Is Depression a Roadblock to Career Success?

Media Symposium

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National Mental Health Association

The Economic Burden of Depression in the US:

How Did it Change Between 1990 and 2000?

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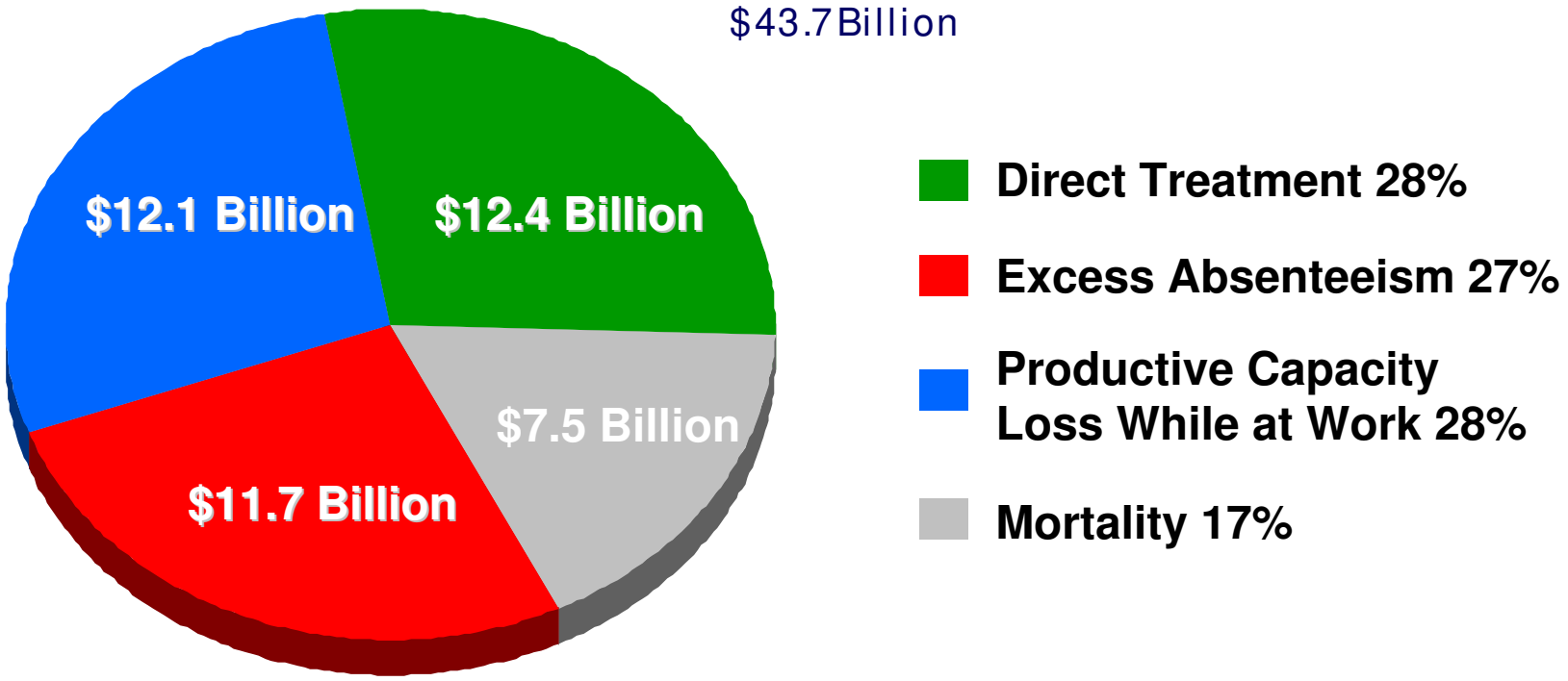
Depression in the Workplace

- Unlike most major debilitating physical illnesses, depression affects people in their prime working years
- Symptoms of depression, including inability to concentrate, chronic fatigue, debilitating pain, lack of motivation to accomplish even routine tasks, make high workplace costs more likely
- Depression is often a recurring or chronic illness, resulting in reduced productivity and “presenteeism”

Economic Burden of Depression in 1990



Source: Greenberg P, et al. The Economic Burden of Depression in 1990. *J Clin Psych*, 54:11, November 1993.

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Economic Burden of Depression: 1990 versus 2000

Type of Cost	1990 (in 2000 U.S. dollars)		2000		1990 to 2000 Change in Dollars, %
	Dollars (in millions)	Percentage of Total	Dollars (in millions)	Percentage of Total	
Direct Costs	19,883	25.7	26,087	31.4	31.2
Inpatient	**13,368**	**17.3**	**8,883**	**10.7**	**-33.6**
Outpatient	**4,632**	**6.0**	**6,803**	**8.2**	**46.9**
Pharmaceutical	**1,882**	**2.4**	**10,400**	**12.5**	**452.5**
Suicide-related costs	5,584	7.2	5,450	6.6	-2.4
Workplace costs	51,888	67.1	51,543	62.0	-0.7
Absenteeism	**39,450**	**51.0**	**36,248**	**43.6**	**-8.1**
Presenteeism	**12,439**	**16.1**	**15,295**	**18.4**	**23.0**
Total	77,355	100.0	83,080	100.0	7.4

Source: **Greenberg P, et al. The Economic Burden of Depression in the United States: How Did it Change Between 1990 and 2000? *J Clin Psych*, 64:12, December 2003.**

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Depression Costs per Patient: 1990 versus 2000

Type of Cost	1990 (in 2000 U.S. dollars) Cost/Case, $	2000 Cost/Case, $	1990 to 2000 Change in Cost/Case, %
Direct costs for treated depressed population			
Inpatient	**2,738**	**1,127**	**-58.8**
Outpatient	**949**	**863**	**-9.0**
Pharmaceutical	**385**	**1,319**	**242.2**
Subtotal	4,072	3,309	-18.7
Suicide-related costs for total depressed population			
Subtotal	319	302	-5.4
Workplace costs for employed depressed population			
Absenteeism	**3,810**	**3,169**	**-16.8**
Presenteeism	**1,201**	**1,337**	**11.3**
Subtotal	5,012	4,507	-10.1

Source: **Greenberg P, et al. The Economic Burden of Depression in the United States: How Did it Change Between 1990 and 2000? *J Clin Psych*, 64:12, December 2003.**

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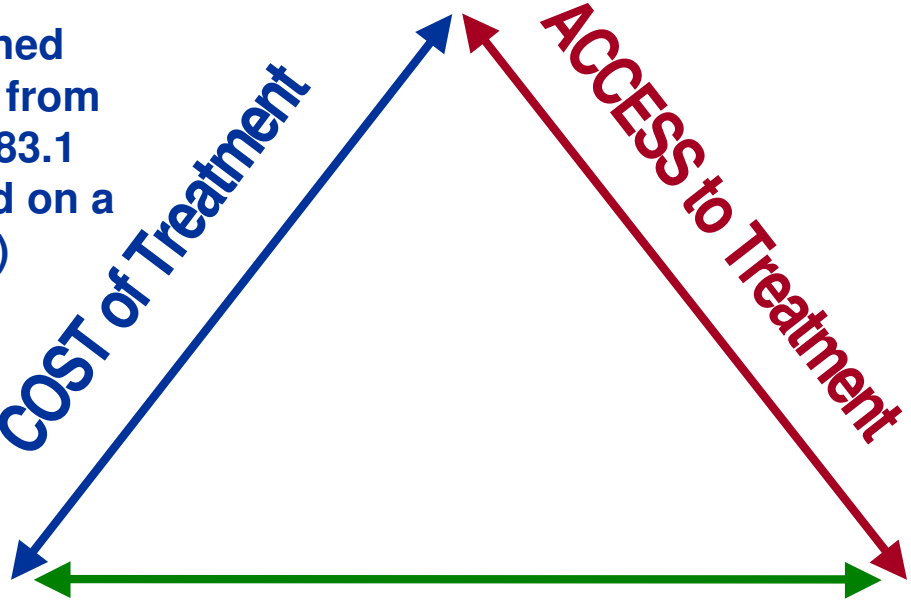
Dynamics of Treating Depression: Cost, Access & Quality

