

# HOW DO EMPLOYERS' RESPOND TO EMPLOYEES WITH DEPRESSION?

# EMPLOYERS' ATTITUDES TO SUPPORT EMPLOYEES WITH DEPRESSION

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# INTRODUCTION

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- In Europe, 10% of employees have been absent from work due to depression with a mean of 35.9 sick days during a depressive episode (European Depression Association, 2012)
- For the employers, employees' depression has indirect and direct costs, since it may lead to lower productivity and work quality, higher employee turnover and reduced job satisfaction among co-workers due to added workload (Goetzel, 2004)
- An unsupportive employer is a major barrier for work participation of employees with depression – negatively impacting the employee's decision to go on sick leave and return to work (Thisted, 2017)

# AIM

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To investigate employers' attitudes to their opportunities and challenges regarding the support of employees with depression

## Research questions

- What are employers' opportunities to support employees with depression in relation to work participation?
- What are employers' challenges to support employees with depression in relation to work participation?

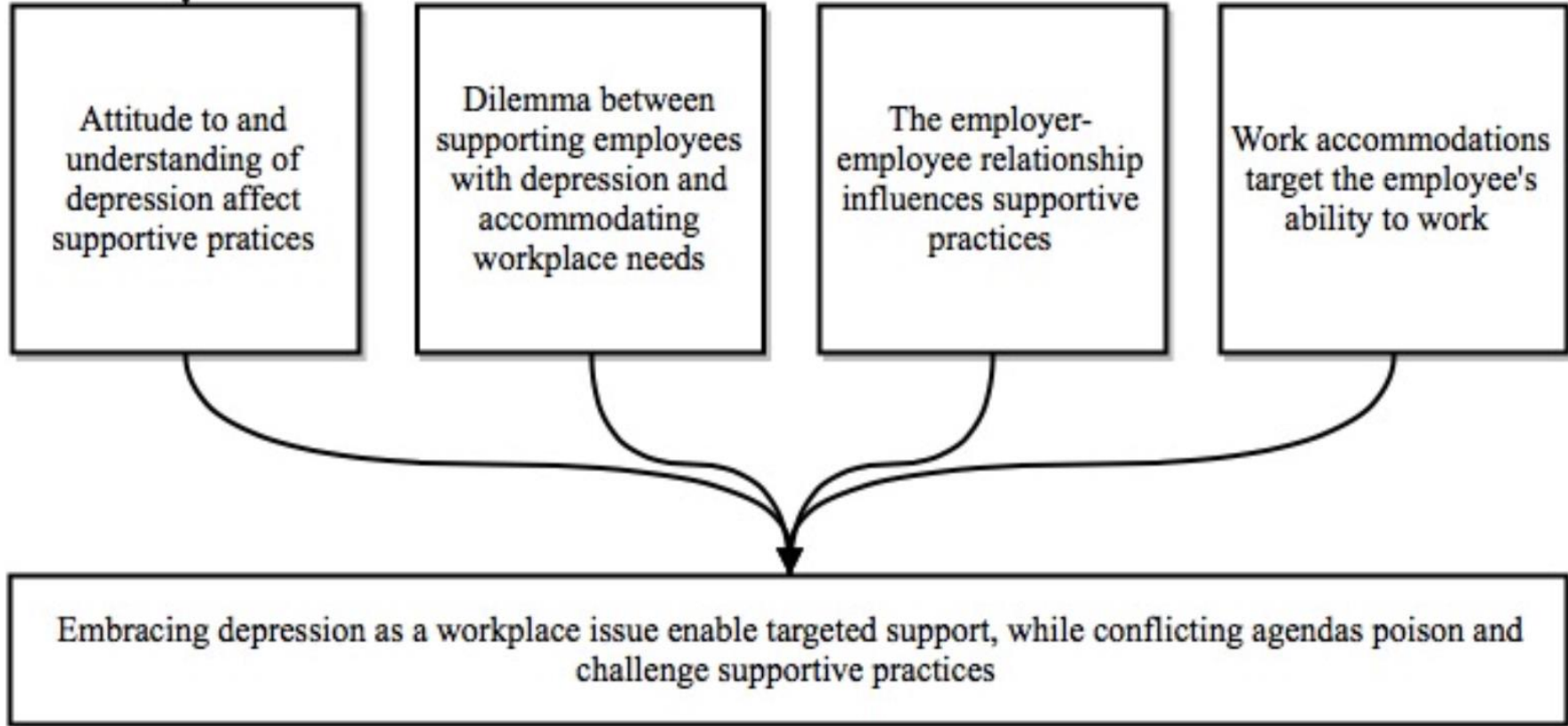
# METHODS

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- A qualitative study with five semi-structured individual interviews
- Five employers were included
  - Inclusion criteria:
    - Holding a management position in a Danish organisation
    - Experience with employees suffering from depression
    - Danish or English speaking
- Qualitative inductive content analysis

# RESULTS

Categories



Theme

# RESULTS

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## Category: “Attitude to and understanding of depression affect supportive practices”

Depression is understood as an illness that is non-work-related and thus should be managed in the private sphere.

The specific health condition of the employee is not important, merely whether the health condition is work-related or not:

*“It is not that you [the employee] have to tell me what you suffer from, but it is to see, if the reason is something work-related” (employer (e)2).*

# RESULTS

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## Category: “Attitude to and understanding of depression affect supportive practices”

Employers express that work-related stress may lead to depression depending on the person; yet, work-related stress is taken more seriously in the local work environment:

*“My experience is that stress can lead to a depression, if you are predisposed for it. And in this case, we try to take the part that is stress-related very, very seriously.” (e1).*

Employers feel more responsible for employees with work-related disorders because of the direct link between the disorder and the work environment. Depression is understood as a private matter that is caused by personal factors, therefore depression is not the employers' responsibility.



# RESULTS

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**Category: “Attitude to and understanding of depression affect supportive practices”**

