



DEPRESSION

INFOSHEET

Depression is a persistent feeling of sadness and loss of interest in life accompanied by physical health effects.

What is it like to be depressed?

Thoughts

intense obsessive thoughts (rumination) or intrusive thoughts (unwanted negative thoughts) that can interrupt sleep. Suicidal ideation (struggling to find a reason to live, thinking of ending your life), OCD worsens, problems concentrating.

Body Sensations

lack of energy, fatigue, inertia, frequent crying or not showing affect. Repetitive behaviours including self-harm. In Autistics, increased stimming: flapping, rocking. Digestive disorders such as nausea and IBS

Actions

crying, changes in sleep (insomnia or oversleeping) and appetite. difficulties with self-care: forgetting to eat, not taking care of hygiene (bathing, teeth, changing clothes), social withdrawal, loss of enjoyment in activities that normally give pleasure. Selective mutism (being unable to communicate verbally), no affect or despondent if severe. In some cases, masking, feigning normalcy and even appearing happy and joking. May require an extended break from education or work.

Emotions

feeling empty, worthless, fragile, guilty, hopeless, irritable, anxious. May express pent-up emotions such as anger.

Autism and Depression



Mental health issues affect 79% percent of autistic adults. Autistic people are four times more likely to suffer from depression than neurotypicals; youth below 18 years old (7.7%) and in adults (40%) will have depression as comorbidity.

The data for autistic women show a 34% rate for depression and 36% for anxiety. Women on the Spectrum often internalise emotions which can result in depression and anxiety.



Often emerges in adolescence and early adulthood

Autistic adults without intellectual disabilities are nine times more likely than the general population to have suicidal ideation. Realizing differences with peers, this self-awareness can trigger depression and may prompt a diagnosis of autism later in life.



Risk Factors

History of depression in the family, misdiagnosed anxiety or other mental illness, autistic burnout, ruminating negative thoughts, loneliness from lack of friendships or difficult relationships, isolation, dissatisfaction with life, traumatic experiences (bullying, past abuse, PTSD, stressful life changes, living away from family, stress or deadlines at work or school, break-ups, separation, grief, illness, pandemic, holidays).

What Helps?

What you can do :

- Set routines such as waking up at the same time every day
- Take care of your physical health and hygiene (e.g. changing clothes, eating nutritious food, taking your medication, make time for physical activity)
- Spend time outside in the sunlight or using a sun lamp which is especially important for Seasonal Affective Disorder)
- Connect with a supportive friend, family member or therapist
- Sensory stimulation that you find comforting and uplifting (e.g. scents, music, nice textures, and colouring)
- Depression can take away the pleasure you used to feel doing activities you enjoyed. It's important to encourage yourself to do these activities at least a little bit, because it can motivate you and help you feel better, even if it does not sound enjoyable in the moment (e.g. arts, special interests, music, crafts, baking, games)
- Tell your doctor and therapist of any changes in mood. Monitor for signs of returning depression.
- Ask for accommodations at work and school for extra time to do work or exams (you can sometimes get these even if you have not disclosed mental illness/disability, so it is good to ask)

What others can do:

- Check in by calling or texting to ask how someone is feeling. See if they would like to spend time together, or if you can do anything to help.
- Offer to help with overwhelming tasks, because people with depression can get very behind on tasks and it can be hard to catch up
- Listen to your friend or family member, making sure not to invalidate the ways depression can be overwhelming, even if it is hard for you to relate to what they are feeling

What society can do:

- Publicly funded access to mental health services, such as individual and group therapy
- Oppression can exacerbate symptoms of depression, so social change around discrimination and inequality can help with depression among marginalized people

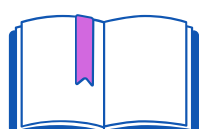
Resources



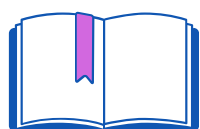
[Mindfulness | Sue Hutton Mindfulness | Ontario](#)



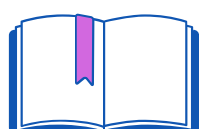
[A Guide to Mental Health Issues in Girls and Young women on the Autism Spectrum : Diagnosis, Intervention and Family Support \(2017\) Dr Judy Eaton](#)



[From Hurt to Hope: Stories of Mental Health, Mental Illness and Being Autistic \(2021\) ed. Mair Elliott](#)



[Autism and Depression: workbook for adolescent and adults by Katie Saint and Carlos Torres Acceptance and Commitment Therapy \(ACT\)](#)



[Overcoming anxiety and depression on the Spectrum, Dr Lee Wilkinson A self-help guide workbook using CBT](#)



[Dealing With Depression On The Autism Spectrum | Patrons Choice - YouTube](#)



[Depression vs. Autistic Burnout: How to Tell the Difference | The Mighty](#)



<https://www.spectrumnews.org/features/deep-dive/the-deep-emotional-ties-between-depression-and-autism/>



[Suicide Risk among People with Autism Spectrum Disorder | Suicide Prevention Resource Center](#)

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[Autistic women twice as likely as autistic men to attempt suicide \(spectrumnews.org\)](#)



[The loneliness of me: The assumption of social disinterest and its worrying consequences in autism](#)

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