1990 - 2000

- **Total cost remained relatively stable, from $77.4 billion to $83.1 billion (measured on a consistent basis)**



- **Far more depressed people were treated in 2000 than in 1990 (44% v. 28%)**
- **Far more depressed people were employed in 2000 than in 1990 (11.4m v. 10.4m)**

- **Only 20% of depression sufferers currently receive appropriate care**

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Take Away: Room for Improvement

- 3 out of 5 still remain untreated; why?:
  - Continued stigma associated with mental illnesses
  - Lack of realization among sufferers that they need care
  - A belief that treatment would be ineffective for them
  - Impatience with slow-acting treatment and/or uncomfortable side-effects of treatment
- Quality of care still lacking ("people only half treated")
  - 50 to 85 percent of people who have been depressed will suffer a recurrent episode2

2 Melfi CA, Chawla AJ, Croghan TW, et al. The Effects of Adherence to Antidepressant Treatment Guidelines on Relapse and Recurrence of Depression. Arch Gen Psychiatry, 1998; 55:1128-1132.

Take Away: Future trends

- The employee, whose career trajectory is closely linked to his/her contributions to the workplace, will be increasingly vocal in terms of the health care coverage choices made by employers
- No employer is exempt from the adverse consequences of depression in the workplace

Closing thought

"…that men in general should work better when they are ill fed than when they are well fed, when they are disheartened than when they are in good spirits, when they are frequently sick than when they are generally in good health, it seems not very probable. Years of dearth, it is to be observed, are generally among the common people years of sickness and mortality, which cannot fail to diminish the produce of their industry."

Adam Smith, The Wealth of Nations, 1776

Is Depression a Roadblock to Career Success?

A Study of Depression in the Workplace

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Survey Goals

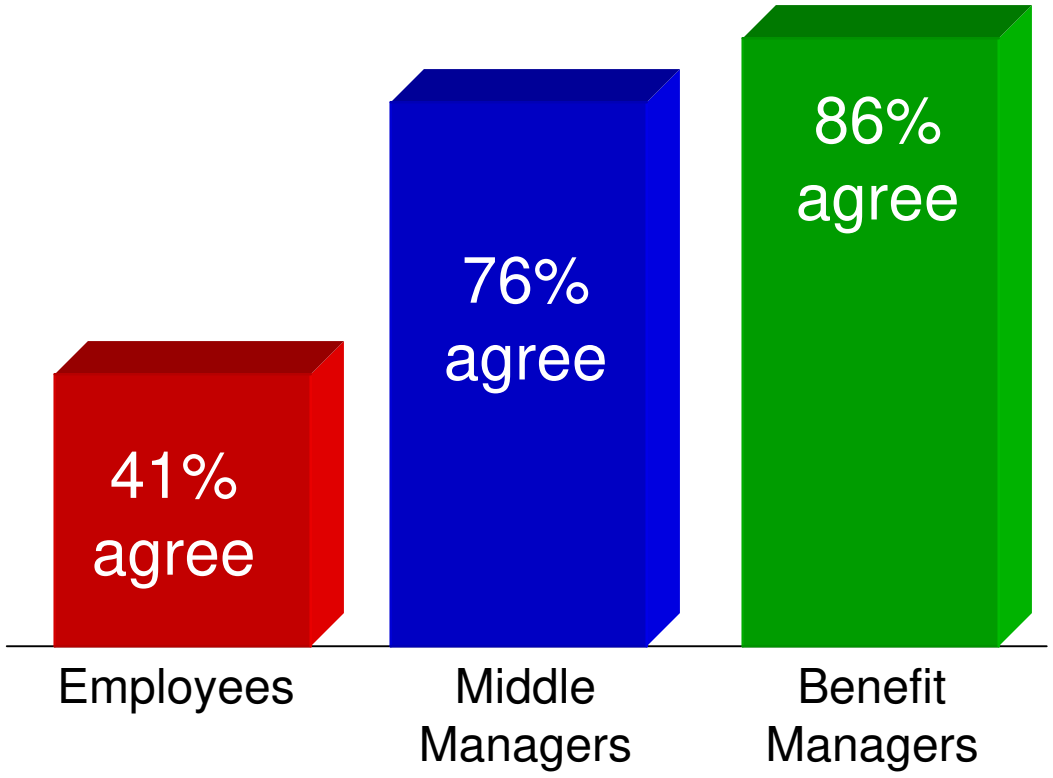
- Understand employee and management perceptions about:
  - the disease
  - its impact on the workplace
  - how it should be effectively addressed
  - whether or not depression is a barrier to career advancement

Methodology

- Survey respondents consisted of:
  - Depressed employees (n=443)
  - Middle managers (n=300)
  - Benefit managers (n=207)

Perception is Reality: Management & Employees at Odds

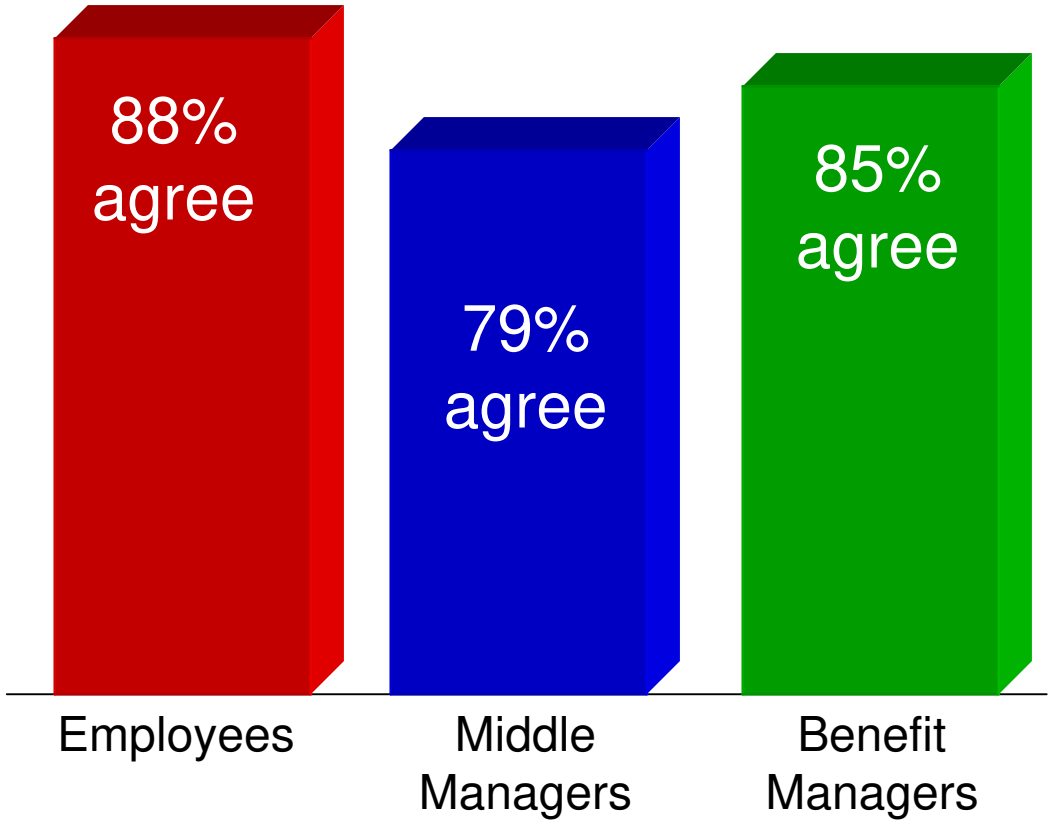
Q. Can people acknowledge they have depression at this company and still get ahead in their careers?



