



## *Depression in the Workplace*

### *Aurora Employee Assistance Program*

*800-236-3231*

*[www.AuroraHealthCare.org/eap](http://www.AuroraHealthCare.org/eap)*

*Plus Stress and EAP for Manitowoc  
Chamber*

- Define depression & identify symptoms
- Make the connection between chronic stress & depression
- Identify health care costs & costs to business from depression
- Identify intervention strategies

# *What is Depression?*

- Multiple causes of depression
  - Life experiences
    - effects of chronic stress
  - Genetics
  - Other medical illnesses
  - Personality factors



## *Depression vs. “The Blues”*

- Depression
  - an illness
  - multiple symptoms
  - persistent
  - can result in suicide
  - requires specific psychiatric treatment
- “The Blues”
  - a normal reaction
  - single symptom of mood changes
  - temporary
  - rarely suicidal
  - requires support system

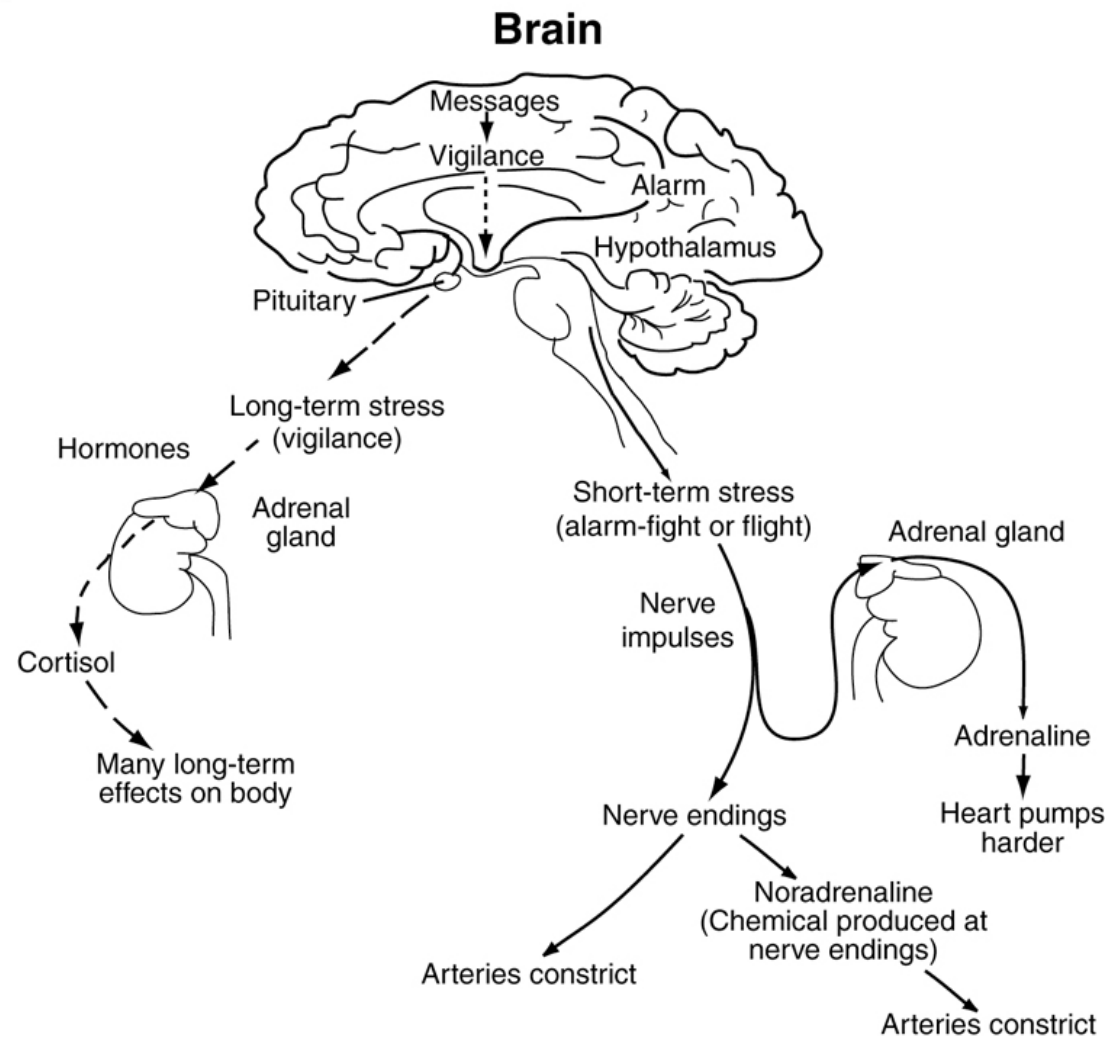
## *Who Suffers From Depression?*

- Within any 1 year period, nearly 10% of adult Americans will have depression, more than 19 million people
- Fewer than 50% of those suffering from depression seek treatment
- 1:5 adults may experience a depression at some point in lifetime

