Depression can affect the whole family's health


Relatives provide important support for loved ones suffering from depression, but healthcare services don't work with the whole family when they treat depressed patients. Negative health consequences can then affect other family members, too.

Depression is an illness that affects a growing number of people. The Norwegian Council for Mental Health predicts that almost half the population will experience depression during the course of their lifetime. Even if you do not suffer from depression yourself, you will still be affected if someone in your family has the disease.

Being a caregiver for someone who is sick can be tough, and a family’s need for information is huge. Family members can provide valuable knowledge about the individual’s disease history, but healthcare professionals often fail to recognize and respect the roles families play.

“Support from healthcare services isn’t a given,” says Hege Kletthagen, an associate professor at NTNU’s Department of Nursing in Gjøvik.

She has been studying how everyday life with a severely depressed individual affects family members, and in particular, how they perceive their encounters with psychiatric specialist health services.

Relatives become ill

Many of the relatives of patients with depression in Kletthagen’s survey said that they were not listened to when they wanted to share their experiences, nor did they receive the support or the information they expected.

The survey indicates that there is a gap between family members’ needs and their experiences with healthcare services. In practice, healthcare services do not always implement the health authorities’ strategies to safeguard family and relatives.

When relatives don’t receive adequate support and help from the doctors, nurses, psychologists and other healthcare staff they encounter, the burden can become so great that additional family members become sick, too.

Relatives face the very real danger of burnout, exhaustion or even depression. Those who reported that they received less support and information than they wanted found that this added to their distress, Kletthagen’s survey shows. The feeling of being on constant alert wreaks havoc on a family’s physical and mental health.

Give and receive support

“We need to see the family as a whole and take a more family-centred treatment perspective” on depression, says Kletthagen.
A treatment approach that puts the family at the centre takes patient and family interaction into account. When family members receive the support they need, they can in turn provide better support for the patient.

“This is also about attitudes,” says Kletthagen. “We have to be willing to involve families and recognize that they’re an important resource for the patient.”

**An intruder in the family**

People suffering from depression are downcast and have less energy and capacity for activities and enjoyment. Things that were previously important for the person no longer have special significance, and self-esteem and confidence plummet. Symptoms vary, but for many, severe depression may also lead to suicidal thoughts.

“It can take awhile between the start of symptoms and the start of treatment. Depression can sometimes seem like an intruder in the family, and relatives may live in perpetual fear of their loved one committing suicide,” says Kletthagen.

Close family members often feel powerless. They are struggling with mixed emotions such as fear and anxiety, but also irritation and anger. The ensuing guilt and living with such hard feelings over time can be an ordeal.

**Confidentiality creates a barrier**

Often professional confidentiality precludes involving family members and dependents in treatment. When it comes to mental health problems like depression, the disease itself can make relationships difficult, and many patients are reluctant to share information with others.

Kletthagen emphasizes that healthcare professionals must comply with policies and procedures, but she believes they need to be more sensitive to families’ needs.

“We may think they have enough information, but the family may not perceive it the same way,” says Kletthagen.

She considers it important for healthcare professionals to be active and explore why a patient may choose not to involve family. They need to impress on the patient how important family support is.

“It’s even more important to think holistically now, especially since institutional placements are being scaled back and more people are receiving treatment where they live,” says Kletthagen.