Q. Do you AGREE or DISAGREE with the following statement?

Perception is Reality: Treatment = Career Success

Q. Can employees who have been successfully treated for depression be productive and capable of handling the responsibilities of their job?



Q. Do you AGREE or DISAGREE with the following statement?

Perception is Reality: Stigma Continues to Dominate

	TOTAL AGREE		
	Employees	Middle Managers	Benefit Managers
• Company has taken steps to ensure support by co-workers & supervisors	37% 83%	72%	
• People can acknowledge they have depression at this company and be treated with respect & compassion	51% 95%	90%	
• Company is supportive & flexible in dealing with treatment needs	55% 95%	85%	
• Company has taken steps to ensure quality mental health care	57% 90%	73%	



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Q. Do you AGREE or DISAGREE with the following statement?

Treatment Impacts Job Performance & Career Path Perception

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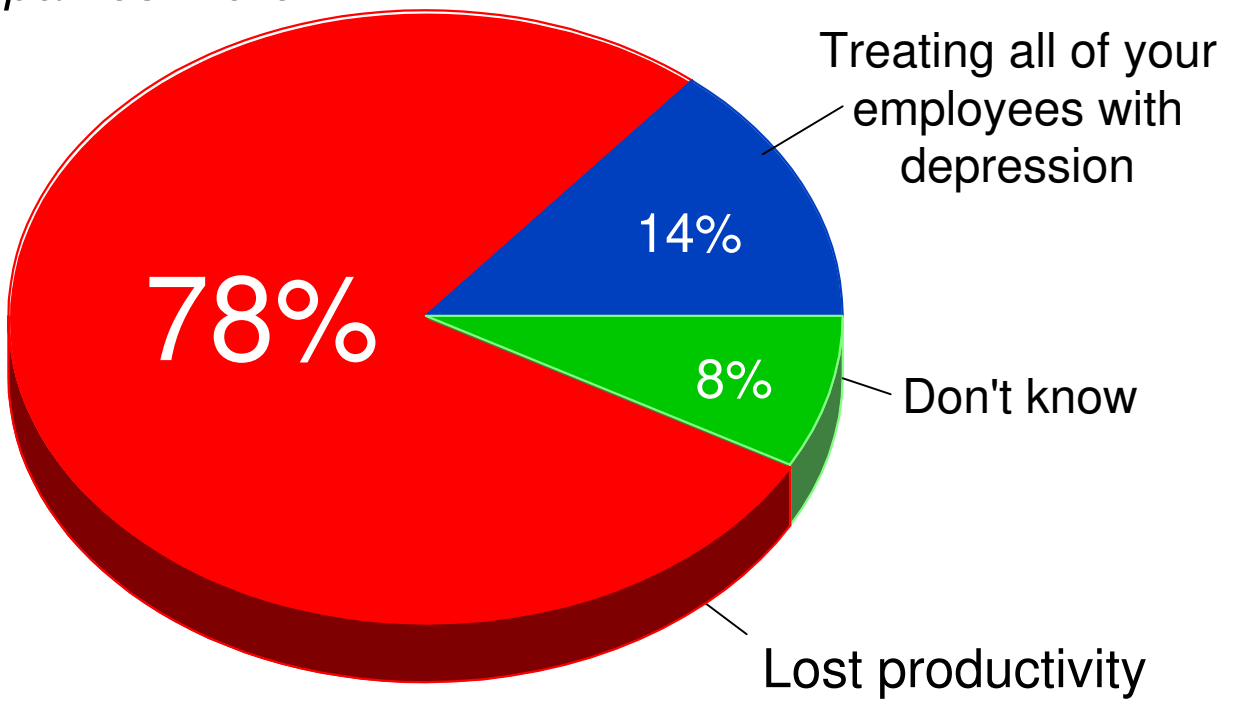
Treatment Benefits Bottom Line

Benefit Managers believe loss in productivity due to depression is more costly to companies than treating disease

Q. Which costs companies more?



Disease Symptoms Impact Employee Performance

Depression has prevented half of those surveyed from going to work (N=443)

- One-third miss at least one day/month (N=224)
- One in ten miss three days or more a month

When suffering a depressive episode, it has a significant effect on their ability to function at work (N=443)

- One in five say their depression "completely" or "occasionally" interferes with their ability to carry out their responsibilities while at work (N=168)



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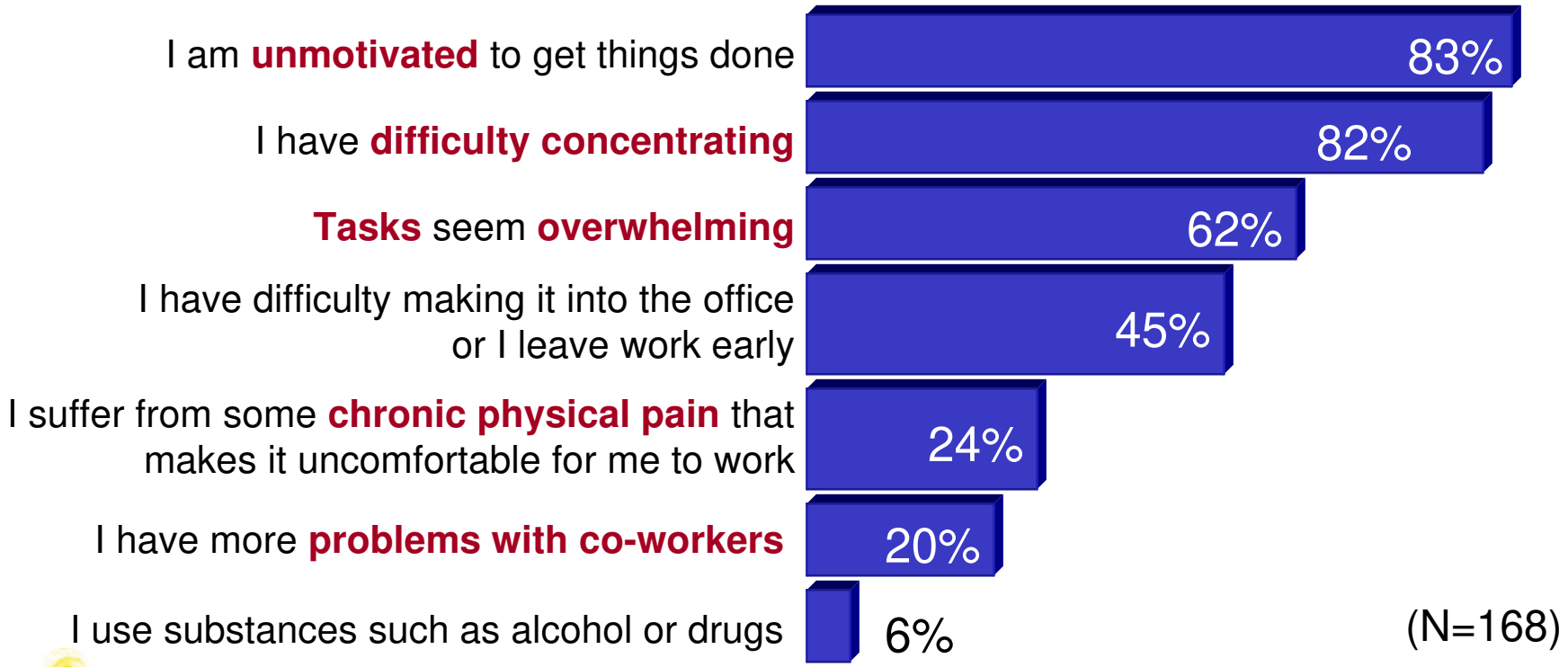
Q. Have you ever been so depressed that you could not go to work?
Q. How many days per month would you say you miss time from work because of a depressive episode?

