Depression and Caregiving

Depression can be common among caregivers. Find out the symptoms to watch out for and what resources are available to help.

Caregiving can be rewarding, satisfying and even enjoyable. But it can also be overwhelming, frustrating and exhausting — all of which can lead to depression. It’s not unusual for caregivers to develop mild or serious depression due to the demands of each day. Learn about depression’s causes, symptoms and treatments in this quick Q&A so you can get the help you need if you find yourself struggling.

Why can caregivers be prone to depression?

Depression is a complex mental illness. Known factors that can contribute to depression may include genetics, certain medications, grief and environmental triggers. Stressful life events can also trigger depression, such as the death of a loved one or even a move. While caring for someone else, you might dedicate less time to your own needs. This can put a strain on your physical and mental health.

What symptoms should I be aware of?

Sadness and hopelessness are classic symptoms of depression, but according to the Family Caregiver Alliance, caregivers should also watch out for the following symptoms:

- Changes in your eating habits
- Not getting enough sleep — or requiring far more than you typically do
- Feeling unmotivated all of the time
- Loss of interest in people or activities that used to bring you joy
- Feeling numb
- Becoming easily agitated
- Feeling inadequate
- Increase in alcohol or drug consumption
- Excessive time spent on the Internet
- Trouble thinking or planning
- Losing interest in your appearance or physical well-being
- Fantasies of escaping the situation
- Thoughts of death or suicide
- Ongoing physical symptoms like chronic neck or back pain
I think I might be depressed. What do I do next?

First of all, acknowledge that being aware of your own emotions is a big first step. When you’re taking care of someone else, it can be difficult to think about your own needs. Depression is serious, so it’s vital to seek help right away, but it can be treated. There is a good chance that with the right medical attention, you may feel better soon.

Like any other illness, depression should be addressed by a medical professional. Call your primary care physician to schedule an appointment. Mention that you’re feeling depressed (or “down” or “blue” or whatever terminology you’re comfortable using) when you book the appointment so that you receive a priority time slot. If you see a psychiatrist or therapist, follow the same protocol.

When talking to your doctor, health care provider or therapist, try to be as open as possible. Share what you’ve been feeling (refer to the list of symptoms on page 1, if that’s helpful) and the timeframe of your symptoms.

How will I be treated for my depression?

That depends on your symptoms and other factors. Your doctor or psychiatrist may suggest a medication or suggest you start a medication while you also start therapy. You may see a specialist for certain symptoms of depression (like sleep changes or eating habits) for further help. Your mental health is important, and highly personal. If you feel uncomfortable with the recommendations given to you, it’s okay to get a second opinion.

Before you do, contact your health insurance provider. Find out if a visit to another doctor is covered. Understand any out-of-pocket costs. This way you can be fully informed and prepared for the journey ahead.

The most important thing for you to remember is this: You are performing an invaluable role. You are working tremendously hard. If you have symptoms of depression, prioritize your treatment. After all, the best way for you to care for your friend or family member is to make sure you’re taking care of yourself first.