Overview

+ Why mental illness matters
+ Work and the psyche
+ Understanding mental distress in the workplace
  - Stress
  - Burnout
  - Mental illness
+ The psychiatry is straightforward the other stuff is tricky
+ The other stuff
Work and the psyche

+ Understanding why the individual is at work or not at work, irrespective of the nature of the mental disorder matters.

+ Outside of our immediate family, our relationship with our job probably has the most important impact on our psyche.
Labour produces works of wonder for the rich, but nakedness in the worker. It produces palaces but only hovels for the worker; it produces beauty but cripples the worker; it replaces labour by machines but throws a part of the workers back to a barbaric labour and turns the other part into machines. It produces culture but also imbecility and cretinism for the worker?
Impact of work on the psyche

+ Work is of two kinds: first altering the position of matter at or near the earth’s surface relatively to other such matter; second, telling other people to do so. The first kind is unpleasant and ill-paid; the second is pleasant and highly paid

*Bertrand Russell*
Impact of work on the psyche

- **Workaholism** involves a personal reluctance to disengage from work, which is evidenced by the tendency to work irrespective of external demands.
Impact of work on the psyche

+ Workaholism
+ Oates claimed to have coined the term (1971) to mean an addiction to work and the compulsion or uncontrollable need to work incessantly.
+ “The workaholic’s way of life is considered in America to be one and the same as (a) a religious virtue (b) a form of patriotism (c) the way to win friends and influence people (d) the way to be healthy and wise. Therefore the workaholic, plagued though he be, is unlikely to change. Why? - because he is a sort of paragon of virtue. He is the one chosen as “the most likely to succeed”.
Work as a drug

+ Why do people take drugs?
  – < 20% for pleasure
  – Self-medicating negative emotions
  – Withdrawal
    • Young men use alcohol for social anxiety
    • Alcohol for depression
    • Cannabis and stimulants in schizophrenia
  – Search for meaning
  – Reasons are not stable
Work as a drug

+ Personality variables and addiction
  - Addictive personality
  - Once dependent, obsessional dependent and anxious characteristics find it hardest to stop
Protestant work ethic

- Weber was a German sociologist (1864-1920) and historian, who attempted to develop a systematic methodology for cross-cultural studies. He published the first version of *The Protestant Ethic and the “Spirit” of Capitalism* in 1905.
- This was linked the growth of modern capitalism, particularly in north America, to protestant religious beliefs.
Weber himself maintained that the distance of God from Calvinist believers, “could only be precariously bridged and their inner tensions only partially relieved, by unstinting, purposeful labour”

The result was” inner worldly rational asceticism: rigorous, scrupulous, methodological work within a calling”.
Mental distress in the workplace

+ **Stress**
  - The mental and physical condition that results from a perceived threat or demand that cannot be readily dealt with

+ **Stressor**
  - The external or internal force that brings about the stress

+ **Strain**
  - The adverse effect of stress on an individual

+ **Burnout**
  - A state of exhaustion stemming from long-term strain
Mental distress

+ Health & Safety Executive

+ Stress is the adverse reaction people have to excessive pressures or other types of demand placed on them

+ ISMA, International stress management association
  - The adverse reaction people have to excessive pressures or other types of demand placed on them where those pressures are subjective and felt to exceed the person’s current perceived resources and coping ability. Prolonged exposure results in adverse physical, emotional, mental and behavioural symptoms’
Occupational Stress Model

Sources of stress at work:
- Intrinsic to job:
  - Poor physical working conditions
  - Work overload
  - Time pressures
  - Physical danger, etc.
- Role in organization:
  - Role ambiguity
  - Role conflict
  - Responsibility for people
  - Conflicts reorganizational boundaries (internal and external), etc.
- Career development:
  - Overpromotion
  - Underpromotion
  - Lack of job security
  - thwarted ambition, etc.
- Relationships at work:
  - Poor relations with bosses, subordinates, or colleagues
  - Difficulties in delegating responsibility, etc.
- Organizational structure and climate:
  - Little or no participation in decision making
  - Restrictions on behavior (budgets, etc.)
  - Office politics
  - Lack of effective consultation, etc.

