

Depression - how to help

*By Vanessa Caldwell**

This article offers some advice on how to help those who may be suffering from depression. It continues the series based on responses received to the initiative to find ways in which the Law Society can assist members of the profession who may be suffering from stress and/or depressive disorders. The confidential email for responses remains active at depression@lawsociety.org.nz. For access to free information, help and counselling, see www.depression.org.nz.

Being able to cope with consistently high levels of stress, as most lawyers do, is a double-edged sword. Successfully leading very busy lives with multiple demands means that you can achieve many things.

It also means that you are less likely to notice the 'cracks' that may start to appear after an unexpected event occurs that adds to the already high stress demands you are living with. In fact, you may not notice anything until the 'crack' becomes a huge chasm and things have started to go seriously wrong.

Depression is one illness that can result from prolonged exposure to high levels of stress as brain chemicals necessary for feeling good are slowly depleted. Depression is a non-discriminatory illness that can affect anyone at any time.

If you are concerned that someone you work with may be depressed and you are not sure what to do about it – here are some tips.

Educate yourself about depression

Knowing about depression and how it affects people will help give you an understanding of what you might be dealing with and how to approach the situation. Understanding that your colleague may have an illness and is not just being difficult can help you not to take their behaviour personally. Those closest to the depressed person often notice the

symptoms first and voicing your concern and offering some options for treatment may encourage the person to seek assistance early.

Signs that your colleague may be depressed

- Appears miserable, listless, apathetic.
- Is not longer interested in activities they once enjoyed.
- Withdrawing from people, for example, is avoiding calling people back, working late to avoid going home.
- Has become overly critical, is negative about the world and everything in it.
- Is irritable and quick to argue.
- Unusually slow to complete work, difficulty concentrating, difficulty with short term memory.
- Low on energy, lethargic.
- Change in eating patterns and complaining of difficulty sleeping.

Men and depression

Research is showing that men may experience depression somewhat differently from women. Men may express depression more in terms of an increase in anger and irritability as opposed to a feeling of being sad or numb. They may become quite abusive in their behaviour towards others close to them, acting out aggressively.

A loss of interest in areas that held attraction previously, including work, plus difficulty sleeping are the main areas that men tend to notice most. Research also indicates that men tend to 'self medicate' depression with increased use of drugs or alcohol or escape by overworking more than women and this makes identifying the depression more difficult so getting to treatment often takes longer.

Having that conversation – showing you care

Once you realise that what you are observing may be depression, the next step is to bring it up. If you are work colleagues, invite the person out for a coffee and a chat. This is to avoid the inevitable interruptions that will occur if you attempt a serious conversation in the office. This is best done before their behaviour becomes a performance issue and having an informal chat will reduce defensiveness.

Don't assume that the symptoms will just go away or that it's not your problem because someone else will deal with it. Rest assured that working with a depressed person over the long term will become problematic for

everyone around and this is a serious condition that does require treatment – the earlier the better.

It is helpful to start the conversation with being up front by informing your colleague that you invited them for a coffee because you have been concerned about some things that you have observed and then describe what those things are.

Don't diagnose the person yourself, as many medical conditions can also cause depressive symptoms (thyroid disorders, adrenal disorders, nutritional deficiencies, medication side effects to name a few). This is why encouraging the person to see their GP in the first instance is always a good idea so these other conditions can be ruled out.

Other options include accessing your firm's Employee Assistance Programme (EAP) for confidential counselling, or giving them a useful website to search out some information for themselves such as www.depression.org.nz or the depression helpline 24 hour freephone 0800 111 757.

Many high functioning people believe that they should be able to cope and fix it themselves. If you can see that the person is struggling to accept that they might benefit from professional help, rather than joining them in their negative opinion about counselling, it is more helpful to reiterate that things like this can happen to anyone at any time and that it is better to get it checked out – it is nothing to be ashamed of.

People are often very reluctant to go for help as they fear being medicated. Reaffirm that it is always their choice to take medication or not and no one will force them to do so but it is important that they get checked out by a health professional.

If it is appropriate, offer to be a support person for them in approaching management about leave or workload reduction for a short period in order to allow time to get well.

If the person talks about feeling suicidal or making statements that have you concerned about his or her safety, seek immediate help by calling the community emergency assessment team based at your local hospital. Let your colleague know that you are going to do this, that you are highly concerned for their welfare and that you need to seek advice in order to help keep them safe.

Follow up

If you have made the effort to voice your concerns, continue to show support by following up. Ask your colleague about how they are and inquire as to how they have been using their supports. Continue to be encouraging even if results seem to be slow in coming – recovery from depression is not straightforward and will take time.

Taking care of yourself

Supporting a depressed person can sap your energy so be mindful of your own health and wellbeing. Remind yourself that you can't fix their depression for them. It's ok to say 'No, not at the moment' when you don't feel up to talking or advise them to talk to the counsellor if the discussion moves to areas out of your depth.

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Burnout and depression – is there a difference?

Job burnout is characterised by three primary symptoms (Maslach, 1982):

- *emotional exhaustion*
- *depersonalisation*
- *reduction in personal accomplishment*

The experience of feeling drained of energy often leads people to detach from others in an effort to cope.

Being relieved when your clients don't show and seeing your clients as just 'another dollar' or as 'another problem that you can't be bothered with' are signs of depersonalisation.

These aspects along with the feeling that your job is no longer worthwhile can appear similar to depression.

Burnout and depression are closely related as one can lead to the other.

However, burnout is related to your job specifically and, consequently, changing features of your job, increasing work/life balance or even having a holiday can reduce these symptoms.