Advice

Kuonana na doctor

Kujichangany na watu – depression

Kucommunicate na watu

Mazoezi - stress

Progress

Mgonjwa anaendleaj

Books

Depression 177 (183

-mood(happy,sad,kulia,uzuni

-pleasure

-kukosa appetite, kutokuwatch movie, kuchoka

**Kupungua au kuongezeka uzito**

**Kukosa usingizi**

**Mtu hana thamani**

**Loss of stimulus**

Stress 295 (314

-certain bad events kuona au kupitia (ndugu au yeye

-kuwa na kumbkmb mbaya kuhus bad events

-ndoto za kujirudia x2 au flashbacks

Anxiety 215 (251)

-uoga (

->kutokutulia(wasiwasi

-hawez kuconcentrate

-ana hasira za haraka

-uoga

**Depression**

A. Five (or more) of the following symptoms have been present during the same 2- week period and represent a change from previous functioning; at least one of the symptoms is either (1) depressed mood or (2) loss of interest or pleasure. Note: Do not include symptoms that are clearly attributable to another medical condition.

1. Depressed mood most of the day, nearly every day, as indicated by either subjective report (e.g., feels sad, empty, hopeless) or observation made by others (e.g., appears tearful). (Note: In children and adolescents, can be irritable mood.)

2. Markedly diminished interest or pleasure in all, or almost all, activities most of the day, nearly every day (as indicated by either subjective account or observation).

3. Significant weight loss when not dieting or weight gain (e.g., a change of more than 5% of body weight in a month), or decrease or increase in appetite nearly every day. (Note: In children, consider failure to make expected weight gain.)

4. Insomnia or hypersomnia nearly every day.

5. Psychomotor agitation or retardation nearly every day (observable by others, not merely subjective feelings of restlessness or being slowed down).

6. Fatigue or loss of energy nearly every day.

7. Feelings of worthlessness or excessive or inappropriate guilt (which may be delusional) nearly every day (not merely self-reproach or guilt about being sick).

8. Diminished ability to think or concentrate, or indecisiveness, nearly every day (either by subjective account or as observed by others).

9. Recurrent thoughts of death (not just fear of dying), recurrent suicidal ideation without a specific plan, or a suicide attempt or a specific plan for committing suicide.

B. The symptoms cause clinically significant distress or impairment in social, occupational, or other important areas of functioning.

C. The episode is not attributable to the physiological effects of a substance or another medical condition. Note: Criteria A–C represent a major depressive episode. Note: Responses to a significant loss (e.g., bereavement, financial ruin, losses from a natural disaster, a serious medical illness or disability) may include the feelings of intense sadness, rumination about the loss, insomnia, poor appetite, and weight loss noted in Criterion A, which may resemble a depressive episode. Although such symptoms may be understandable or considered appropriate to the loss, the presence of a major depressive episode in addition to the normal response to a significant loss should also be carefully considered. This decision inevitably requires the exercise of clinical judgment based on the individual’s history and the cultural norms for the expression of distress in the context of loss. 1

D. At least one major depressive episode is not better explained by schizoaffective disorder and is not superimposed on schizophrenia, schizophreniform disorder, delusional disorder, or other specified and unspecified schizophrenia spectrum and other psychotic disorders.

E. There has never been a manic episode or a hypomanic episode.

Note: This exclusion does not apply if all of the manic-like or hypomanic-like episodes are substance-induced or are attributable to the physiological effects of another medical condition.

**Stress**

A. Exposure to actual or threatened death, serious injury, or sexual violence in one (or more) of the following ways:

1. Directly experiencing the traumatic event(s).

2. Witnessing, in person, the event(s) as it occurred to others.

3. Learning that the event(s) occurred to a close family member or close friend. Note: In cases of actual or threatened death of a family member or friend, the event(s) must have been violent or accidental.

4. Experiencing repeated or extreme exposure to aversive details of the traumatic event(s) (e.g., first responders collecting human remains, police officers repeatedly exposed to details of child abuse). Note: This does not apply to exposure through electronic media, television, movies, or pictures, unless this exposure is work related.