## Who Suffers From Depression? *(continued)*

- Twice as many women as men experience depression
- Depression is present at the following rates in individuals within these disease groups
  - cancer - 25%
  - diabetes - 6% in 9-17 year olds, 10% in adults
  - heart disease - 33%
  - stroke - 10-27% have depression, 15-40% have some depressive symptoms
- *Success rate for treatment of depression is 80%*

# The Stress-Depression Connection



## Stress & Physical Health Claims

- Individuals with depression had twice the health care expenditures than that of non-depressed individuals

(David S. Sobel, MD [www.healthy.net/scr/column.asp?ColumnId=8&ID=182](http://www.healthy.net/scr/column.asp?ColumnId=8&ID=182))

- Individuals reporting significant stress have 70% higher overall healthcare costs

(Golaszewski, 1992)

- Individuals reporting multiple psychosocial symptoms have 147% higher overall healthcare costs

(Golaszewski, 1992)



### According to a Kaiser study:

- 90% of the ten most common complaints in primary care had no organic basis
- ten-year follow up study found no organic conditions emerged to explain these complaints
- Psychologically distressed individuals utilize health care 2-3 times more often than non-distressed individuals

- One-third of employees absent from work due to depression will be out for more than a month  
<http://www.metlife.com/Applications/Corporate/WPS/CDA/PageGenerator/0,1674,P7328%257ES491,00.html>
- In 1990, depression was the 4<sup>th</sup> leading cause of disability worldwide
- By 2020, it is estimated depression will be the 2<sup>nd</sup> leading cause of disability worldwide
- 53% of respondents in W. M. Mercer (1998) survey believed return to work is more difficult following psychiatric disability than after physical disability

- According to a 2000-2002 Bank One study, depression was
  - 2nd leading cause of short-term disability event
  - 2nd in total short-term disability days
  - longest average duration of all short-term disability events

- \$51.54 billion in workplace costs
  - \$36.25 billion for absenteeism
  - \$15.30 billion for reduced productivity
- \$26.09 billion in direct costs of treatment
  - \$8.88 billion for inpatient
  - \$6.80 billion for outpatient
  - \$10.40 billion for medications
- \$5.45 billion in loss of earnings due to depression induced suicides
- \$83.08 billion annual in United States

## *Signs of Stress*

- Muscle tension
- Rapid Heartbeat
- Gastrointestinal distress
- Shortness of breath
- Fatigue
- Headaches
- Social withdrawal
- Overeating
- Increased substance use
- Anxiety
- Irritability
- Anger outbursts
- Feeling defensive
- Diminished problem solving skills
- Difficulty with multi-tasking
- Negative thinking
  - worry
- Lack of enthusiasm

## Symptoms of Depression

- Persistent sad, anxious or “empty mood”
- Feelings of hopelessness, pessimism
- Feelings of guilt, worthlessness, helplessness
- Loss of interest or pleasure in hobbies and activities once enjoyed



- Insomnia, early morning awakening or oversleeping
- Appetite and/or weight loss or vice versa
- Decreased energy, fatigue, being “slowed down”

## *Symptoms of Depression* (continued)

- Thoughts of death or suicide; suicide attempts
- Restlessness, irritability
- Difficulty concentrating, remembering, making decisions
- Excessive crying



- Decreased productivity
- Morale problems
- Decreased team member skills
- Lack of cooperation
- Social withdrawal
- Safety problems, accidents
- Absenteeism, tardiness
- Frequent complaints of fatigue
- Complaints of unexplained aches & pains
- Alcohol and drug abuse

## *Risk Factors for Depression*

- Chronic stress
- Poor stress coping skills
- Lack of social support
- Prior depressive episodes
- Family history of depression
- Female
- Postpartum state



## *Types of Depression*

- Major depression
- Dysthymia
- Bipolar disorder
- Seasonal Affective Disorder



## *Intervention Strategies*

- Helping the employee
- Supporting the supervisor/manager
- Supporting the organization



- Support stress management efforts
- Education about depression in the workplace
- Intervening with employee
  - review any work performance issues
  - describe employee's value to the organization
  - express hope for employee
  - refer to EAP