Individual characteristics:
- The individual:
  - Level of anxiety
  - Level of neuroticism
  - Tolerance for ambiguity
- Type A behavioral pattern

Symptoms of occupational ill health:
- Diastolic blood pressure
- Systolic blood pressure
- Cholesterol level
- Heart rate
- Smoking
- Depressive mood
- Escapist drinking
- Job dissatisfaction
- Headache
- Fatigue
- Absenteeism
- Reduced aspiration, etc.

Disease:
- Coronary heart disease
- Mental ill health

Extraorganizational sources of stress:
- Family problems
- Life crises
- Financial difficulties, etc.
## Control/Demands Interaction

<table>
<thead>
<tr>
<th>Psychological Demands</th>
<th>Control</th>
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<tbody>
<tr>
<td></td>
<td>High</td>
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<tr>
<td>High</td>
<td>High job satisfaction</td>
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<td>Low</td>
<td>Least pathogenic</td>
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Occupational Stress:

+ Causes
  - Factors in the individual
  - Factors in the workplace
  - Factors in the interaction

+ A 21st Century Epidemic?

+ Workplace distress is implicated in at least 15% of occupational disability claims
Occupational Stress

+ Appraisal + Efficacy
+ Expected versus unexpected change
+ Expected
  - Follows recognised and uncontrollable work changes
    • Overload
    • Physical injury
    • Environmental pressures
+ Unexpected ‘I cannot cope anymore’
  - Unrecognised psychodynamic issues
  - Consider the home situation and domestic violence
  - Mental disorder
Causes of stress in the subject

- Previous life experience
- Personality and resilience
- Commitment to purpose and values of the change
- Current circumstances and consequences
- Degree of support available
- Player or victim?
Stress and change

Well Being

Feel Good
OK
Distress / despair

First shock
Provisional adjustment
Inner contradictions
Inner crisis
Re-construction & recovery

Excitement
Honeymoon
Uncertainty
Losing confidence
Confusion
Depression
Crisis

Minimising or denial
Disbelief
Disbelief
Numbness
Distress / despair

(a) positive events
(b) trauma or loss

Life event
1 2 3 4 5 6 7 8+ months

New confidence, transformation
Testing
Exploring
Partial recovery
Extended crisis
Accepting
Letting go
Quitting
Occupational Stress:

+ DSM IV statement on Occupational Problems

- This category can be used when the focus of clinical attention is an occupational problem that is not due to a mental disorder, or if it is due to a mental disorder, is not sufficiently severe to warrant independent clinical attention. Examples include job dissatisfaction and uncertainty about career choices.
“Burnout is reaching epidemic proportions among North American workers today. It’s not so much that something has gone wrong with us but rather that there have been fundamental changes in the workplace and the nature of our jobs. The workplace today is a cold, hostile, demanding environment, both economically and psychologically....People are becoming cynical, keeping their distance, trying not to let themselves get too involved.”

Maslach & Leiter in The Truth about Burnout 1997
Burnout

+ Three dimensions

- Exhaustion
  • The first reaction to the stress of job demands or major change

- Cynicism
  • Protect oneself from exhaustion and disappointment

- Ineffectiveness
  • Lose confidence in their ability to make a difference
Burnout

Causes

- The social environment in which people work
- “When the workplace does not recognise the human side of work, then the risk of burnout grows.”
- Specific factors
  - Work overload
  - Lack of control
    - Burden of micromanagement
  - Insufficient reward
  - Breakdown of community
  - Absence of fairness
  - Conflicting values
Human needs and their job related satisfiers

