



National study: Work-focused coaching intervention helps employees with depression

▶ Middle-aged and older workers with depression had improved mental health and were more productive at work after completing a low-cost, phone-based intervention with trained employee assistance program (EAP) staff. These were the results of a national trial and published in the journal *Psychiatric Services*, a monthly, peer-reviewed publication of the American Psychiatric Association.¹ The results affirm findings of earlier research — and underline the need for employers to address the effects of depression within their workforce.

A history of studying the effectiveness of work-based interventions

For several years, Tufts Medical Center and Optum have conducted research into the effectiveness of employer-sponsored screening, outreach and telephonic coaching for employees with depression. Results of earlier trials indicated that low-cost intervention:

- Restored people's ability to work
- Reduced the severity of their symptoms

Most recently, with a grant from the National Institute on Aging, researchers conducted a national, randomized clinical trial of employees age 45 and older who screened positive for depression disorders and related work problems. The employees worked for a range of public and private organizations. See the results on the next page.



Depression Depression Depression

Depression is widespread and a top cause of productivity loss.



A recent study estimated the annual cost of depression for employers:²

- Employees miss an average of 23.05 days (absenteeism, presenteeism, disability days) at an equivalent cost of \$4,296 per employee
- Depression alone cost employers an estimated \$78.7 billion dollars
- The incremental burden of depression is estimated at \$210.5 billion adjusted for inflation

How depression affects productivity



Employees with depression frequently feel overwhelmed and have difficulties:

- Concentrating on their work
- Completing tasks
- Communicating with co-workers

They often feel isolated and disconnected, unfairly treated, unimportant and voiceless, disinterested in and unmotivated by work and organizational goals, and engaged in meaningless work.

Interestingly, they also often fail to perceive that their depression is impairing their work performance.

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Employees completed an online screener, assessing depression and work impairment, and were informed of their results. Then they were assigned to one of two groups:

Work-focused intervention (WFI) group	Usual care group
Employees received up to eight, one-hour telephonic coaching sessions with specially trained counselors from the Optum Employee Assistance Program (EAP).	Employees received a recommendation to contact a health care provider and their EAP.
<ul style="list-style-type: none"> • 44% improvement in work productivity loss • 53% decrease in absences • 51% decline in severity of depression symptoms 	<ul style="list-style-type: none"> • 13% improvement in work productivity loss • 13% decrease in absences • 26% decline in severity of depression symptoms

VS

Results: Work-focused intervention surpassed usual care

Employees in the work-focused intervention group improved in their time management, physical tasks, output and interpersonal relationships. Researchers also found that employers realized significant annual cost savings related to the greater productivity of intervention participants.



Employers, take note:

Employees with depression can be more productive at work and feel better, too, with a low-cost intervention conducted by telephone. Starting with a web-based, screening assessment, the intervention is private, easy to implement and effective. Employers realize the value in their bottom line; employees in their mental health and quality of life.



Research team leaders:

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Footnotes

1. Lerner D, Adler DA, Rogers WH, Hong C, Greenhill A, Cymerman E, Azocar F. A randomized clinical trial of a telephone depression intervention to reduce employee presenteeism and absenteeism. *Psychiatric Services*; 2014. <http://dx.doi.org/10.1176/appi.ps.201400350>.

2. Greenberg PE, Fournier AA, Sisitsky T, Pike CT, Kessler RC. The economic burden of adults with major depressive disorder in the United States (2005 and 2010). *Journal of Clinical Psychiatry*; 2015, 76(2), 155–162.



Details of the study

The 380 workers in the Tufts–Optum research were divided evenly into two groups:

The work-focused coaching intervention (WFI) = 190 employees



For up to eight, 50-minute phone sessions, employees worked with master’s-level counselors from the Optum EAP to:

- Learn about depression
 - Practice changing thoughts, feelings and behaviors that limit their work
 - Discuss ways to resolve work-related issues
 - Establish three-way communication among employee, physician and counselor
- Weekly homework was also included.



Control group (UC) = 190

A control group received no direct care. They were advised to contact a health care provider, and if available, their employer’s EAP intervention. Only a small proportion did.

Measurement and evaluation

Researchers compared employees’ scores on a depression symptom survey and a work limitation questionnaire before and after the four-month study period. Results to the left.

For the full study

Read a detailed description of the study in the article, **“A Randomized Clinical Trial of a Telephonic Depression Intervention to Reduce Employee Presenteeism and Absenteeism,”** in the journal *Psychiatric Services* (<http://ps.psychiatryonline.org/doi/10.1176/appi.ps.201400350>).