- When referred to EAP the employee will receive:
  - psychosocial assessment
  - problem solving to identify next steps
  - referral to in-network treatment provider
  - follow-up after referral

- Education
- EAP can provide coaching for intervention
- Job accommodation consultation
- Return to work support
- Addressing employee ability to function and relationships with co-workers
- Use of EAP supervisory referral



## *Fostering Positive Relationships*

- Supervisor role & responsibility to promote positive relationship with affected employee
- Respecting privacy/confidentiality when supervisor does not know specifics or if other employees ask questions about affected employee



## *Examples of Job Accommodation*

- Allow employee to return to work gradually
  - work half-time for several weeks
  - use of non-continuous FMLA
- Support for concentration deficit
  - allow for more frequent breaks
  - divide large assignments into smaller tasks
  - allow use of a headset with calming music

- Support for memory deficits
  - allow employee to tape record meetings
  - allow additional training
  - provide checklists

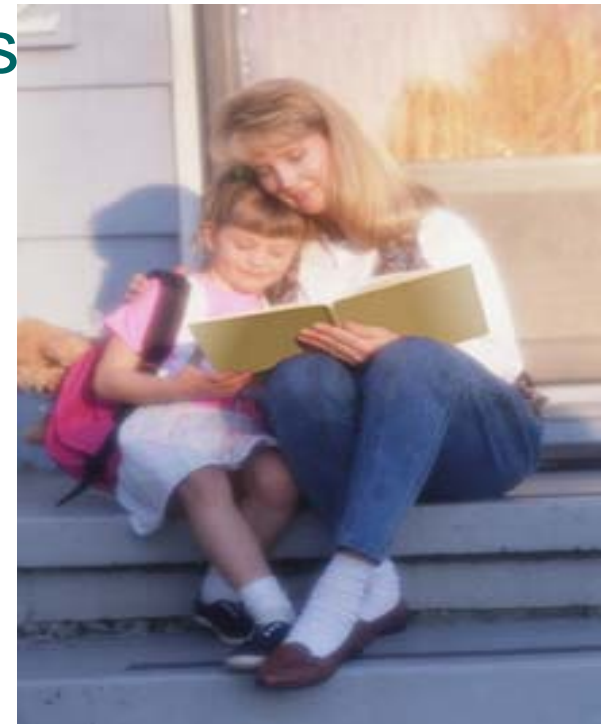
The Aurora Employee Assistance Program is an effective resource:

- to assist employees and their family members in resolving personal problems
- to help all in the organization maintain their well-being and productivity
- To help employees be focused on work while at work; and home while at home

# Special EAP Work-Life Services

Special  
Health Care®

- Child care assessment & referrals
- Elder care assessment & referrals
- Legal consultation
- Financial consultation





# Issues That May Affect Job Performance

Health Care®

- Stress
- Depression and anxiety
- Relationship conflicts
- Parenting issues
- Grief and loss



# Issues That May Affect Job Performance (continued)

- Balancing home and work
- Alcohol/drug abuse or other addictions
- Financial & debt problems
- Child care or elder care concerns
- Legal problems

## EAPs will:

- Provide assessment and/or problem-solving (help identify the problem)
- Evaluate the scope and complexity of the problem
- Refer to appropriate resources, if necessary
- Maintain confidentiality
- Promote positive stress management skills in the workplace

## How is your organization doing?

- Job performance
- Safety practices
- Interpersonal relationships
- Cooperation between & amongst teams







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Health Care®

# Symptoms of Problematic Workplace

- Diminished productivity
- Poor work habits or decline in quality of work
- Increased sick leave
- Excessive or unexcused absences
- Tardiness issues
- Extended personal phone calls
- Conflicts
- Safety concerns



- Decline in work performance
  - attendance, tardiness
  - productivity, accuracy, etc.
- When employee reports suicidal ideation at work
- EAP supervisory referral sequential process
  - 1 consult with Human Resources
  - 2 contact EAP Account Executive
  - 3 meet with employee to intervene

- Education
- Early intervention
- Integration of benefits
  - short term problem resolution sessions
- Care management
- Cost containment/analysis
- Policy development

- Americans with Disabilities Act
  - <http://www.jan.wvu.edu/> (800-526-7234)
- Family and Medical Leave Act
- Workers' Compensation

## *Other Community Resources*

- Mental Health America
- (also list websites...SAMHSA, etc)



*For more information...*

*Peter Moran*

*Account Executive*

*--or--*

*Steve Wagner*

*Business Development Specialist*

**800.236.3231**