

Anxiety and depression: the rise of the twentysomething life crisis



Rising numbers of 16 to 24-year-olds are suffering from mental health problems. How can they help themselves?
Louise Chunn reports

Anxiety and depression are affecting more young people than ever. According to a study by the Office for National Statistics, one in five 16 to 24-year-olds suffers psychological problems, while at British universities the demand for counselling services has gone up by about a third in the four years to 2013. To the surprise of many, the twentysomething age group is nearing the rates of anxiety and depression seen in early middle age, when a dip in mental health is to be expected. But during the “freedom years” of late adolescence and early adulthood? Whatever happened to the “best time of your life”?

There are a number of reasons why this might be happening now. Social media, so popular among this age group, can — along with all the sharing, liking, crazy pets, and never-ending selfies — make people feel inferior compared with their friends and peers. Many develop perfectionist tendencies, so if they fall short of the ideal achieved by everybody else (which, of course, is not true) they pile on the self-recrimination.

Where once parents largely stood back and let their young fly the nest at about the age of 18, these days parents and their over-18s stay far closer, with grown-up children often not becoming fully independent until their mid-to-late twenties. In 2000, Jeffrey Arnett, the American psychologist, controversially coined the term “emerging adulthood” to describe the period between the ages of 18 and 25 when adolescents slowly become more independent and explore various life possibilities, rather than being expected simply to “grow up”.

Critics say that this new demographic is disempowered, has problems with identity and an inability to look beyond their own needs. Alan Percy, the head of counselling at the University of Oxford, says: “Changed parenting styles may lead to closer and more positive relationships between parents and young adults, but they also give mixed messages. This sort of behaviour can make them feel more anxious about separating from their parents and facing the challenges and risks of the outside world.” He also believes that reliance on parents can make some young adults feel resentful and angry, as it highlights the fact that they have so little power over their lives.

It’s not just that young people now rarely marry young, live independently, and start families before 25. Our understanding of adolescence has changed in recent years, as advances in neuroscience show us that the teen brain doesn’t magically mature at 18. Brain development doesn’t cease until well into the twenties, much later than we had

believed. Then there is the changed economic world into which this generation is being launched. University fees make them much more conscious of the need to earn a living but, in the meantime, the recession is clear in their memories. They don’t want simply to find a job but to get one that pays as well as, or more than, that of their peers (they share such details with each other), which is worthwhile not boring, and uses all their talents. In other words, their expectations are fairly unrealistic.

Young women were more likely than young men to be showing signs of distress, according to many sources. Eating disorders and self-harm are increasing; women’s self-esteem is under attack, as they compare their shapes and faces with digitally enhanced celebrities and their relationships with each other. However in the 20 to 24 age group, men are four times more likely than women to kill themselves, and suicide is the most common cause of death among men under 35. This week, Nick Clegg, the deputy prime minister, announced a “zero suicide” ambition for the NHS, urging mental health services to provide better support to suicidal patients.

There is, however, a long road between feeling anxious about relationships or depressed about finding the perfect job, and ending your life. Many of the things that could improve a young person’s view of the world are simple lifestyle changes, such as these:

Be less sedentary

Being young and depressed can leave you not wanting to get out of bed in the morning. Getting to the gym, running, even going for a bike ride or a long walk, can all help with mental health too.

Endorphins released by exercise are sometimes described as the brain’s feelgood chemicals. Scientists are also intrigued by recent research at the Karolinska Institute in Sweden, which found that physical activity purges the blood of a substance which accumulates during stress and can be harmful to the brain. As one of the researchers put it, “The well-trained muscle function is reminiscent of that of the kidney or the liver.” In other words, exercise detoxes harmful chemicals from the body and that can alleviate depression.

Don’t skimp on sleep

For depression and anxiety, a simple response is to try to get some sleep. Young people often see sleep as a waste of time; what will they miss out on? Yet they are still at the stage of needing solid amounts of sleep: about nine hours is recommended for teens and young adults, and neuroscientists believe that

teens run on a different circadian rhythm to older people, getting tired later but needing no less sleep.

Depression can cause insomnia but not getting enough sleep can also exacerbate low moods. To get to sleep you need to be somewhere quiet, dark and relatively warm, but also, don’t take your devices: the latest research shows that back-lit reading makes it harder to fall asleep and affects daily rhythms of alertness. Just a few early nights can transform your negative view of the world.

Don’t overuse social media

Social media, such as Facebook, Twitter, Instagram and Snapchat, is a powerful force for young people: it keeps them in touch with friends, spreads their networks and can expand their knowledge and experience.

But it can also stir up envy and paranoia and harm self-esteem. A study of 960 college students published in the *International Journal of Eating Disorders* has shown how Facebook can affect women’s body image. “In examining the immediate consequences of Facebook use, we found that 20 minutes of use contributed to higher weight and shape concerns and anxiety compared to a control internet condition,” it noted.

There is much academic debate over whether social media or even the internet is damaging to young minds: the truth is we don’t know. But many psychologists will urge people to limit the screen time of their children, as it can become addictive. This is just as true of young adults, who check their phone, on average, 150 times per day.

