Psychological Disorders and the Mental Health of Business Managers

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Thesis Guidelines:

Find out what triggers mental disorders in so many managers in a variety of companies and fields.
Discover if such disorders are treatable and how people in the business world cope with them.
Figure out if these disorders allow managers to continue in their line of work.
Find out whether with the right treatment and approaches it is possible to be cured and return to regular work life but does not apply to every person.
State the indications that certain psychological problems can be resolved and not have negative affects on the working manager.
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ABSTRACT

The main objective of this bachelor thesis is to identify how psychological disorders and mental health are related to the work of business managers and what affects they have on the working manager. The first part involves finding the source of these problems, and the symptoms, and causes of certain disorders. It also describes if this is a new trend or an ongoing problem. The second part is more focused on the treatment and support system needed after returning to work. It also includes some key steps that should be made by companies. The entire thesis is has a mixture of theoretical and practical parts. The practical examples are used to described specific situations that can occur to business managers inside and outside the workplace. In the practical part there is also parts from an interview with a psychologist about topics listed above.

Keywords: mental health, disorders, psychological, managers, business, workplace, illness, treatment
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INTRODUCTION

When thinking about psychological disorders and mental health we normally associate these topics with people who have suffered from injuries, accidents, loss of a loved one, or simply genetics. What we never really think about or consider is that it is possible to become a victim of these problems even if we have a normal and functional life. These problems affect everyone no matter what race or age, and they are occurring more and more frequently. The question we have to ask ourselves is whether this is a new trend in business or if this has been an ongoing problem that has finally been brought to our attention.

In the past this topic has been ignored primarily because it was not seen as an important issue. Now that we are in the twenty first century, this is a very common and important topic to discuss. There are many steps being taken by companies to educate their workers about these problems but that can only go so far. There are still plenty of companies that are ignoring this problem. Recently, researchers have shown an increased interest in this topic and have begun to search for its main cause in relation to business and the workplace. It is becoming increasingly difficult to ignore the effects of these problems on today’s business managers.

There is an increasing concern that the workplace is a major cause of mental health problems. Supposing this is true we should take a deeper look into the causes, symptoms and treatments available. When dealing with the topic of the mental health of business managers we have to understand what the term mental health means and how it is associated with them. The main questions addressed in this paper are a.) Why is it that business managers tend to struggle with these problems and what is the source of them? b.) Is it possible for a treated manager to go back to living a normal life and resume their position in the workplace? and c.) Do they have negative affects on the working manager?

The aim of this paper is to determine whether a manager treated for a psychological disorder or mental health problem can fully recover with no negative affects and go back to the workplace.
I. THEORY/PRACTICAL
1 PSYCHOLOGICAL DISORDERS

1.1 Introduction

When talking about psychological disorders many times people do not understand the meaning. According to the psychological glossary a psychological disorder is a disorder of the mind involving thoughts, behaviours, and emotions that cause self or others significant distress. Significant distress can mean that the person is unable to function, meet personal needs on their own or are a danger to themselves or others. Psychological disorders are also known as and often referred to as mental disorders (Kassin 2003, 511). In the section below I will discuss certain types of psychological disorders that business managers are prone to, their causes and how they are and can be related to mental health.

“According to the APA (American Psychiatric Association), a behaviour can be considered a psychological disorder if, it satisfies three conditions” (Kassin 2003, 511). The first condition is, a person must experience significant pain or distress, an inability to play or work, an increased risk of death, or a loss of freedom in important areas of life (Kassin 2003, 511). The second condition states that the source of the problem resides within the person, due to biological factors, learned habits, or mental processes and no normal response to specific life events such as death of a loved one. The last condition is “the problem is not a deliberate reaction to conditions such as poverty, prejudice, government policy, or other conflicts of society” (Kassin 2003, 511).

1.2 Types of Psychological Disorders

“In the past century or so more and more physical diseases have been recognized as having a strong psychological component to them. These are known as psychosomatic illnesses, from the Latin psyche (mind) and soma (body). Psychosomatic take three forms: stress, triggers, and personality” (Statt 2000, 136). Stress is when people have a difficult time coping with occupational or personal pressures. Triggers, has to do with people who have sensitivities or allergies to particular environmental conditions, foods and so on which are triggered by psychological factors. Personality is where someone’s basic personality predisposes them to certain illnesses (Statt 2000, 136). “There is a growing school of psychological thought which believes that all physical illness is also psychological to a greater or lesser extent” (Statt 2000, 136).

Today, the most widely used classification scheme in the United States is the American Psychiatric Association’s Diagnostic and Statistical Manual of Mental Disorder,
known by its acronym, DSM-IV. Written for mental-health professional, this manual provides a comprehensive list of psychological disorders that are grouped into seventeen broad categories (Kassin 2003, 514-515). Some of the most common disorders include generalized anxiety disorder, panic disorder, phobic disorder, obsessive-compulsive disorder and hypochondriasis. In this day and age, the most common disorders that many managers suffer from include generalized anxiety disorder, obsessive-compulsive disorder and phobic disorder.

