

### Post-Test Questions and Answers

1. What percentage of people in the general population is likely to have major depression in their lifetime?
  - a. 1 out of 2
  - b. 1 out of 6
  - c. 1 out of 50
  - d. 1 out of 100
  - e. 1 out of 1,000

**B.** According to the National Comorbidity Survey, which looked at a national sample of 10,000 people in the U.S., there is an almost 1 in 6 chance of experiencing major depressive disorder in the lifetime. There is a 7% chance of experiencing major depressive disorder in any one year period.

2. The Patient Health Questionnaire 2 (PHQ-2) is made up of which questions?  
**(Select all that apply)**

Over the ***last 2 weeks***, how often have you been bothered by any of the following problems?

- a. Feeling tired of having little energy
- b. Little interest or pleasure in doing things
- c. Trouble concentrating on things, such as reading the newspaper or watching television
- d. Feeling down, depressed, or hopeless
- e. Feeling bad about yourself – or that you are a failure of have let yourself or your family down

**B and D.** The PHQ-2 is made up of 2 questions which correspond to the 2 core symptoms of major depressive disorder as defined by the Diagnostics and Statistical Manual (DSM 5). Answers A, C, and E are also symptoms of depression but are not part of the PHQ-2.

3. Only clients who have a total PHQ9 score of 20 to 27 points (Severe depression) should be referred for further assessment of depression.
  - a. True
  - b. False

**False.** It is recommended that persons who score 10 or higher, which indicates moderate to severe depressive symptoms, be referred for further assessment of depression. Even moderate symptoms of depression may have impacts on someone's health and quality of life. Seeking treatment early is an important prevention strategy.

4. The PHQ2 and PHQ9 are well-studied tools that are used to provide a definitive diagnosis of major depressive disorder.
  - a. True

- b. False

**False.** The PHQ-2 and PHQ-9 are brief **screening** tools for depression. They do not provide a **definitive diagnosis** of depression. A clinical diagnosis of depression can be provided by a more detailed assessment done by a health or mental health professional.

5. Depression is:

**(Select all that apply)**

- a. A normal and acceptable part of the older adult experience
- b. An emotional disturbance usually experienced by persons with weak morals
- c. A physical disorder of the brain
- d. A disorder that almost never occurs among persons with Alzheimer's disease
- e. A disorder that often occurs among persons with chronic illness

**C, D, and E.** Especially in the past, some people believe that depression is a normal part of aging (A) or due to weak morals (B) but research shows that there is a biological basis to depression and it is a physical disorder. Depression occurs in about 20% of people with Alzheimer's and is the most common, treatable risk factor for dementia. Depression often occurs among people who have chronic illnesses.

6. Some people with depression may report not feeling sad.
- a. True
  - b. False

**True.** Some people with depression may not report feeling sad but may have other symptoms of depression such as fatigue, weight changes, or trouble with sleep. If the person reports a loss of interest (anhedonia), they meet criteria for one of the two core symptoms of major depressive disorder even if they do not report sadness.

7. When giving someone the PHQ2 and PHQ9, you ask them to answer based on:
- a. The past week of their life
  - b. The past 2 weeks of their life
  - c. The past month of their life
  - d. The past 3 months of their life
  - e. None of these

**B.** The PHQ2 and PHQ9 evaluate the person's symptoms from the last 2 weeks of their life. Symptoms may have been present for longer than 2 weeks. This corresponds to the diagnostic criteria for major depressive disorder as defined by the Diagnostics and Statistical Manual (DSM 5).

8. When administering the PHQ9, you should use good own judgment as to whether to ask about suicide because bringing up the subject may give the person the idea to kill themselves.
- True
  - False

**False.** Research has shown that asking someone about suicidal thoughts does not give the person the idea to kill themselves. In fact, most people who are experiencing suicidal thoughts find it to be a relief when someone notices their situation and asks them about it.

9. Based on national statistics, which group has the highest rate of death by suicide?
- Black male older adults
  - White male teenagers
  - White males older adults
  - Black females in middle age
  - White females in middle age

**C.** Based on national statistics, white older men have the highest rate of suicide. Suicide rate for persons 85+ is highest of all at twice the overall national average.

10. The PHQ9 can be used for:

**(Select all that apply)**

- Educating the client and/or family member about depression symptoms
- Communicating with the client's doctor about their depressive symptoms
- Making a definite diagnosis of major depressive disorder
- Tracking the client's depressive symptoms over time
- Forcing the client to take medication for depression

**A, B, D.** The PHQ9 is a good tool for educating people about the symptoms of depression, can be shared with healthcare providers to illustrate someone's depressive symptoms, and can be given more than once over time to see if someone's depression has improved, stayed the same, or gotten worse. It is **not** a diagnostic tool even though it was developed based on diagnostic criteria from the DSM-5. Screening for depression is also unrelated to forcing someone to take medication or accept treatment.