

The Student Who is Depressed

Facts about depression

Depression is a common mental health problem that varies in severity and duration. In its less serious form, depression is a temporary reaction to loss, stress, or life challenges. It can be alleviated through the passage of time and/or the natural healing effects of social support, daily routines, and simple coping strategies like distraction and exercise.

Symptoms of depression can include:

- Feelings of emptiness, hopelessness, helplessness, and worthlessness
- A deep sense of sadness
- An inability to experience pleasure
- Irregular eating and sleeping
- Difficulties with concentration, memory, and decision-making
- Fatigue and social withdrawal

Sometimes depression includes irritation, anxiety, and anger.

In its most serious form, depression can be accompanied by self-destructive thoughts and intentions as a way to escape from the emotional pain.

Research shows that depression can be highly responsive to both psychotherapy and medication.

WHAT CAN YOU DO

Talk to the student in private.

Listen carefully and validate the student's feelings and experiences.

Be supportive and express your concern about the situation.

Discuss clearly and concisely an action plan such as having the student immediately call for a counseling appointment.

Refer the student to the Counseling Center (521-6202).

Be willing to consider or offer flexible arrangements (e.g., extension on a paper or exam), if appropriate, as a way to alleviate stress and instill hope.

Ask student if s/he has thoughts of suicide. If so, do not leave the student alone. Walk him/her to the Counseling Center. If it is after 5 p.m., or on the weekend, access emergency services by calling 521-6235.

If you feel overwhelmed or unprepared to help a depressed student, call the Student Affairs Office (521-6175), which will maintain your confidentiality and arrange a meeting with the student.

AVOID

Downplaying the situation.

Arguing with the student or disputing that the student is feeling depressed.

Providing too much information for the student to process.

Expecting the student to stop feeling depressed without intervention.

Assuming the family knows about the student's depression.