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**Depression Alliance Scotland  
Press Release**

**SURVEY HIGHLIGHTS OVERWHELMING DEMAND FOR EQUAL ACCESS TO DEPRESSION TREATMENT AND SUPPORT FOR OLDER PEOPLE IN SCOTLAND**

A new survey to be published today (17 June 2009) has shown that 96% of people believe that older people in Scotland should have equal access to care and treatment for depression, at a time when they are 5 times less likely than younger people to be referred for specialist mental health support.

The snapshot survey was conducted by Depression Alliance Scotland (DAS) and has been published to launch the start of a new campaign aimed at improving support and treatment for older people with depression in Scotland. The survey sought the views of both older and younger people in Scotland with regard to depression in older people and found that –

- 96% of people believe that older people should have equal access to care and treatment for depression
- only 8% of people believe that depression is a natural part of ageing
- 78% of people believe that depression is treatable in older people
- 68% of older people believed that they were more reluctant to seek help for depression than younger people

The survey was conducted against a background of recent Scottish and UK reports in which it has been shown that –

- depression is the most common mental health problem in later life, affecting one in seven older people
- rates of suicide in older men are higher in Scotland than in other parts of the UK (19.8 per 100,000 population)
- fewer than 10% of older people with depression are referred to specialist mental health services compared with 50% of younger adults with mental and emotional problems
- overall 8 out of 10 older people with clinical depression do not receive any treatment
- In some cases, GPs cannot refer older people on to NHS colleagues for help and support due to discriminatory rules excluding people over the age of 65.

Older people in Scotland face many challenges to their mental health. Poverty and social exclusion are very important risk factors for poor mental health, and older people may also be more likely than most to experience financial hardship. Times of change also place great strain on our mental health, and older people experience many transitions as they face retirement, the loss of their partners and friends, an increased likelihood of physical health problems, increasing need for support and for some the need to move into residential care.

The good news is that there are many steps we can all take to meet these risk factors with things that boost our mental health. For older people, taking up new activities, meeting new friends and taking exercise has benefits for physical and mental health. Learning new skills helps to keep the mind sharp, and the volunteering that older people do in communities has a benefit for everyone.

Sadly, many older people will experience depression, and depression in people aged 65 and over is especially under-diagnosed. The signs and symptoms of depression in later life can be similar to the effects of ageing, but that is no reason to blame ageing and not consider the possibility of depression being the cause..

DAS is, today, launching a new campaign in Scotland, entitled '**Getting on, not getting down**' aimed at raising wider awareness of depression in, and improving treatment and support for, older people. The launch of the campaign also marks the start of National Depression Week (17-23 June 2009) during which a range of depression awareness-raising activities will take place throughout Scotland.

**Older people seeking help or support with depression should contact DAS on 0845 123 2320 or visit our website [www.dascot.org](http://www.dascot.org)**

**Ilena Day, Chief Executive, Depression Alliance Scotland (DAS), said,**

“Scotland has an increasingly ageing population and, unfortunately, many older people do not receive the same access to treatment and support for depression as younger people. The result of this survey shows that an overwhelming number of people in Scotland, both young and old, believe this is unfair, unequal and unacceptable. Putting it simply, people with depression should not be denied treatment, which could significantly improve their quality of life, because of their age. Depression in later life is as treatable as depression at any other time of life. Current support for older people needs to be reviewed, to enable older people with depression to get back to being mentally healthy. Support also needs to be made available to prevent our ageing population from becoming depressed in the first place, such as programmes to help people prepare emotionally for later life and the vulnerabilities that this can bring”.

“A common misconception still exists that depression is a natural consequence of ageing. Clearly, becoming older does bring life changes, as people can experience a number of challenges including loss, reduced mobility and income and their social circles may decline. However, the key message for older people is that getting on does not have to mean getting down. You don't have to live with depression just because you are older; you have a right to support, treatment and recovery to enjoy good mental well-being.”

**Nell McFadden MBE, 82, who has experienced depression said,**

“I decided I owed it to myself to retire the day I became 60. As the autumn and winter approached, I began to feel that something was wrong but I didn't know what. I started to take panic attacks and wouldn't go out or answer the phone. I didn't realise for some time that this creeping thing was depression.

“When you are an older person it is hard to accept that the person who has coped for all their years can have depression. I used to get angry with myself and feel guilty because of my age, but it is no disgrace, it can affect all ages. In my case it was my retirement which triggered my depression and all that lovely spare time became my nightmare.

“If you feel down don't be afraid to admit it, it is no shame on you. I was fortunate in that I received advice which led to my becoming actively involved in the community. Since then I have lived a rich, full life of being involved in the community. I sit on twelve committees and was made MBE for my work with older people. Even if you don't think it, there is light at the end of the tunnel. Someday everyone with depression will hopefully, like me, not only see the light at the end of the tunnel but will come out of it and live a full and happy life.”

**Victor Gilbert, 71, who has experienced depression, said,**

“An important discovery for me was to realise that fitness is an essential ingredient for my mental, as well as physical, health. I have not found that it solves anything in itself, but what it does do is create a secure foundation on which I am able to deal with problems as they arise. Problems with my hip and knee joints now deny me the exhilarating experience of jogging in nature. However, these problems have taught me the importance of stretching in an exercise programme to develop flexibility and hence mobility. These are important at any age, but particularly so when we are old.

“I continue to see myself as a person with depression, but I've discovered that taking effective medication, living a healthy mental and physical lifestyle and importantly staying fit means depression no longer runs me or blights my life”.

ENDS

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Notes to Editors:

The snapshot survey of 405 adults (of whom 183 identified themselves as an older person) was carried out by DAS in May 2009.

Depression Alliance Scotland is the only national Scottish charity dedicated to improving the diagnosis and treatment of depression, challenging the stigma associated with the illness and offering information and support to those affected by, and working with, depression.

Visit [www.dascot.org](http://www.dascot.org)

**For NHS professional comment – contact**

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Images of the campaign materials for 'Getting on, not getting down (don't let depression hold you back)' for inclusion in articles can be obtained by contacting Ilena Day at the numbers above.

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