WHAT TO DO WHEN A COWORKER IS DEPRESSED
A Guide for Caring Employees

DEPRESSION AFFECTS THE WORKPLACE

As a caring and conscientious employee, you may notice that some coworkers seem less productive than usual—they may often call in sick or arrive late to work, have more accidents, or just seem less interested in work. These individuals may be suffering from a very common illness called clinical depression. While it is not your job to diagnose depression, your understanding may help a friend or coworker get needed treatment.

Each year, depression affects at least 17.6 million adults, often during their most productive years-between the ages of 25 and 44.

Untreated clinical depression may become a chronic condition that disrupts work, family, and personal life.

Depression results in more days in bed than many other ailments (such as ulcers, diabetes, high blood pressure, and arthritis) according to a recent large-scale study published by the Rand Corporation.

In addition to personal suffering, depression takes its toll at the workplace:
- At any one time, 1 employee in 20 is experiencing depression.
- Estimates of the cost of depression to the nation in 1990 range from $30-$44 billion. Of the $44 billion, depression accounts for close to $12 billion in lost work days and an estimated $11 billion in other costs associated with decreased productivity.

There is, however good news. More than 80% of depressed people can be treated quickly and effectively.

The key is to recognize the symptoms of depression early and to receive appropriate treatment. Unfortunately, nearly two out of three people with depression do not receive the treatment they need.

HOW DO I KNOW IF MY COWORKER IS DEPRESSED?

You get to know your coworkers well when you work closely with them. You may even spend more time with them than you do with your own family. Sometimes you notice that things are not right, indicators that something is going on. But how do you piece the signs together to know that your friend is perhaps depressed?

Everyone gets the blues or feels sad from time to time. However, if a person experiences these emotions intensely or for two weeks or longer, it may signal clinical depression, a condition that requires treatment. Statistically one in four women and one in ten men can expect to develop depression at some point in their lives. These are self-reported figures but the actuals are probably the same percentage because men will not usually report preferring to “act like a man” and “tough it out”.

A person who is clinically depressed will exhibit a number of symptoms that are set out in the Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition – the DSM-IV. In case you do not have yours handy, here is an overview of what to look for: 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—sometimes called manic-depressive illness—with moods alternating between depressive lows and manic highs.

Symptoms of Depression Include

- **Persistent sad or “empty” mood**: The person feels empty and unfulfilled but does not know how to get meaning back into their life.
- **Loss of interest or pleasure** in ordinary activities: The person just does not seem to care about anything anymore - even topics or events that used to give them pleasure. The baseball fan does not care if his team won or lost. The mom does not care how her kids are doing at school. Nothing at all excites the depressed person.
- **Decreased energy, fatigue, being “slowed down”**
- **Sleep disturbances** (insomnia, early morning waking, or oversleeping)
- **Eating disturbances** (loss of appetite and weight, or weight gain)
- **Feelings of hopelessness, pessimism, guilt, worthlessness, helplessness**: The person will say things like “I’m no good” or “My work sucks” or “I bet I made a mistake” or “I deserve to get in trouble” even when work quality is average or above average. The person judges themselves by an unrealistic set of unachievable standards.
- **Thoughts of death of suicide; suicide attempts**: The person will say things like “Everyone would be better off if I were dead” or “I can’t go on like this” or “It will all be over soon” or “I wish I were dead”. This symptom demands immediate attention and not acceptance of the diversionary comment – “I’m okay, just leave me alone”.
- **Irritability**
- **Excessive crying**
- **Chronic aches and pains**
- **Difficulty concentrating, remembering, making decisions**: The person will take longer than normal to think things through - almost like he/she is daydreaming or is “out of it”. The person will just not seem to be able to make a decision wavering between both sides of a question. You may ask the person a question and get a response with a clearing shake of the head – “Whaat?”

In the Workplace, Symptoms of Depression Often May Be Recognized by

- Decreased Productivity
- Moral problems
- Lack of cooperation
- Safety risks, accidents
- Absenteeism
- Frequent statements about being tired all the time
- Complaints of unexplained aches and pains
- Alcohol and drug abuse

Get an Accurate Diagnosis

If five or more of the symptoms of depression persist for more than two weeks, or are interfering with work or family life, 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 by either a family doctor or mental health professional.
DEPRESSION AFFECTS EMPLOYEES

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.

