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DEPRESSION IN THE WORKPLACE

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Success in the work environment depends on everyone's contribution. That's why no one in the workplace can afford to ignore depression.

The ordinary hurdles of modern life may trigger depression. People may feel bad as they encounter them but then feel better when they get beyond them.

The experience of some degree of depression is universal. That's why employers have such a difficult time identifying the more serious forms of depression that can affect a person, resulting in deterioration of relationships and job performance. These forms are known as clinical depression.

Depression tends to affect people in their prime working years and may last a lifetime if untreated. More than 80 percent of people with clinical depression can be successfully treated. With early recognition, intervention, and support, most employees can overcome clinical depression and pick up where they left off.

Know The Facts

- Depression ranks among the top three work problems for employee assistance professionals, following only family crisis and stress.
- In dollars and cents, 10% of the Canadian workforce or 1.4 million people suffer from depression and only 6.5% of those or about 187,500 get appropriate treatment.
- Mental illness costs the Canadian economy about \$16 billion each year.
- Almost 15% of those suffering from severe depression will commit suicide.

Still more business costs result when an employee or colleague has a family member suffering from depression. The depression of a spouse or child can disrupt working hours, lead to days absent from work, effect concentration and morale, and decrease productivity.

The various forms of depression are on the rise. Incidents of clinical depression have increased in every decade this century, and the age when people are first affected has dropped.

Some of the common forms of depression include:

- **Burnout.** This overused term was first applied to hard workers who, after many years, reached the limits of their energies, attention or commitment. Today it also includes shorter-term work experiences whose results may be frustrating or even alienating.

Victims of burnout can become cynical, hypercritical and disruptive – or withdraw into antisocial behavior and alcohol or drug abuse.

Overt symptoms of burnout can include changes in the depressed person's attitude, behavior and job performance. The victim of burnout can throw a tantrum or a wrench and is likely to exhibit negative and defensive resistance to intervention by co-workers or superiors.

- **Adjustment disorder.** This is the most common form of workplace depression. It has been estimated that one-quarter of people can handle stressful change without missing a beat, and that about 50 percent can adjust to stressful change within a few weeks. The remaining 25 percent often experience continuing difficulties that may lead to clinical depression.

With change occurring constantly in today's workplaces, adjustment disorder is clearly on the rise.

Organized downsizing, rightsizing and re-engineering obviously take their toll, but other stressful changes are exerted by a competitive marketplace, fewer opportunities for higher-rising employees, and the stress of technological change.

Most people don't just sail through all of these changes without at least some discomfort.

Many effects of adjustment disorder occur internally, hidden from easy identification. Hidden reactions sooner or later result in behaviors that may be hard to trace to the actual cause.

Employees may seem to lose focus of their objectives or have a more difficult time solving problems. Supervisors can inadvertently make things worse by chiding employees for their shortcomings.

- **Dysthymia.** This strange, relatively new term to occupational and psychological medicine is roughly translated from Greek as "ill-humored."

This form of depression often begins slowly, almost imperceptibly, and increases over time, or under stress. A complex set of symptoms may include lack of enthusiasm, low energy, poor self-esteem and a general lack of concentration.

Dysthymia typically begins before the age of 30 and affects a projected 4 percent of the population, with women more frequently and chronically symptomatic. Some victims may deny their problem through intensified work efforts or outward hostility.

The ailment often contributes to such related disorders as alcohol or drug abuse.

- **Major depression.** The previous types of depression do not include the more advanced depressive ailments such as major depressive disorder, melancholia and bipolar disorder (manic depression) that may require long-term treatment or even hospitalization.

As a first line of defense against the corroding effects of depression in the workplace, occupational health plays a vital role. A review of an employee by an occupational physician can be accomplished in the perspective of the person's performance history and expectations.

Such an assessment often helps an employee recognize a problem before it reaches the career-threatening stage.

An occupational health physician can facilitate effective intervention by stimulation “self-help” or by referral for formal counseling. In my experience, these kinds of assessments are as beneficial to the individual as to the employer. They can relieve the necessity for disciplinary action or further invasion of the worker’s personal life. All employees should be able to rely on a psychologically supportive working environment.

The Top Ten Sources Of Workplace Stress

1. Too much or too little to do: the feeling of not contributing and having a lack of control.
2. Lack of two-way communication between management and employees.
3. Being unappreciated.
4. Inconsistent performance management processes: employees get raises but not reviews or get positive evaluations but are then laid off.
5. Career and job ambiguity: things affecting employees’ workload change without them understanding why.
6. Unclear company direction and policies.
7. Vicious office politics disrupting positive behavior and creating mistrust.
8. Pervasive uncertainty about the future of the organization, and the employees’ role in it.
9. Random interruptions.
10. The treadmill syndrome: too much to do all at once.

Many companies are helping employees with depression by providing training on depression and other mental disorders for supervisors, employee assistance, and occupational health personnel. Employers are also making appropriate treatment available through employee assistance programs and through company-sponsored health benefits. Such efforts are contributing to significant reductions in lost time and job-related accidents as well as marked increases in productivity.

How To Recognize Depression In The Workplace

Everyone gets ‘the blues’ or feels sad from time to time. However, if a person experiences these emotions intensely and for long periods of time, it may signal clinical depression, a condition that requires treatment.