1.3 Causes

It is hard to state the exact causes of psychological disorders because not all are known. There are many events that can trigger a person to have a psychological disorder. Sometimes it may just be one thing but it can also be a combination of events or experiences that have bottled up inside the person over time. The most important is if it runs in the family. Mostly likely a person will get some kind of mental illness because they are genetically prone to it. Often, times of death are the most common cause because people are stricken by grief and despair. Other causes can be simple tasks like giving speeches, going on dates or simply entering a room where everyone is staring. The type of stress that these situations make, are enough to cause a psychological disorder and throw off the stability of one’s mental health (Kassin 2003, 510).

As I mentioned above psychological disorders can be developed prior to employment or during employment. People often assume that psychological disorders develops outside of the workplace but an unhealthy work environment can cause or contribute to the development of a psychological disorder or mental illness (Australian Human Rights Commission 2010, 4). Research indicates, “job stress and other work-related psychosocial hazards are emerging as the leading contributors to the burden of occupational disease and injury” (Australian Human Rights Commission 2010, 4). This means that the workplace is now becoming the number one source of psychological disorders and mental health issues in managers.

1.4 Psychological Disorders Related to Mental Health

When talking about psychological disorders and mental health they can be related to each other. They have similar causes and some of the disorders are actually the same. Their main difference is that psychological disorders can be more severe and take a longer time to treat while the cause of a mental health problem can be something small and easily
treated. Basically, without one the other cannot exist. Both of these problems cause today’s working managers distress.
2 MENTAL HEALTH

2.1 Introduction

“There is growing evidence of the global impact of mental illness. Mental health problems are among the most important contributors to the burden of disease and disability worldwide. Five of the 10 leading causes of disability worldwide are mental health problems. They are as relevant in low-income countries as they are in rich ones, cutting across age, gender and social strata” (World Health Organization 2002, 1). According to the World Health Organization’s Website, “The burden of mental health disorders on health and productivity has long been underestimated. The United Kingdom Department of Health and the Confederation of British Industry have estimated that 15-30% of workers will experience some form of mental health problem during their working lives. In fact, mental health problems are a leading cause of illness and disability” (Harnois and Gabriel 2002, 1). “The European Mental Health Agenda of the European Union has recognized the prevalence and impact of mental health disorders in the workplace in the EU (European Union) countries. It has been estimated that around 20% of the adult working population has some type of mental problem at any given time” (Harnois and Gabriel 2002, 1). “In the USA, it is estimated that more than 40 million people have some type of mental health disorder and, of that number, between 4-5 million adults are considered seriously mentally ill” (Harnois and Gabriel 2002, 1).

The impact of mental health problems in the workplace can have serious consequences. This is not only for the individual but also for the productivity of the company. “Employee performances, rates of illness, absenteeism, accidents and staff turnover are all affected by employees’ mental health status” (Harnois and Gabriel 2002, 1). “In most countries there is no specific legislation addressing the impact of job stress. Most countries have at least minimum standards for safety and health features of the workplace” (Harnois and Gabriel 2002, 8). These standards usually focus on the physical aspects of the workplace and do not include the mental health or psychological aspects of working conditions (Harnois and Gabriel 2002, 8).
2.1.1 What is Mental Health

“Mental health refers to our cognitive, and/or emotional wellbeing. It is all about how we think, feel and behave. Mental health, if somebody has it, can also mean an absence of a mental disorder” (Nordqvist 2013).

According to WHO (World Health Organization), mental health is “a state of well-being in which the individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community” (Nordqvist 2013).

2.1.2 Is Mental Illness a Disability?

“The impact of mental illness on a person’s life determines whether it becomes a disability for them and whether it is a permanent or temporary disability. A person may experience one episode of mental illness in their lifetime and completely recover, while another may have to manage their illness for the rest of their life” (Australian Human Rights Commission 2010, 7). This means that a manager who is diagnosed with a mental illness at one time does not mean that they will carry the illness with them until death.

2.1.3 Interfering with Work Performance

According to the Center for Psychiatric Rehabilitations Web site, mental illness may interfere in the workplace in many ways. One of the main problems that managers with mental illnesses have is maintaining stamina to work a full day because some medications can cause them to be drowsy and tired. Another problem that might occur is the ability to sustain concentration, which includes restlessness, and shortened attention span. This can have a negative effect on relationships at work. It can cause conflicts and tension between colleagues and create poor relationships with clients (Harnois and Gabriel 2002, 9). If a manager is not able to concentrate on his work or work a full day then tasks are not accomplished and the company cannot benefit. This causes a reduction in productivity and output, increases error rates, and poor decision-making. To be fair these limitations do not have to apply to every manager with a mental illness.

On the other hand, people with mental illness can successfully work across a full spectrum of workplaces and the majority of them can successfully manage their illness without it impacting their work life. “Most importantly, people with mental illness can succeed or fail, just like any other worker” (Australian Human Rights Commission 2010, 8). Just because a manager has a mental illness and makes a mistake does not mean that the
illness is to blame. Another manager in the same company, who has no illness, is likely to make the same exact mistake.