Symptoms Have Wide-Ranging Impact on Employee Functioning

Symptoms can be emotional & physical



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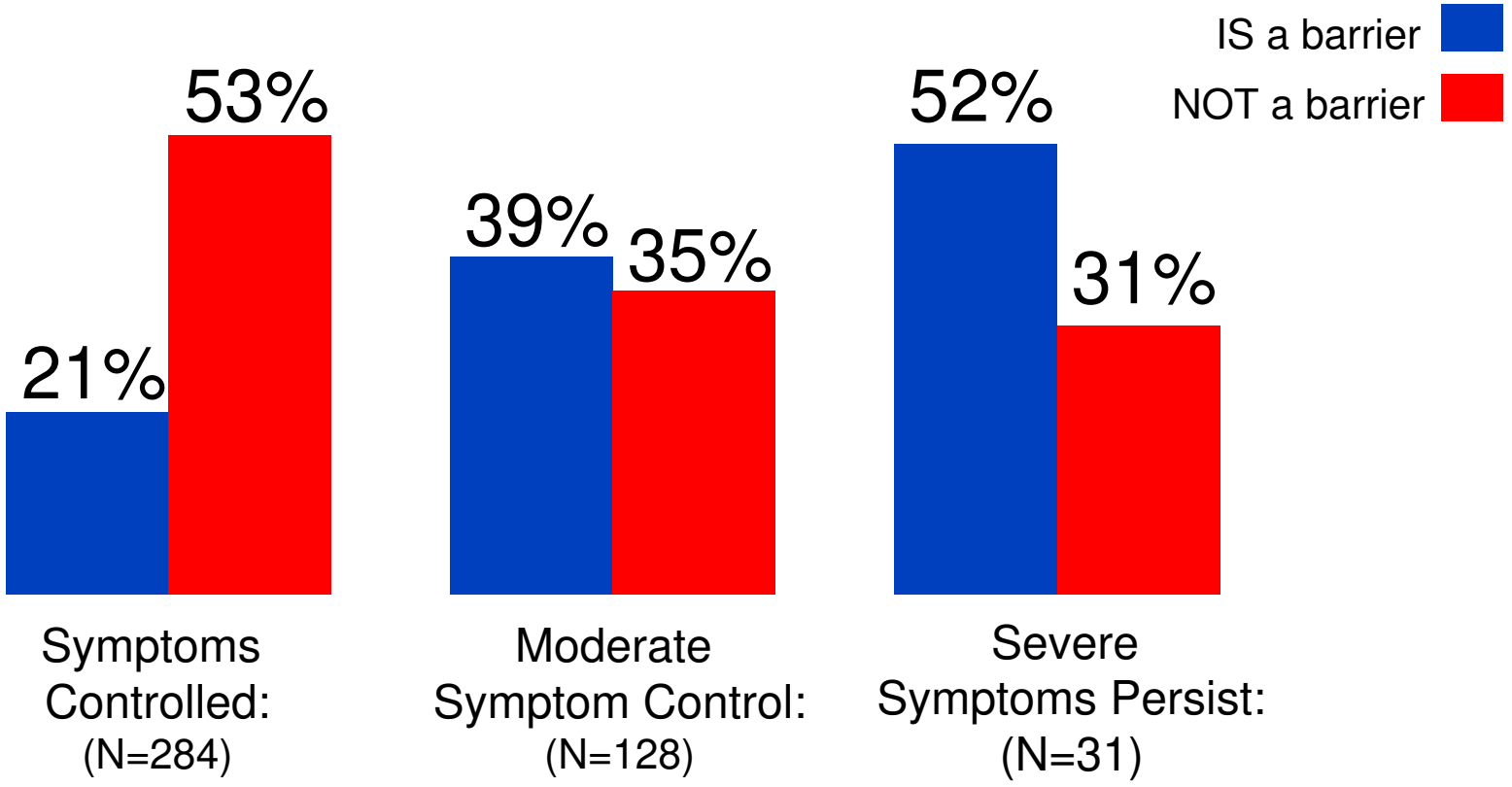
Q. Which, if any, of the following ways does your depression interfere with your ability to carry out your normal responsibilities while at work?

Better Symptom Control = Positive Career Path Perception

Employees with lingering or untreated symptoms are more likely to see depression as barrier to career advancement



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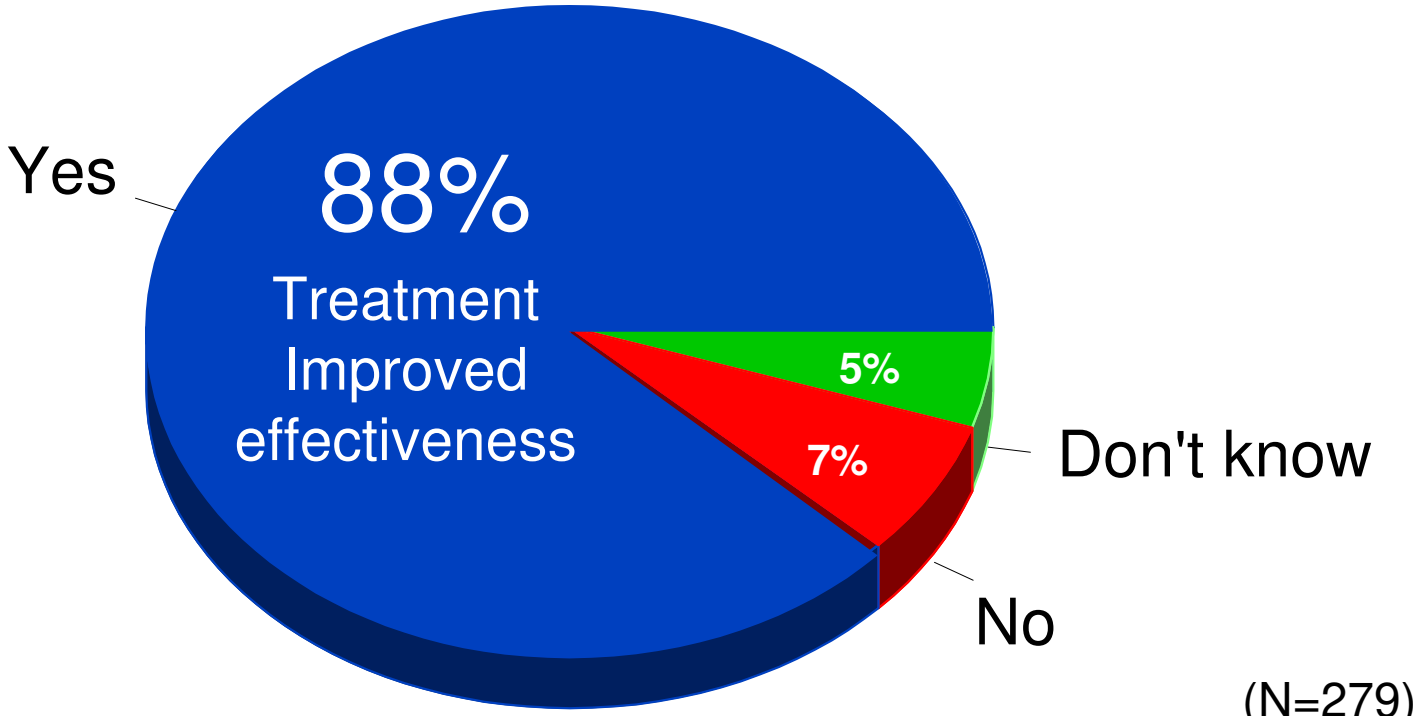
Q. Please tell us if you personally have felt that any of these things pose barriers to your personal advancement at the company you work for.