Clinical depression affects the total person – body, feelings, thoughts, and behaviors – and comes in various forms. Some people have a single bout of depression; others suffer recurrent episodes. (Still others experience the severe mood swings of bipolar disorder -- manic-depressive illness -- with moods alternating between depressive lows and manic highs.) No two people experience depression in the same manner. Symptoms will vary in severity and duration among different people.

Symptoms Of Depression Include

- Persistent sad or ‘empty’ mood.
- Sleeping too little, early morning awakening, or sleeping too much.
- Reduced appetite and/or weight loss, or increased appetite and weight gain.
- Loss of interest in activities once enjoyed, including sex.
- Restlessness, irritability.

- Persistent physical symptoms that don't respond to treatment (such as headaches, chronic pain or digestive disorders).
- Difficulty concentrating, remembering, or making decisions.
- Fatigue or loss of energy.
- Feeling guilty, hopeless or worthless.
- Thoughts of suicide or death.

If five or more of the symptoms of depression or mania persist for more than two weeks, a thorough diagnosis is needed. This should include a complete physical checkup and history of family health problems as well as an evaluation of possible symptoms of depression.

Signs Of Depression In The Workplace

- When a person is depressed, they may stop caring about their own safety. Look for risk taking and proneness to accidents.
- A depressed person can go through a wide variety of moods, such as irritability, anger and sadness. They may become uncooperative or sulky.
- Be on the lookout for morale problems. Employees may express dissatisfaction with themselves, their home life, or their job.
- Depression can make a person feel fatigued. Listen for frequent statements of how tired they feel.
- Absenteeism may rise. Because it is not socially acceptable to take off work for depression, employees may frequently call in sick with other complaints such as colds or flu.
- It is very common for those with untreated depression to self-medicate with drugs or alcohol.
- Look for signs of decreased productivity and loss of pride in work.
- People who ignore the stresses in their lives are most prone to psychosomatic illness. Listen for complaints of unexplained aches and pains.

Treatments Are Effective

John had been feeling depressed for weeks though he didn't know why. He had lost his appetite and felt tired all the time. It wasn't until he couldn't get out of bed any more that his wife took him to a mental health professional for treatment. He soon showed improvement and was able to return to work.

Mary couldn't sleep at night and had trouble staying awake and concentrating during the day. After visiting the doctor and being put on medication for depression, she found that her symptoms disappeared and her work and social life improved.

More than 80% of people with depression can be treated effectively, generally without missing much time from work or needing costly hospitalization.

There is a choice of treatments available, including medications, psychological treatments, or a combination of both. These treatments usually relieve the symptoms of depression in a matter of weeks.

Treatments Are Available Through:

- Physicians
- Mental health specialists
- Employee assistance programs
- Health maintenance organizations
- Community mental health centres
- Hospital departments of psychiatry or outpatient psychiatric clinics

What Can The Employer Say?

“I’m concerned that you’ve been late to work recently and aren’t meeting your performance objectives... I’d like to see you get back on track. I don’t know whether this is the case for you, but if you have a personal problem you can speak confidentially to one of our employee assistance counselors. The service was set up to help employees who are experiencing personal problems. Our conversation today and your appointment with the counselor are confidential. Whether or not you contact this service, you will still be expected to meet your performance goals.”

If an employee voluntarily talks with you about health problems, including feeling depressed or down all the time, keep these points in mind:

- Do not try to diagnose the problem yourself.
- Recommend that any employee experiencing symptoms of depression seek professional consultation from an EAP counselor or other health or mental health professional.
- Recognize that a depressed employee may need a flexible work schedule during treatment. Find out about your company’s approach by contacting your human resources specialist.

An Overall Guide To TACKLING DEPRESSION IN THE WORKPLACE

- Educate management about depression.
- Target depression financially: set measurable financial goals such as reduced absenteeism.
- Review corporate medical programs and employee health benefits.
- Familiarize yourself with your company’s health benefits. Find out if your company has an employee assistance program (EAP).
- Make sure your EAP staff is trained to recognize depressive disorders, make appropriate referrals, and provide other assistance consistent with policies and practices.
- If need be, work with national or community organizations to obtain, display, and distribute information about depression at your workplace and provide employees with referrals to treatment.

- Survey staff. Find out their issues, stressors, problems and complaints.
- Combat employee enslavement by email and vice mail to temper information overload (eg., introduce protocols that limit access to certain hours, set up filters to screen out junk emails and limit personal use).
- Recognize when employees shows signs of a problem affecting performance. Be sensitive to the fact that physical conditions such as heart disease and addictions are sometimes rooted in underlying depression.
- Discuss changes in work performance with the employee and refer appropriately. When a previously productive employee begins to be absent or tardy frequently, or is unusually forgetful and error-prone, he/she may be experiencing a significant personal or health problem.
- Recognize that a depressed employee may need a flexible work schedule during treatment. Find out about your company's approach by contacting your human resources specialist.
- Remember that severe depression may be life-threatening to the employee, but rarely to others. If an employee makes comments like "life is not worth living" or "people would be better off without me," take the threats seriously. Immediately call an EAP counselor or other specialist and seek advice on how to handle the situation.

“PEOPLE HELPING PEOPLE.”