B. Presence of nine (or more) of the following symptoms from any of the five categories of intrusion, negative mood, dissociation, avoidance, and arousal, beginning or worsening after the traumatic event(s) occurred: Intrusion Symptoms

1. Recurrent, involuntary, and intrusive distressing memories of the traumatic event(s). Note: In children, repetitive play may occur in which themes or aspects of the traumatic event(s) are expressed.

2. Recurrent distressing dreams in which the content and/or affect of the dream are related to the event(s). Note: In children, there may be frightening dreams without recognizable content.

3. Dissociative reactions (e.g., flashbacks) in which the individual feels or acts as if the traumatic event(s) were recurring. (Such reactions may occur on a continuum, with the most extreme expression being a complete loss of awareness of present surroundings.)

Note: In children, trauma-specific reenactment may occur in play.

4. Intense or prolonged psychological distress or marked physiological reactions in response to internal or external cues that symbolize or resemble an aspect of the traumatic event(s). Negative Mood

5. Persistent inability to experience positive emotions (e.g., inability to experience happiness, satisfaction, or loving feelings). Dissociative Symptoms 6. An altered sense of the reality of one’s surroundings or oneself (e.g., seeing oneself from another’s perspective, being in a daze, time slowing).

7. Inability to remember an important aspect of the traumatic event(s) (typically due to dissociative amnesia and not to other factors such as head injury, alcohol, or drugs). Avoidance Symptoms

8. Efforts to avoid distressing memories, thoughts, or feelings about or closely associated with the traumatic event(s).

9. Efforts to avoid external reminders (people, places, conversations, activities, objects, situations) that arouse distressing memories, thoughts, or feelings about or closely associated with the traumatic event(s). Arousal Symptoms

10. Sleep disturbance (e.g., difficulty falling or staying asleep, restless sleep).

11. Irritable behavior and angry outbursts (with little or no provocation), typically expressed as verbal or physical aggression toward people or objects.

12. Hypervigilance.

13. Problems with concentration.

14. Exaggerated startle response.

C. Duration of the disturbance (symptoms in Criterion B) is 3 days to 1 month after trauma exposure. Note: Symptoms typically begin immediately after the trauma, but persistence for at least 3 days and up to a month is needed to meet disorder criteria.

D. The disturbance causes clinically significant distress or impairment in social, occupational, or other important areas of functioning.

E. The disturbance is not attributable to the physiological effects of a substance (e.g., medication or alcohol) or another medical condition (e.g., mild traumatic brain injury) and is not better explained by brief psychotic disorder.

**Anxiety**

A. Excessive anxiety and worry (apprehensive expectation), occurring more days than not for at least 6 months, about a number of events or activities (such as work or school performance).

B. The individual finds it difficult to control the worry.

C. The anxiety and worry are associated with three (or more) of the following six symptoms (with at least some symptoms having been present for more days than not for the past 6 months): Note: Only one item is required in children.

1. Restlessness or feeling keyed up or on edge.

2. Being easily fatigued.

3. Difficulty concentrating or mind going blank.

4. Irritability.

5. Muscle tension.

6. Sleep disturbance (difficulty falling or staying asleep, or restless, unsatisfying sleep).

D. The anxiety, worry, or physical symptoms cause clinically significant distress or impairment in social, occupational, or other important areas of functioning.

E. The disturbance is not attributable to the physiological effects of a substance (e.g., a drug of abuse, a medication) or another medical condition (e.g., hyperthyroidism).

F. The disturbance is not better explained by another mental disorder (e.g., anxiety or worry about having panic attacks in panic disorder, negative evaluation in social anxiety disorder, contamination or other obsessions in obsessivecompulsive disorder, separation from attachment figures in separation anxiety disorder, reminders of traumatic events in posttraumatic stress disorder, gaining weight in anorexia nervosa, physical complaints in somatic symptom disorder, perceived appearance flaws in body dysmorphic disorder, having a serious illness in illness anxiety disorder, or the content of delusional beliefs in schizophrenia or delusional disorder).