Better Symptom Control = Improvement in Employee Productivity

Treatment improves workplace effectiveness among those who felt depression had interfered in their ability to work



(N=279)

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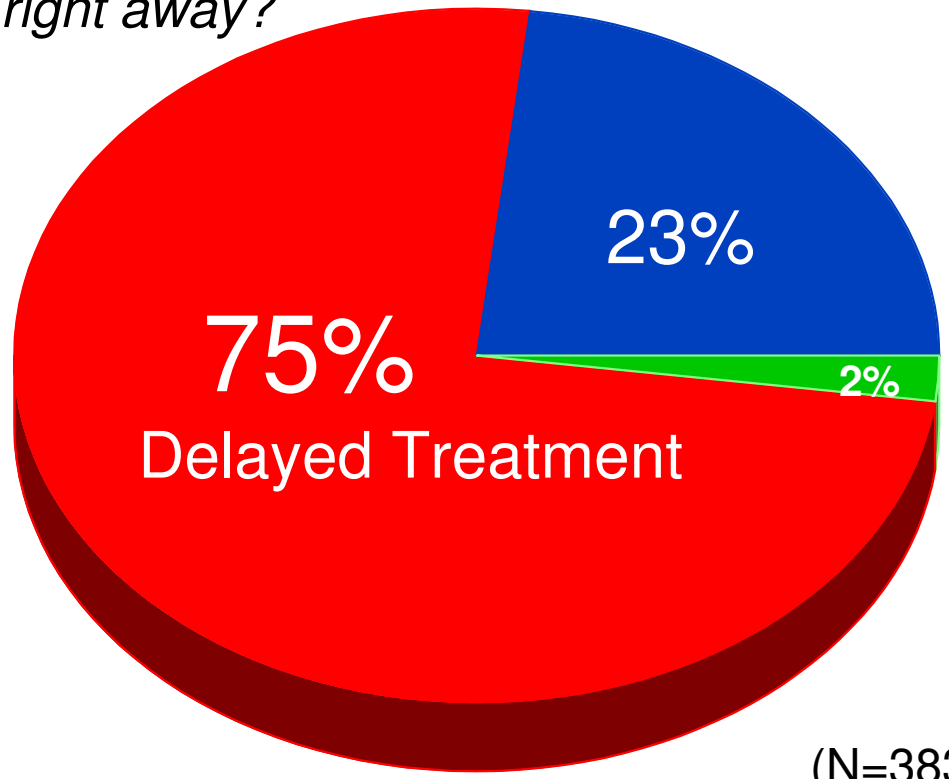
Q. Would you say your effectiveness at work and your ability to meet your work responsibilities improved once you received treatment for your depression?

Despite Treatment Advantages, 3 out of 4 Employees Delay Seeking Help

89% of employees have some mental health coverage

Q. Did you seek treatment right away?



(N=383)

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Education & Training Produces Action

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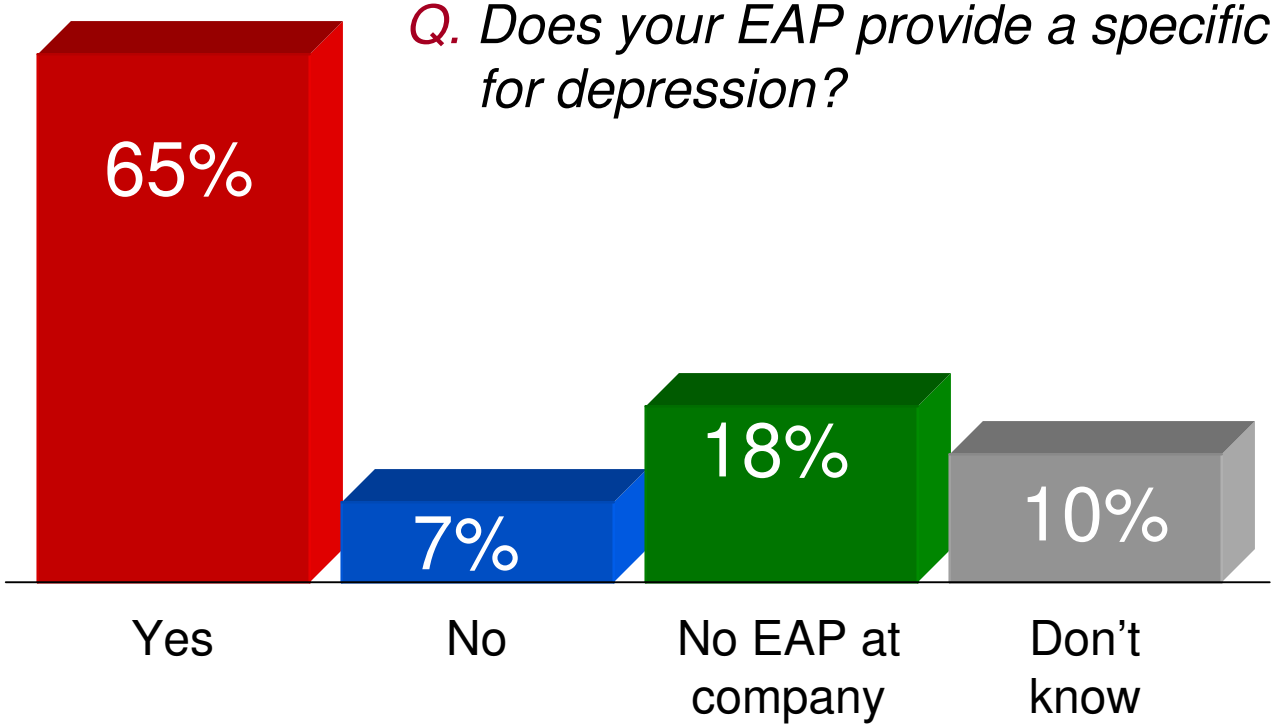
Benefit Managers See Employee Assistance Plans as Solution

87% of Benefit Managers believe their EAP is very or moderately effective in helping employees with depression (N=134)

Q. Does your EAP provide a specific program for depression?



(N=169)