As Percy says: “Despite being more connected in a virtual way [by social media], many students feel more isolated, as they believe they have to present a perfect image to others.”

Make friends in the real world

A young person will be more true to themselves when they are physically present. As the psychologist Carl Pickhardt says, “An adolescent’s internet identity is carefully crafted ... to define self, publicise personal image, enhance social standing and attract attention, particularly of peers.” When we are forced to be spontaneous, our true self is more evident but that can bring its own anxiety. As the psychotherapist Philippa Perry says, “In the long run, covering up your true self — knowing what to say and how to be with others — can seem so hard that it feels easier to be lonely than taking the risk of rejection. If we feel lonely and always keep part of ourselves hidden it may feel that at least that vulnerable part is safe.”

Moderate your drinking

Self-medicating with alcohol may seem like it would help — or at least give you a break from your low moods or anxious thoughts. But alcohol is a depressant. Moderation is the key when it comes to alcohol and emotional problems, otherwise the hangover can be more than a headache, with days of low mood, even



Kat Brown, now 32, has finally conquered her demons

self-loathing. It’s a similar story with recreational drugs: if they are feeling low or anxious, many young people feel that drugs such as Ecstasy, cocaine or amphetamines may lighten the load.

But the after-effects of the drugs can often lead to low moods or increased anxiety, ratcheting up the original reason for taking them. Most people who work in this area are definite about this: stay away from recreational drugs, particularly if you are suffering from depression or anxiety.

Avoid stimulants

Food is also important. People with anxiety are advised to avoid coffee, tea, cola, chocolate, anything stimulating. Aim to get closer to a Mediterranean diet, eating plenty of fruit, vegetables, protein and complex carbohydrates with nuts and olive oil rather than refined sugars, saturated fats and processed ready meals.

Make plans for your future

It may feel as if life is happening to you, but not having full autonomy doesn’t mean you shouldn’t be making plans. Ignore the empty brags of others, and try not to be sucked into relating everything to time — catastrophising because it’s six months since your last exam, job interview, whatever. What matters is what is happening now.

The independent careers counsellor Dr Anne Wilson says graduates need to stop fruitlessly fretting and get organised. Challenge your assumptions about what kind of job you want by asking difficult questions: are these my own intentions or aspirations, or those that come from someone else; what is really important to me in a job? (money/status/doing good/leaving time for other interests).

Practise mindfulness

They won’t appeal to everyone but mindfulness techniques can help with many of the issues that drag young people down. There are numerous books (*Mindfulness* by Gill Hasson is bite-sized and practical; Jon Kabat-Zinn writes more about the philosophical basis of meditation), as well as popular apps such as Headspace and 7 Steps of Calm.

The principles behind it are particularly applicable to the way that many young people think. Rather than regretting the past or worrying about the future, you are encouraged to live in the moment, which has a calming, positive effect.

Seek professional help

As Becky Varley-Winter, a recent graduate now teaching at Cambridge University, wrote on my wellbeing site wellbeing.org, if you feel overwhelmed by anxious feelings or low moods, “Talk to someone. Everyone will struggle at some point, even if they sail through university on clouds of joy. If you’re suffering, do not feel ashamed. Speak to yourself as if you are a tiny, wounded bird that you are nursing back to health.”

If you’re a student, go to the counselling service; if not, start with a conversation with your GP. You may be able to see a therapist on the NHS, though the wait is often long and the choice (largely cognitive behavioural therapy) is limited. If you decide to go private, some therapists and counsellors offer concessions.

If they can’t help you, they can direct you towards people who can. Crucially, don’t feel that no one cares but remember, you need to let them know you are in need.

Louise Chunn is founder of wellbeing.org, a find-a-therapist directory and wellbeing site

‘I felt appalling — I couldn’t bear my own company’

Depression has always seemed an ineffectual name for an affliction with infinite varieties. My illness — I prefer to call it “mind spiders” or “relentless f***ing misery disease” — was triggered by bullying. As a clever, tall seven-year-old I was moved up a school year and missed a year of socialising. Gangly, nerdy and ginger, when I went to secondary school, I was a plum target.

By 12 I felt isolated and awkward, so when a fog settled in my mind, I barely realised it was happening. Maybe I was just a bad child who didn’t deserve happiness. Depression is exquisitely good at papering itself over your personality. How do you know you are ill when your only barometer of normal is what’s inside your head?

In my teens, my normal became my mind screaming at me daily. I had the self-esteem of a potato. Feeling constantly anxious, occasionally cutting my wrist to release the build-up of pressure in my head — that was normal. I loved drama and reading, anything that let me become someone else.

From 13 onwards, when alone I endured suffocating periods of terror that felt endless. I also experienced anxiety, which often prevented me from sleeping. It should have been obvious that all was not well, but despite the fact that one in four people in Britain experiences a mental health problem each year, realising that person is you can be tricky.