Depression is a taboo at the workplace.

*“Stress and depression are two different things. And actually, I think that nobody talks about depression. There may be a taboo.” (e5).*

Employees possibly disclose their depression as stress or something else and consequently employers are challenged to provide targeted support.

Employers’ supportive practices depend on willingness from both the employer and the employee to overcome the taboo and engage in the vocational rehabilitation process.

# DISCUSSION

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Our key results:

- Depression is understood as an illness that is non-work-related and thus should be managed in the employee's private sphere
- Depression is a taboo at work limiting employers opportunities to provide targeted support

Negative norms about disclosure of depression at work were associated with employers' stigma towards employees with depression. (Martin et al. 2010)

Two in five employers found that depression was not an appropriate topic for discussion at work. (Martin et al. 2010)

According to the Danish Working Environment Act, the employer is responsible for ensuring safe working conditions and has an economic incentive to prevent work-related disorders.

# IMPLICATIONS FOR PRACTICE

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Need for structural initiatives that

- give the employer incentive to take responsibility for employee's health and engage in the vocational rehabilitation process regardless of the employees' health conditions

Loisel et al. (2005) argue for the implementation of the work disability paradigm implying that health at work should not be separated from general health and life

Employers should be provided with knowledge of

- depression - stress may be used as an entry to inform about depression and its relation to stress, e.g., stress being an important risk factor for depression
- the importance of work environmental factors influencing work disability due to depression focusing on relevant work accommodations and how to apply them cost-effectively at the workplace

# IMPLICATIONS FOR RESEARCH

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- Studies should investigate how knowledge of work disability due to depression can effectively be transferred to workplaces.
- Research on work disability due to depression should focus only on depression, since work disability due to depression may be handled differently than work disability due to other common mental disorders (e.g., stress, burn-out) at the workplace

# TRANSFERABILITY

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- Four of the five employers were in public sector organisations
- Small and medium-sized organisations
- Employers with experiences with employees with depression were recruited
  - According to Danish legislation, employees are not obligated to disclose their diagnosis, nevertheless, the employer is usually aware of the condition because of employee's work functioning and disability
- Contextual factors
  - legalisation regarding sickness benefits
  - insurance systems
  - labour market characteristics



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