- Major mood changes
- Suddenly giving away prized possessions

Again, if you notice these signs, seek help as soon as possible by contacting his doctor or counselor, or by calling 1-800-273-TALK or 1-800-273-8255.

DVD DISCUSSION GUIDE

Let's Talk About It

The *Men Get Depression* DVD is the core of an age-focused educational package about men's experiences with depression. The package includes a DVD with three programs for men ages 18-30, 30-55 and 55+, a booklet, and a discussion guide. All of the materials are available in English and Spanish. This package is designed to inform men and their families about the symptoms of depression, standard treatments, barriers to treatment, risk of suicide, and the impact it has on individuals and their relationships.

This DVD discussion guide can be used to engage groups of men and their families in a personal exploration of the themes developed in each of the programs.

This discussion guide helps you, the facilitator, use the DVD to help men, their families and friends, and professionals to understand more about depression. This includes recognizing the signs of depression, understanding what treatment options are available, and knowing where to seek help. It also explores the role that family and friends play in supporting and helping men seek treatment. Prepare a list of local mental health resources available to people at all income levels. Invite a local mental health provider to address questions, and be sure they have viewed the video.

The DVD, booklet, and discussion guide can be used to:

- Build individual and community awareness of depression among men
- Broaden awareness of symptoms of depression and the barriers that men face in seeking treatment
- Challenge the social stigma around mental illness that prevents people, and men in particular, from seeking treatment
- Increase understanding among friends and families of depressed men about effective ways to urge them to accept the treatment they need
- Heighten awareness of the link between depression and suicide in order to prevent suicides

Planning a Screening

The first thing you should do is watch the program(s) on your own. This will give you an idea of what is included and how you want to share this with your group. In fact, you may decide that you only want to show parts of a program. However, most groups will learn from all of the profiles and information in each of the programs.

The DVD programs are most useful if shown and discussed in a group setting. We recommend that you think carefully about where you will show the video and how you will

lead the discussion afterwards so that everyone feels comfortable discussing the issues and how they relate to their own experiences.

Discussions can be led by mental health counselors, faith leaders, men or women with a personal interest in or experience with depression, spouses and other family members, or anyone interested in depression among men.

Screenings of the DVD and group discussions can be held in many different settings: faith based settings, schools, at home, public libraries or other organizations.

Discussion Tips for Facilitators

Here are a few helpful tips to keep in mind while leading group discussion:

- Plan each step of the meeting ahead of time
- Begin with an “icebreaker” by having everyone introduce himself or herself
- Provide some helpful tips for the discussion portion
- Everyone’s comments are important
- Please don’t use strong or profane language or judge anyone else’s ideas
- Try to speak one at a time and use active listening skills
- Remember that not everyone will agree each person comes to the group with unique experiences
- Follow the DVD discussion guide and help to focus their attention on the pre-DVD questions
- Remember that your role is to get everyone engaged in the conversation try not to dominate the discussion, and try not to lecture
- Keep your attitude positive and keep the conversation going
- Stay on schedule and wrap up the screening on time

Beginning the Screening

Before starting the DVD, share what the program is about, and introduce the group to a few of the possible topics for discussion (listed below) after the show.

Asking people to keep questions in mind while watching a program helps to focus their attention on what they’re about to see.

Let them know that these questions will be discussed after the DVD has been shown. Write the questions on a chalkboard or on a poster-board before the workshop so that they are visible while people watch the DVD.

Questions for Discussion

- What is depression?
- What are some common myths about depression?
- What causes depression?
 - For men ages 18-30?
 - For men ages 30-55
 - For men ages 55+
- Is depression caused by genes or environment?
- What are some symptoms of depression, especially among men?
- What are some different treatments for depression?
- What are some of the problems that men face as they try to seek treatment?
- In addition to medical treatments, what else can people with depression do to feel better?
- What is stigma and what impact does it have?
- How might you talk with someone about depression?
- How can family members help men to get the treatment they need for depression?
- What are signs of suicide that we need to be aware of?
- If we see any signs of suicide what should we do about it?

Watch the Video

As soon as the DVD is over, start the discussion using the above questions as a guide. Each video is approximately 30 minutes long.

Wrap up Questions

- If you are convinced that a man you know is depressed and is not getting treatment, what steps can you take to help him realize he needs treatment and look for help?
- How can spouses/partners, family, and friends support men with depression without nagging?
- What can we do to challenge stigma and myths surrounding depression and other mental illnesses?
- Cite local mental health resources.

End the Discussion. Thank Everyone for Coming!

Ordering Info:

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