

Reducing the burden of depression requires united action by diverse stakeholders

Recommendations from Time for united action on depression: a *Lancet*–World Psychiatric Association Commission

The general community

Including people with lived experience of depression

Health care practitioners

Seek help early — it increases the chances of prevention and recovery

Be proactive in recognising early the risks and consequences of depression

Talk with family and friends — knowing that depression is a common human condition

Learn about the many presentations of depression — and about the lived experience of the illness

Always remain hopeful — most people will recover

Personalise your approach — “one-size” does not “fit all”

Seek evidence-based care — focus on support for your own priorities

Prioritize the therapeutic alliance — engage families where appropriate and provide care with dignity and without stigma

Become an ally — speak up for societal changes that support mental health

Practice collaborative care, working with patients and other providers to achieve optimal outcomes

Design and test therapies addressing early and novel interventions

Respond to the experience of people with depression and to the science

Develop precision medicine approaches for prevention, care and recovery

Invest in early intervention and sustained depression care

Identify under-used and novel prevention targets from social determinants to individual vulnerabilities and engage in program and policy implementation

Support the scaling up of community- and rights-based depression care

Engage with people who have experience of depression, their families, practitioners and policymakers

Invest in prevention and promotion, tackling inequities in children, young people and across the life course

Understand the aetiology and nature of depression and the need for multidisciplinary approaches

Invest in depression research

Researchers

Decision makers

Read the Commission:
www.thelancet.com/commissions/united-action-on-depression

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