Depression can affect a workers’ productivity, judgment, ability to work with others, and overall job performance. The inability to concentrate fully or make decisions may lead to costly mistakes or accidents. In addition, it has been shown that depressed individuals have high rates of absenteeism and are more likely to abuse alcohol and drugs, resulting in other problems on and off the job. Unfortunately, many depressed people suffer needlessly because they feel embarrassed, fear being perceived as weak, or do not recognize depression as a treatable illness.

TREATMENTS ARE EFFECTIVE

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.

As many as 80% of people with depression can be treated effectively, generally without missing much time from work or needing costly hospitalization. Effective treatments for depression include medication, psychotherapy, or a combination of both. These treatments usually begin to relieve symptoms in a matter of weeks.

WHAT CAN I DO?

So, what do you do or say to someone you think may be depressed? Here are some tips:

- Listen without judgment – Let the person talk without trying to push the conversation. Let there be gaps in the discussion if necessary. Let the depressed person set the pace but be willing to go at his/her speed. Offer emotional support, understanding, patience and encouragement.
- Don’t say patronizing things like – “You’ll feel better tomorrow” or “No big deal” or “You’d never kill yourself” or “Liven up”. Do say things like - “What can I do to help?” or “Is there anything I can do?” Do explain that depression is a medical condition, not a personal flaw or weakness — and that it usually gets better with treatment.
- Try to talk about the things that used to excite them – “How are your Blue Jays doing?” or “Great win last night” or “How are the kids?” or “Do you have any plans for this weekend”? Keep it light. Invite your coworker to lunch or other activities. Keep trying if he or she declines, but don’t push him or her to take on too much too soon. Although diversions and company are needed, too many demands may increase feelings of failure.
- Familiarize yourself with your company’s health benefits. Bloomington Hospital offers employees and their immediate adult family members FREE and CONFIDENTIAL help in dealing with personal difficulties that affect life and work. The EAP staff is there to help with issues such as depression, anxiety, stress, bereavement, parenting issues, marital issues, work stress, etc. Urge them to seek help.
- If you are concerned and the individual does not appear to be seeking help, or his/her symptoms appear to be worsening, inform your supervisor about what you have been noticing. Inform your coworker and invite him/her to come with you and speak for themselves.
If the behavior or comments are of a suicidal nature, do not ignore them and directly ask the person if they are considering taking their own life. If the answer is yes, immediately contact your supervisor so that he/she may get help for the person, even if it means taking them to the emergency department of the hospital.

If you are thinking about harming yourself, or know someone who is, tell someone who can help immediately.

- Call your doctor and/or supervisor at work. Or call the Bloomington Hospital Behavioral Health Access (353-5010)
- Call 911 or go to a hospital emergency room to get immediate help or ask a friend or family member to help you do these things.
- Call the toll-free, 24-hour hotline of the National Suicide Prevention Lifeline at 1-800-273-TALK (1-800-273-8255); TTY: 1-800-799-4TTY (4889) to talk to a trained counselor.
- Make sure you or the suicidal person is not left alone.

WHAT CAN YOU SAY TO A COWORKER?

“I'm concerned about you [insert name]. I have noticed you appear pretty down lately and I have missed seeing you around during lunch. I don’t know whether this is the case for you, but if you feel like you may be depressed, you can speak confidentially to our employee assistance counselor. The service was set up to help employees better handle life stressors”.

“I know that recently you have been complaining of being tired more often and just by observing you, you seem more stressed than usual. I'm concerned about you. You know that calling the Employee Assistance Program is an option if you feel like it may help. The service was set up to help employees with things like this”.

Many people are reluctant to seek help. If the fear is due to stigma about getting help, normalize the person’s feelings and let them know that there is nothing to be ashamed of about simply talking to someone. Services can be as therapeutic as they like, or simply a way to gain more coping skills. If the fear is that services are not confidential, remind them that they are.

For more help in how to approach coworkers about seeking help, please contact the Employee Assistance Program at 812.353.3450 and ask to speak to the EAP counselor.

Source:
National Institute of Mental Health, Ontario Lawyers Assistance Program, and Bloomington Hospital Employee Assistance Program