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<thead>
<tr>
<th>Self-realization needs</th>
<th>Job-related satisfiers</th>
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<tr>
<td>Reaching your potential</td>
<td>Involvement in planning your work</td>
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<tr>
<td>Independence</td>
<td>Freedom to make decisions affecting work</td>
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<td>Creativity</td>
<td>Creative work to perform</td>
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<tr>
<td>Self-expression</td>
<td>Opportunities for growth and development</td>
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<tr>
<th>Esteem needs</th>
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<tr>
<td>Responsibility</td>
<td>Status symbols</td>
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<tr>
<td>Self-respect</td>
<td>Merit awards</td>
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<td>Recognition</td>
<td>Challenging work</td>
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<td>Sense of accomplishment</td>
<td>Sharing in decisions</td>
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<td>Opportunity for advancement</td>
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<th>Social needs</th>
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<td>Companionship</td>
<td>Opportunities for interaction with others</td>
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<tr>
<td>Acceptance</td>
<td>Team spirit</td>
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<tr>
<td>Love and affection</td>
<td>Friendly coworkers</td>
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<td>Group membership</td>
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<th>Safety needs</th>
<th>Job-related satisfiers</th>
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<tr>
<td>Security for self and possessions</td>
<td>Safe working conditions</td>
</tr>
<tr>
<td>Avoidance of risks</td>
<td>Seniority</td>
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<tr>
<td>Avoidance of harm</td>
<td>Fringe benefits</td>
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<tr>
<td>Avoidance of pain</td>
<td>Proper supervision</td>
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<td>Sound company policies, programs, and practices</td>
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<th>Physical needs</th>
<th>Job-related satisfiers</th>
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<tr>
<td>Food</td>
<td>Pleasant working conditions</td>
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<tr>
<td>Clothing</td>
<td>Adequate wage or salary</td>
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<tr>
<td>Shelter</td>
<td>Rest periods</td>
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<tr>
<td>Comfort</td>
<td>Labor-saving devices</td>
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<tr>
<td>Self-preservation</td>
<td>Efficient work methods</td>
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Employment dissatisfaction

+ Symptoms of employment dissatisfaction include
  − Work errors
  − Perceived and verbalised unhappiness and disinterest
  − Absenteeism and tardiness
  − Passive-aggressive behaviours
Mental illness and work

+ Work can make us mentally ill.
  - Stress
  - Toxic organisations
  - Toxic occupations
  - Fit
  - Traumatic events

+ Those with mental illness may benefit from work
+ Social inclusion
Toxic occupations?

+ Suicide risk is increased in
  – Health professionals
  – Financial services
  – Police

+ Work can also be a protective factor for suicide
Why business is bad for your health

*Lancet, April 10, 2004*

Westerlund et al described deleterious effects on health with growth especially if the number of employees grew by more than 18% per annum.
Indicators of mental illness at work

+ The following should raise suspicion of mental disorder
  – Anger
  – Resentment about work
  – Lack of confidence
  – Loss of concentration
  – Fatigue
  – In addition to core symptoms
Indicators of mental illness at work

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Mental illness in the workplace

+ Common mental disorders presenting as occupational stress

- Anxiety disorders
- Adjustment disorders
- Depressive disorders
- Somatoform disorders
- Bipolar II
Anxiety in the workplace

+ Panic Attack
  - A sudden rush of fear
  - Real autonomic symptoms
  - Breathlessness, palpitations, dizziness, trembling, choking, nausea, chest pain, paraesthesiae
  - Avoidance
  - Anxiety about recurrence
Occupational Stress: A 21st Century Epidemic

+ Differential Diagnosis of Panic Disorder
  – Other Anxiety Disorders
    • Workplace phobia
  – Mood disorders
  – Substance intoxication or withdrawal
  – Nonpsychiatric medical conditions
Panic disorder

Epidemiology of Panic Disorder

- Lifetime prevalence rates of 1.5 to 2 per cent by DSM III
- Additional 3 to 4 percent have attacks
- 7-28% occasional panic attack
- Women two to three times more likely than men
- Divorce or separation associated with increased rates
- Family History is a significant risk factor
Panic disorder

+ **Course and Prognosis of Panic Disorder**
  - Usually begins early adulthood. Second peak 35-40
  - One-eight year follow up
    • 30-40% well
    • 30-50% symptomatic but functioning
    • 10-20% ill or impaired
  - Increased risk of suicide
Mental illness in the workplace:

- Early diagnosis, formulation and effective treatment of minor mental disorders are essential for successful rehabilitation to the workplace
- Avoid doing too little too late
- Co-ordination
- Communication
The reasons for failure:

+ Why does a treatable disorder lead to permanent incapacity?
  – Work environment becomes a major stressor
  – Loss of motivation
  – Loss of confidence
  – Stigma
  – Lack of optimum treatment. Timely, persistent and ultimately effective
I want to say in all seriousness that a great deal of harm is being done in the modern world by belief in the virtuousness of WORK, and that the road to happiness and prosperity lies in an organised diminution of work.