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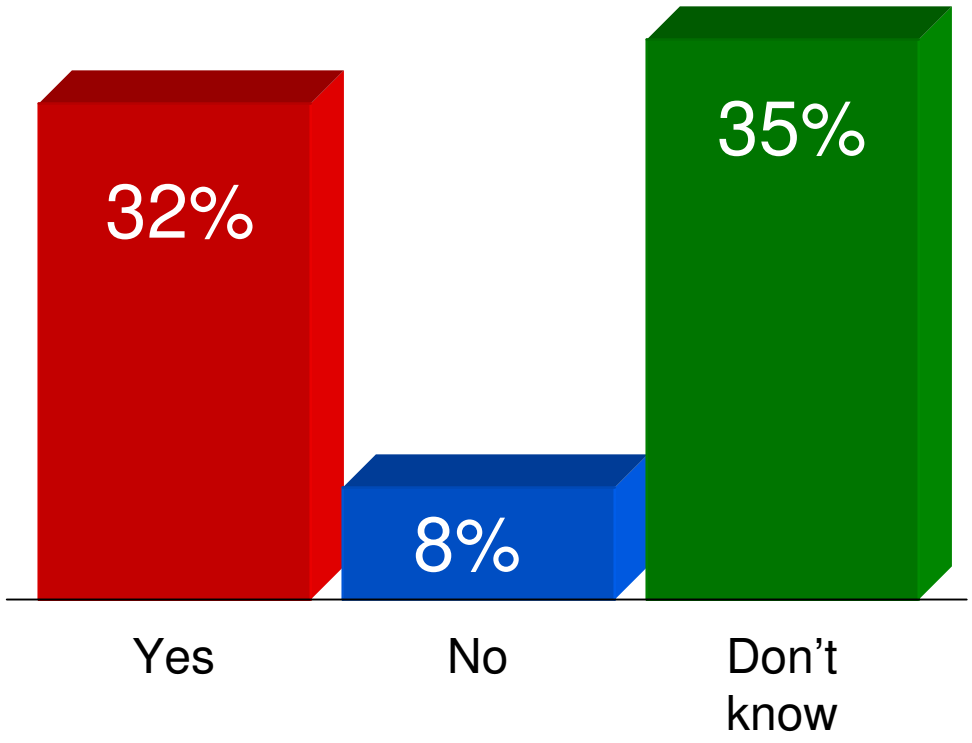
EAPs Underutilized by Employees

Only 14% of employees have accessed their EAP to assist them with their depression

Q. Does your EAP provide a specific program for depression?

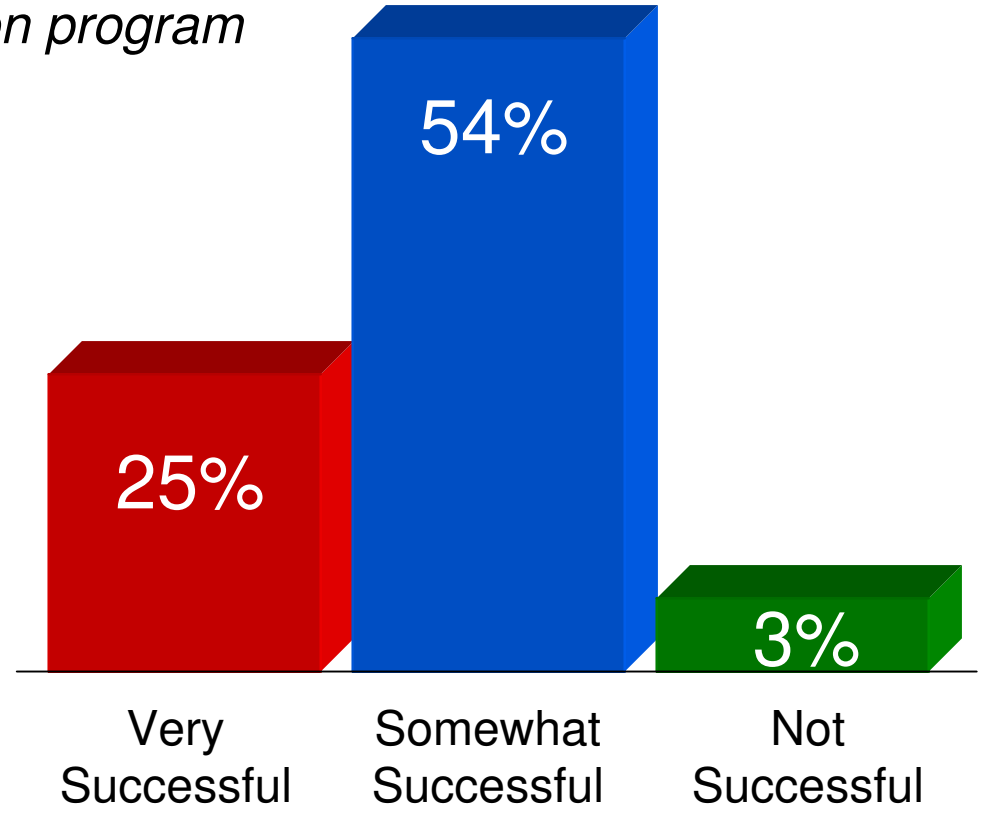


(N=332)

Benefit Managers Confirm, Few Companies Offer Depression Education

Only 37% of companies conduct proactive depression education programs for employees (N=207)

Q. Was the depression program successful?



(N=76)

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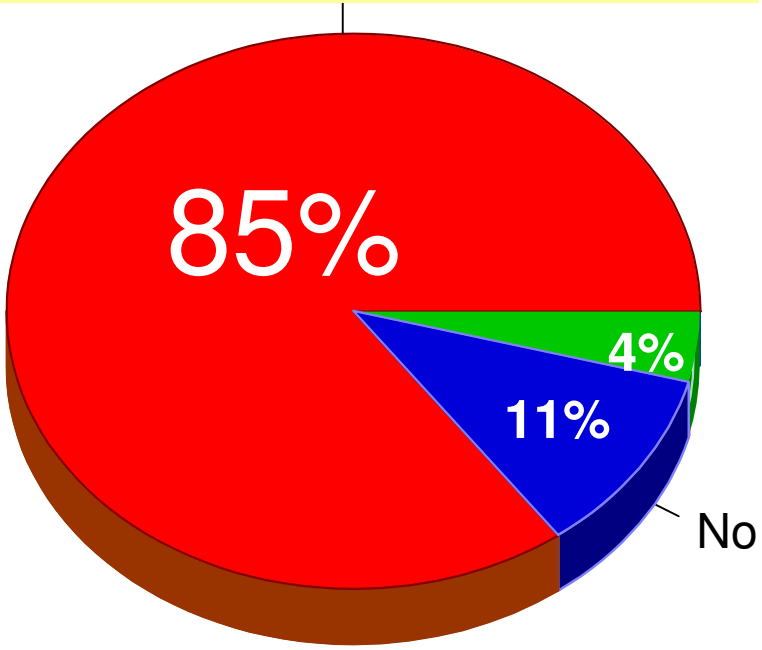
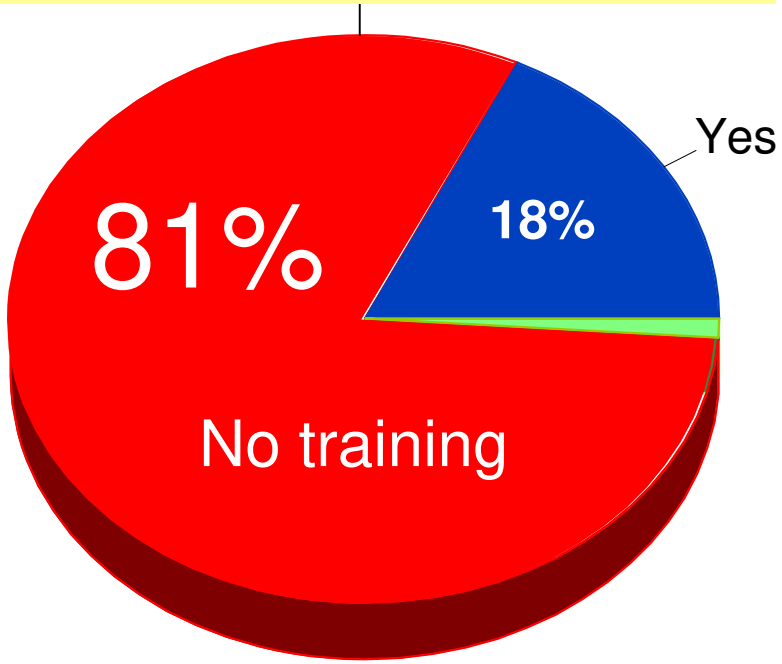
Minimal Training Leaves Middle Managers Ill-Equipped to Assist

