

Depression Management

Course Overview and Application Form



Course overview

We all have times when our mood is low, and we're feeling sad or miserable about life. Usually these feelings pass in due course. But if the feelings are interfering with an individual's life and don't go away after a couple of weeks, or if they come back over and over again for a few days at a time, it could be a sign that they are experiencing depression.

Course Aims

The course will help individuals understand the signs and symptoms of depression, explore the impact on their day to day lives, and offer practical, do-able tools, tips and techniques that will help individuals take steps to their recovery.

There is strength in numbers. The advantage of being with others is that everyone has a chance to learn from each other. It is like a fondue party – the more you dip into the pot, the more you get out.

If you are anxious about being with others, remember that they probably feel the same as you.

Outcomes

Improved resilience and skills for self-management

Improved mental health and emotional well-being

For individuals to feel there is hope, control and opportunity within their life

Course session duration: 2 hours

Length of course: 6 weeks

Location: Kettering Mind

Please complete all parts of the application form including the questionnaires, and submit to:

Kettering Mind 49-51 Russell Street, Kettering, Northants, NN16 0EN

Or by email to: info@ketteringmind.org.uk

A course facilitator will be in contact with you, to let you know when the next course you have applied for will be starting.

This overview sheet and the useful information/contact numbers on the reverse are for you to keep.

Useful Information / Contact Numbers

Kettering Mind Telephone: 01536 523216 (Office hours 9am – 4.30pm Mon – Fri)

Crisis cafes - available for anyone 18 years old or over who are finding themselves in a crisis or need support with their mental health. Ran by an NHFT mental health professional and a Mind peer support worker, they provide support and safety to anyone in need by offering coping mechanisms and management techniques to help reduce the risk of crisis.

As well as offering support, professionals can also refer and direct you to further services if required. They run across the county at various locations, please phone for further information

Corby 01536 267280

Daventry 01327 879416

Kettering 01536 523216

Northampton 01604

634310 / 624951

Rushden 01933 312800

**Wellingborough 01933
223591**

NHS Choices (non-emergency) Telephone: 111

Mind info line – Telephone: 0300 123 3393 for information on topics including:

- types of mental health problems
- where to get help
- medication and alternative treatments
- advocacy

Mind Legal line – Telephone: 0300 466 6463 for information and general advice on mental health related law covering:

- mental health
- community care
- mental capacity
- human rights and discrimination/equality related to mental health issues

Blue Light information

Working in the emergency services has always been a challenging job, but since the pandemic it has been even harder. You might be dealing with more work on top of your normal duties, and supporting people in more difficult situations.

Go to: www.mind.org.uk/news-campaigns/campaigns/blue-light-programme/blue-light-information/ for resources to support you with your mental health.

The blue light information is for emergency workers who work in:

- ambulance service
- fire and rescue
- police service
- search and rescue

Samaritans – Telephone: 116 123 They offer a safe place for you to talk any time you like, in your own way – about whatever's getting to you. You don't have to be suicidal.

Mental Health Intergrated Response Hub: 0800 448 0828 a 24-hour a day telephone support service for people receiving support in Northamptonshire for mental health problems, their carers, families and friends. Our service helps when you feel unsafe, at risk, or unable to cope without support.

We are Kettering Mind. We're a passionate group of people here to fight for mental health. For support. For respect. For you.

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Course Application Form



Part 1

Personal Details			
Name		Date of Birth:	
Gender		Ethnicity:	
Daytime Tel No:		Mobile number:	
Address			
Do you give consent for us to leave messages relating to this course?			Yes / No
Do you have any access requirements?			Yes / No
Please confirm you have read the course overview and this is the course you are applying to attend			Yes / No
Do you give consent for us to send emails relating to this course?			Yes / No
If yes, please print your email address:			
How did you hear about this course?			
Please sign below to acknowledge and give consent to notes being recorded on Kettering Mind systems;			
Signature;		Date	
About you			
A) What is your main difficulty around depression, and how long have you experienced this?			
What areas of your life are most affected?		What feelings are you most troubled by?	
<input type="checkbox"/> Work	<input type="checkbox"/> Finances	<input type="checkbox"/> Sadness	<input type="checkbox"/> Anxiety / Panic
<input type="checkbox"/> Home	<input type="checkbox"/> Physical Health	<input type="checkbox"/> Stress	<input type="checkbox"/> Shame or Guilt
<input type="checkbox"/> Relationships	<input type="checkbox"/> Parenting	<input type="checkbox"/> Grief	
<input type="checkbox"/> Other (please describe)		<input type="checkbox"/> Other (please describe)	

A) Have you had difficulties in the past and did you seek any help and support? If so what, or who helped?

B) What is important to you? (What aspirations do you have? what do you hope for? What benefits would you like to see in your life?)

C) Do you have any ethnic, gender, culture & diversity needs we can support you with whilst attending the course?

Part 2

Please fill in all the questionnaires, as it will help us tailor the course to the participants. We will ask participants to fill in identical questionnaires at the end of the course, for comparison.

Mental Wellbeing Questionnaire
The Short Warwick-Edinburgh Mental Well-being Scale (SWEMWBS)

Over the <u>last 2 weeks</u>, how often have you experienced any of the following:	None of the time	Rarely	Some of the time	Often	All of the time
I've been feeling optimistic about the future	1	2	3	4	5
I've been feeling useful	1	2	3	4	5
I've been feeling relaxed	1	2	3	4	5
I've been dealing with problems well	1	2	3	4	5
I've been thinking clearly	1	2	3	4	5
I've been feeling close to other people	1	2	3	4	5
I've been able to make up my own mind about things	1	2	3	4	5
SWEMWBS total score					

GAD7

Anxiety and Depression Questionnaires

Over the <u>last 2 weeks</u>, how often have you been bothered by any of the following problems?		Not at all	Several days	More than half the days	Nearly every day
1	Feeling nervous, anxious or on edge	0	1	2	3
2	Not being able to stop or control worrying	0	1	2	3
3	Worrying too much about different things	0	1	2	3
4	Trouble relaxing	0	1	2	3
5	Being so restless that it is hard to sit still	0	1	2	3
6	Becoming easily annoyed or irritable	0	1	2	3
7	Feeling afraid as if something awful might happen	0	1	2	3
GAD7 total score					

PHQ-9

Over the <u>last 2 weeks</u>, how often have you been bothered by any of the following problems?		Not at all	Several days	More than half the days	Nearly every day
1	Little interest or pleasure in doing things	0	1	2	3
2	Feeling down, depressed, or hopeless	0	1	2	3
3	Trouble falling or staying asleep, or sleeping too much	0	1	2	3
4	Feeling tired or having little energy	0	1	2	3
5	Poor appetite or overeating	0	1	2	3
6	Feeling bad about yourself — or that you are a failure or have let yourself or your family down	0	1	2	3
7	Trouble concentrating on things, such as reading the newspaper or watching television	0	1	2	3
8	Moving or speaking so slowly that other people could have noticed? Or the opposite — being so fidgety or restless that you have been moving around a lot more than usual	0	1	2	3
9	Thoughts that you would be better off dead or of hurting yourself in some way	0	1	2	3
PHQ9 total score					

Q6 CORE10	I made plans to end my life in the last 2 weeks	NO	YES
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