**DATASET**

**DEPRESSION**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Depression mood most of the day, nearly every day** | **Markedly diminished interest or pleasure in all or almost all the activities most of the day or nearly everyday** | **Significant weight loss when not dieting or weight gain** | **Insomnia or hypersomnia nearly everyday** | **Psychomotor agitation or retardation nearly everyday** | **Fatigue or loss of energy nearly everyday** | **Feelings of worthlessness or excessive or inappropriate guilt(delusional) nearly everyday** | **Diminished ability to think or concentrate or indecisiveness nearly everyday** | **Recurrent thought of death (not just fear of dying), recurrent suicidal ideation without a specific plan or a suicide attempt or specific plan for committing suicide** |
| **Feels sad, empty, hopeless,** |  | **Change of body weight** |  | **Feelings of restlessness or being slowed down** |  | **Not merely self-reproach or guilt about being sick** |  |  |
|  |  | **Increase or decrease in appetite nearly everyday** |  |  |  |  |  |  |
| **Age(children and adolescents)** |  | **Age (children – failure to make expected weight gain)** |  |  |  |  |  |  |

**STRESS**

**Exposure to actual or threatened death, serious injury, or sexual violence in one (or more) of the following ways:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Directly experiencing the traumatic event(s)** | **Witnessing in person the event(s) as it occurred to others** | **Learning that the event(s) occurred to close family member or close friend** | **Experiencing repeated or extreme exposure to aversive details of the traumatic event(s)** |
|  |  | **In cases of actual or threatened death of a family member or friend, the event(s) must have been violent or accidental** | **first responders collecting human remains, police officers repeatedly exposed to details of child abuse** |
|  |  |  | **Age (adult at work)** |

**Presence of nine (or more) of the following symptoms from any of the five categories of intrusion, negative mood, dissociation, avoidance, and arousal, beginning or worsening after the traumatic event(s) occurred:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Intrusion symptoms** | **Negative mood** | **Dissociative symptoms** | **Avoidance symptoms** | **Arousal symptoms** |
| 1. **Recurrent, involuntary and intrusive distressing memories of the traumatic event(s)** | **5. Persistent inability to experience positive emotions** | **6. An altered sense of the reality of one’s surrounding or oneself** | **8. Efforts to avoid distressing memories, thoughts and feelings about or closely associated with the traumatic event(s)** | **10. Sleep disturbance** |
| **Age**  **(Children; repetitive play may occur in which themes or aspects of the traumatic event(s) are expressed)** | **Inability to experience happiness, satisfaction or loving feelings** | **Seeing oneself from another’s perspective, being in a daze, time slowing** | **9. Efforts to avoid external reminders (people, places, conversations, activities, objects, situation) that arouse distressing memories, thoughts or feelings about or closely associated with the traumatic event(s)** | **Difficultly falling or staying asleep, restless sleep** |
| 1. **Recurrent distressing dreams in which the content and/or affect of the dream are related to the event(s)** |  | **7. Inability to remember an important aspect of the traumatic event(s)** |  | **11. Irritable behavior and angry outbursts (with little or no provocation)** |
| **Age (children -there may be frightening dreams without recognizable content** |  | **Typically, due to dissociative amnesia and not to other factors such as head injury, alcohol or drugs** |  | **Typically, expressed as verbal or physical aggression toward people or objects** |
| 1. **Dissociative reactions (Flashbacks) – individual feels or acts as if the traumatic events were recurring** |  |  |  | **12. Hypervigilance** |
| **Such reactions may occur on a continuum, with the most extreme expression being a complete loss of awareness of present surroundings** |  |  |  | **13. Problems with concentration.** |
| **Age (children**   * **The trauma-specific reenactment may occur in play** |  |  |  | **14. Exaggerated startle response.** |
| 1. **Intense or prolonged psychological distress or marked physiological reactions in response to internal or external cues that symbolizes or resemble an aspect of the traumatic event(s)** |  |  |  |  |

**ANXIETY**

**Work or school performance**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Restlessness or feeling keyed up or on edge** | **Being easily fatigued** | **Difficulty concentrating or mind going blank** | **Irritability** | **Muscle tension** | **Sleep disturbance** | **worry** |
|  |  |  |  |  | **Difficulty falling or staying asleep or restless, unsatisfying sleep** |  |