Believe assisting employees with depression is part of their job



- *As a supervisor, do you believe it is part of your job responsibility to identify and intervene to help employees who might have depression?*

Have received no training to help identify & assist employees

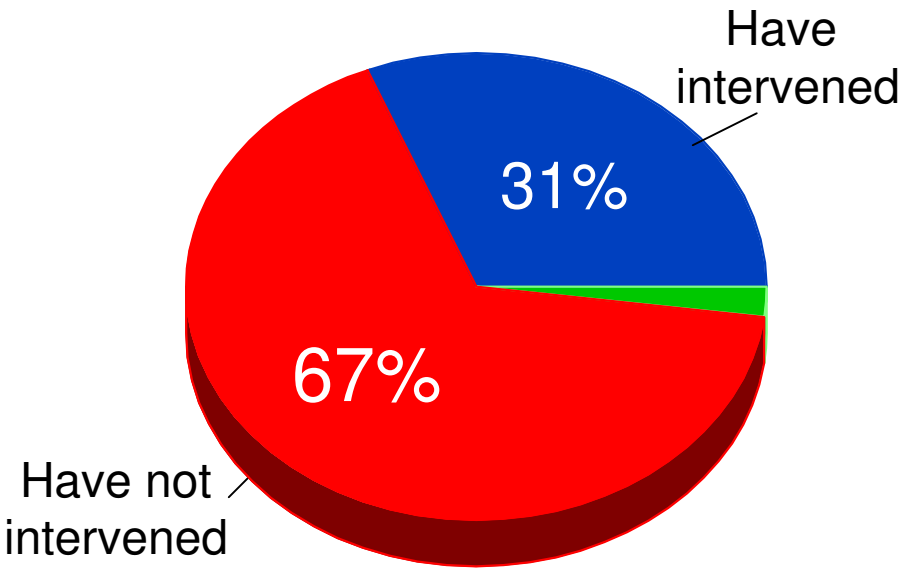


Q. As a supervisor of employees, have you personally received training to help you identify someone who exhibits signs of depression?

Lack of Knowledge & Training = Lack of Action

Middle Managers

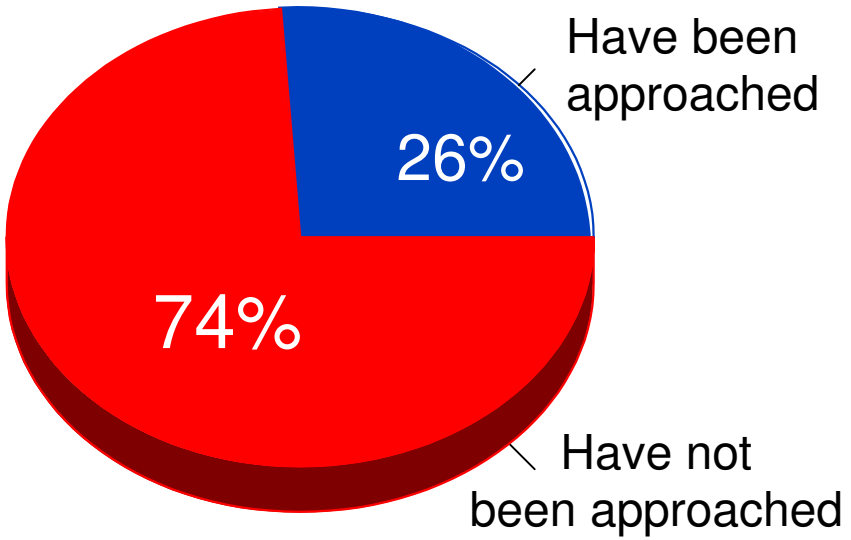
Only 3 out of 10 managers have intervened with an employee believed to have depression



Q. Have you ever intervened with an employee you believe might have depression…?

Depressed Employees

Only 1 out of 4 employees have been approached about performance while experiencing symptoms of depression



Q. During a time when you were experiencing symptoms of depression, did a supervisor ever approach you about your performance?

Proactive Policies Drive Positive Shift in Perceptions

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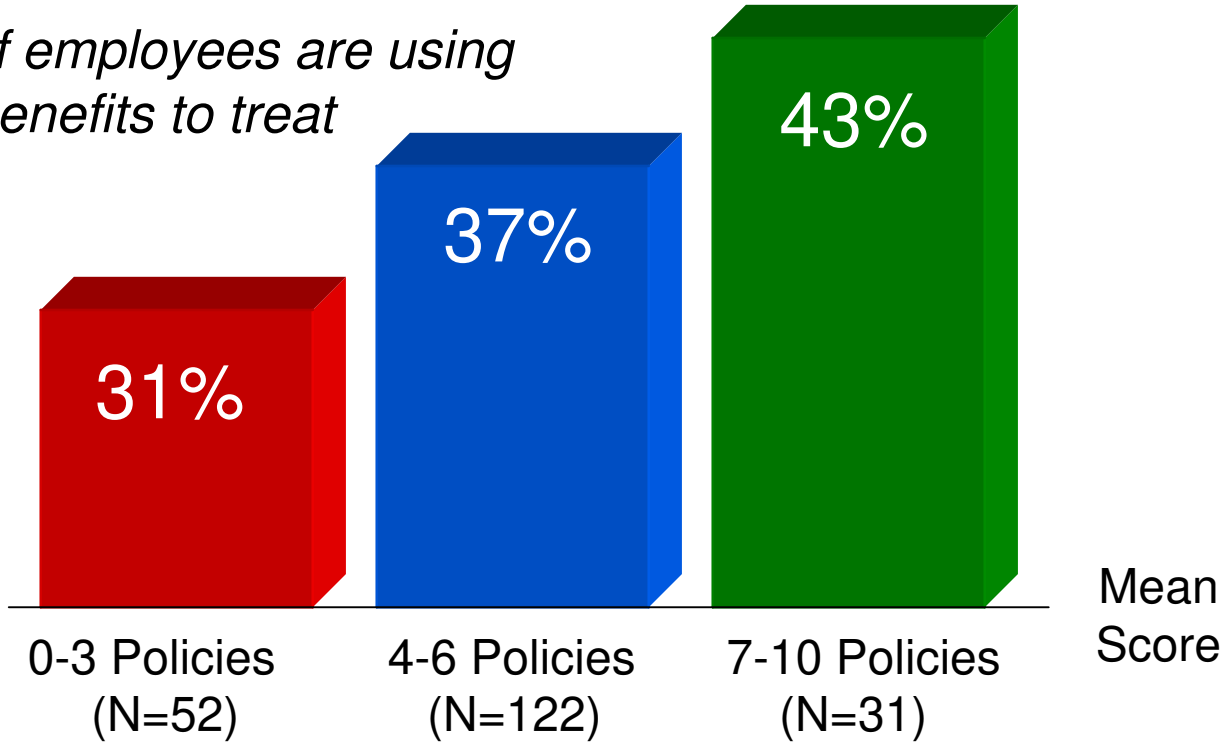
What are Best Practices?