Mental health problems, I thought, were something that happened to other people. Yes, I felt appalling 60 per cent of the time and couldn’t bear my own company but still: I had friends, and by 16, a steady boyfriend. I got good exam results. I had a life. It was everything outside that life that was a problem.

When I started my languages degree at Durham University in 2000, it felt like a wonderful escape. I adored life. Sports, clubs and college meant I didn’t have to be alone. I existed in an ever-fluctuating series of mood swings, drinking too much and behaving like a firework that burns out and reignites seconds later. I would fire on all cylinders, and then dip, and be so exhausted I didn’t even have the energy to sleep.

Unsurprisingly, I started to fail part of my course and the fear of losing this place where I felt safe became overpowering. I felt shame about feeling broken. Talking to other sufferers, I’ve realised what an obstacle that is to getting help. We are judged on our personalities: what do you do when yours seems to be faulty?

I finally went to my family doctor midway through my second term, aged 18, when I had had a particularly nasty anxious episode. I was blissfully relieved to hear that wanting not to exist and having a suicide plan was not normal. I

was given antidepressants but no diagnosis — not that that would have mattered, it was just lovely to know my head could change.

By the time I left that doctor’s surgery clutching a prescription, I had long made my home life a misery. Take your stereotypical teenage nightmare, multiply it by explosive rage and screaming, and you have the joy that was me for several years. I was so frustrated that my parents couldn’t understand — or solve — the fizzing anxiety in my head which I couldn’t explain either. Depression is as singular as the mind, which is deeply unhelpful for both the sufferer and the person wanting to help.

Caring for a friend or relative with depression can be extremely hard, particularly if they won’t admit that they are ill or don’t know. My mum recently told me that she and my dad did a lot of work, such as talking to my GP, which I never noticed, locked as I was in a prison of panic and isolation.

Things stabilised when I was 20, thanks to new medicine and good friends. When I came back from my year abroad, most of my fabulous party friends had graduated. I made new friends in student theatre and journalism and became better friends with girls from my course. I wasn’t good at speaking about how I was feeling to my friends but it helped that I regained some focus.

Aged 21, and heading towards my finals, I was still struggling to sleep and I insisted on getting some sleeping pills that actually worked. Given my history, the doctor was reluctant to prescribe too many. I ended up with four Temazepam in total and guarded them like jewels for really bad occasions, like when I hadn’t been able to work, or felt unmanageably exhausted and low. I also went on Fluoxetine (another antidepressant) and felt more balanced than I had done in years.

Depression doesn’t only cause misery; it has other superpowers. However well I seemed to do, I felt like a fraud. When I started working as a journalist in 2005, I was desperate to impress in my personal and work relationships. I put myself under intense pressure and I made bad choices in who I dated and how much I drank, all of which made me stressful to be around.

But the cloud slowly began to lift — I don’t know why. It could have been the

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routine of adult life and work that helped, or it could just be that my mind changed and I grew out of it. I still felt insecure but the depressive lows began to pass. My mind seemed less jagged. I came off medication in 2007 at age 24, and began to wobble towards healing. I started exercising, first by walking to work, then a bit of jogging. Feeling kindness towards my body was a huge step and something my mind had never allowed me before.

I finally spoke out about depression in 2011 when one of the funniest, brightest girls in my school year took her life weeks before her 30th birthday. I felt total fury at depression for stealing her away from the people who loved her. I wanted to do something, anything. After writing about it, I joined the media advisory board for Time to Change,

which campaigns against mental health stigma. I started running seriously in 2013, raising money for the charity Mind, and last year I ran the London Marathon for them.

After experiencing a dip two years ago, I tried cognitive behavioural therapy. Thanks to a brilliant therapist I finally addressed all the stuff I’d packed away: my self-esteem; feeling almost alien because of my untypical appearance (I am 6ft 1in); keeping loved ones at a distance in case they realised the real me was too rubbish to care for. I kept the odd note on my phone. One reads: “Today I suspect we got to the crux of the matter with Doctor Steve. It sounds as though you think you are defective.” That hit the nail on the head. Speaking to people about depression has meant a trail of discoveries that seem glaringly obvious, but aren’t when you’re alone.

These days, I have contingency plans for when I get that prod of barbed wire to the head. I’m more aware of the links between my body and mind, and the limitations of each. My diary is no longer triple-loaded and chaotic. Music and exercise are important, whether parkrun (5km timed runs) and breakfast with friends on a Saturday, or singing in a choir. The routine, camaraderie and beauty of music helped me feel calmer.

I am now, age 32 and 20 years down the line, at a stage where I can acknowledge that sometimes my brain will act in a way that is not “me”. That may never change. But the fact I realise I am not less of a person because of it makes all the difference.

I can now feel dispassionate about my depression. But it is telling that I only really feel confident speaking about it when I am not connected to it on a daily basis. For people who suffer constantly, speaking up can be extremely difficult. Knowing that other people have been there is crucial because depression feeds on shame and fear. It sneaks up on people in the isolation of their own head.
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More information: time-to-change.org.uk; mind.org.uk