- Drive recognition:
  - Employee screening or early detection mechanisms
  - Proved information to employees about symptoms and importance of seeking care
  - Supervisor Training
- Assist in treatment:
  - Access to broad continuum of care
  - Information about health care system & benefits
- Long-term support:
  - Return-to-work plan
  - Job accommodation guideline (i.e., time off for therapy)

Best Practices: Drive Employee Access to Treatment

Benefit Managers estimate that more employees access mental health benefits when proactive policies are in place

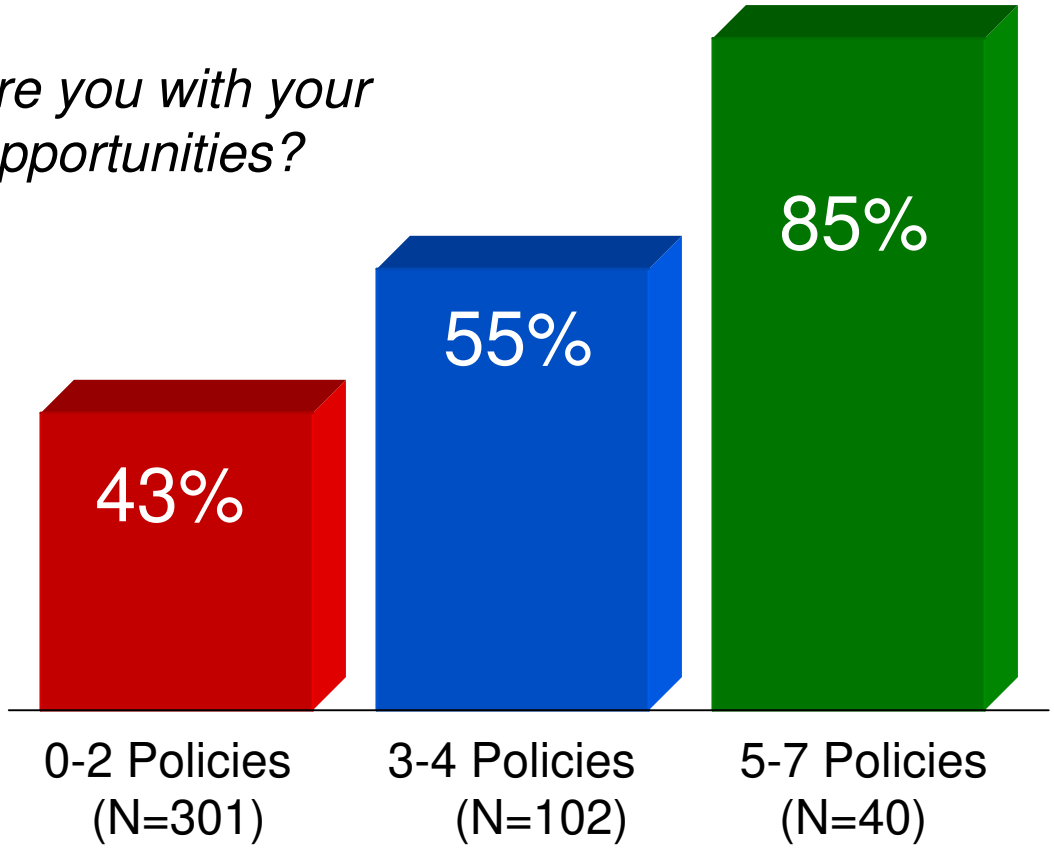
Q. What percent of employees are using mental health benefits to treat depression?



Best Practices: Drive Employee Perceptions About Career

Employees express higher job satisfaction and optimism about career advancement when proactive policies are in place

Q. How satisfied are you with your advancement opportunities?



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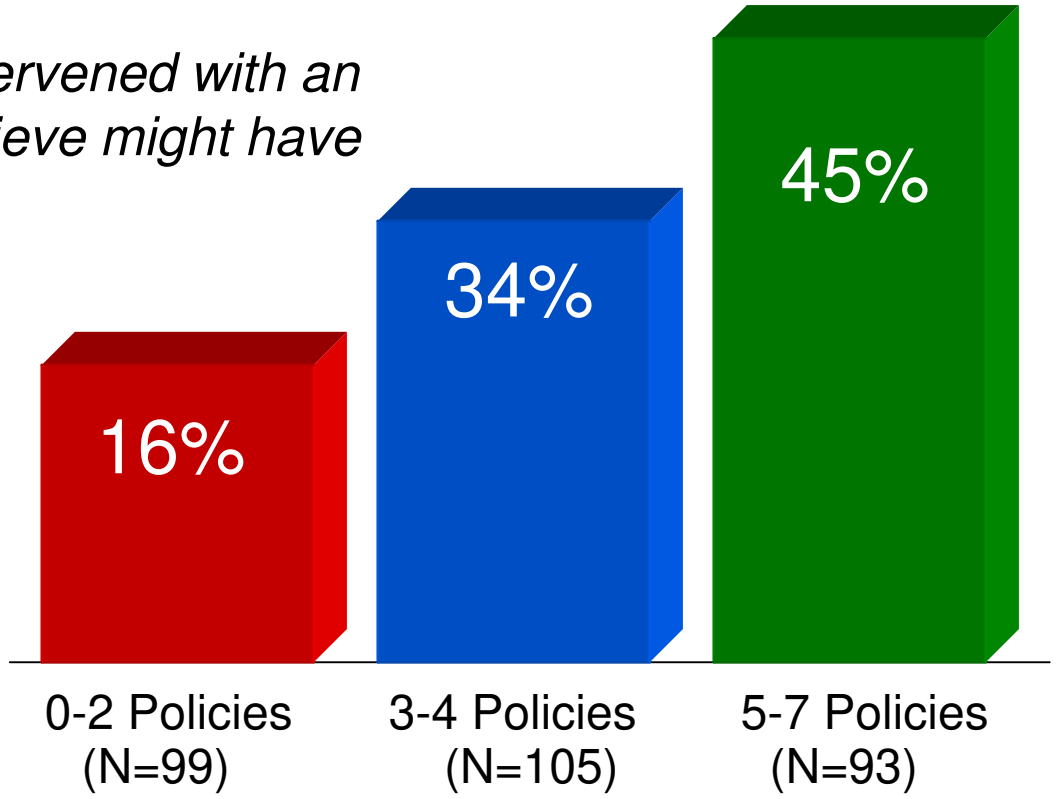
Best Practices: Drive Management Intervention

Managers are more likely to intervene with depressed employees when proactive policies are in place

Q. Have you ever intervened with an employee you believe might have depression?



The Bottom Line:

Depression treatment is a Win-Win for employees and companies

- Fully-treated employees experience greater symptom control, which significantly improves productivity and optimism about career advancement
- Companies gain a more productive workforce, which positively impacts the bottom line