2.1.4 Recognizing Signs of Mental Illness

According to Boston Universities Web site, recognizing if a business manager has a mental illness can be difficult because there are so many good excuses to cover up the problem. Mental illness can be recognized by observing the people that seem to be acting different. The differences can be that the person has prolonged feelings of depression, heightened anxieties, or denial of obvious problems. This can mean anything from not being able to make deadlines or communicate with employees. Some other signs may include decreased productivity, low morale, and problems making decisions. If a manager feels they are having these problems they usually excuse themselves by saying that they are having a bad day or week or that they are working through a difficult time in their lives. This however can be a lie and indicate an underlying problem.

2.1.5 Mental Health and Unemployment

“In a study reported in the Journal of Community Psychology, an analysis of employed respondents revealed that those who become unemployed had over twice the risk of increased depressive symptoms and diagnosis of clinical depression than those who remained employed” (Harnois and Gabriel 2002, 9). This affects the manager because if he has to fire an employee and then that employee becomes depressed, the manager has to take on the role as being the cause of that employee’s problem. Taking on this type of burden can also cause the manager to have unstable mental health. This can also happen to the manager if he is working for a company, he can be the one to get fired and experience the same problems.

2.1.6 Issues facing Employers and Managers

Even though knowledge of mental health issues has been on the increase over the last few decades, enterprises have lagged behind in trying to accept and understand the treatment, persuasiveness and impact of mental health problems in an organization (Harnois and Gabriel 2002, 11). Employers and managers are often faced with three main issues when they try to address the mental health needs of their employees. Meaning that the employer needs to address the mental health needs of its managers and then the managers need to address mental health of the other employees.
The first main issue they are faced with is recognizing and accepting mental health as a true concern of the organization. “Disability costs are increasing in the workplace due to mental ill-health, more employers are being faced with the challenge of developing new guidelines and policies to address these problems” (Harnois and Gabriel 2002, 11). The second issue is concerned with the last decade and how there has been an increase in anti-discrimination legislation particular to the employment of people with certain disabilities. The last issue deals with the “development of befitting prevention and mental health promotion policies in the workplace” (Harnois and Gabriel 2002, 11). This has become an increasing concern for many employers. Understanding the needs for intervention and treatment is critical to change (Harnois and Gabriel 2002, 11). Even though there is more knowledge about mental illness today some employers still do not take the necessary steps to prevent or keep it stable in their companies. If a manager of one of those companies feels like he has a mental illness he may not come forward about it because their employer may not be understanding, which could ultimately cause them to lose their job.

2.1.7 Mental Illness in the Workplace Myths

There are very many myths linked to mental illness, which are not true but many companies and people believe to be true. Many companies are simply unaware of the real facts because they may think it does apply to their employees. One common myth is that “recovering from mental illness is not possible but in fact, long-term studies have shown that the majority of people with mental illnesses show genuine improvement over time and lead stable, productive lives” (Harnois and Gabriel 2002, 29). The second most common myth is that mentally ill and mentally restored employees tend to be second-rate workers. It is proven that employers that have hired these individuals have reported that these employees are higher than average in attendance and punctuality. Also they are good or better than other employees in motivation, quality of work, and job tenure (Harnois and Gabriel 2002, 29). The last most common myth is that mentally ill and mentally restored individuals are violent, dangerous and unpredictable” (Harnois and Gabriel 2002, 30). The truth is that a majority of these people are neither dangerous nor violent. This myth is often reinforced by the media and how they portray people with mental illnesses (Harnois and Gabriel 2002, 30). Often times managers are afraid that if their colleagues figure out they have any type of mental illness they will automatically refer to these myths and think them to be true.
2.2 Most Common Types of Mental Health Problems

In general mental health problems relate to and can be the same as psychological problems. There are many different types of mental health problems but I will only list the most common in relation to business managers. The most common are ADHD also known as attention deficit hyperactivity disorder, anxiety/panic disorder, bipolar disorder, OCD (obsessive compulsive disorder) and depression. In the sections below I will discuss what anxiety disorder, stress, depression and bipolar disorder are and what effect they have on business managers.

2.2.1 Anxiety

“Anxiety is the most common form of mental health problem there is. Everybody experiences it and the physiological symptoms that accompany it” (Statt 2000, 137). The general root of anxiety is a feeling of uncertainty. For example, if the head of an organization calls the workforce together and assures them that, despite the forthcoming merger/takeover/efficiency, drive/reorganization their jobs are perfectly safe, they will naturally become very anxious about them (Statt 2000, 138). That is a reasonable state of anxiety to be in and everyone should share it. “Psychologists regard this as ‘realistic’ anxiety” (Statt 2000, 138). If none of these things were to happen, and someone was well thought of and appreciated by his superiors, yet are still afraid of losing their job, then that anxiety and neurotic anxiety are “more likely to be a continuing trait of someone’s personality than a transient state which anyone could experience” (Statt 2000, 138).

The need for definiteness in our everyday environment, which we all have becomes in neurotic anxiety, the inability to tolerate even a little uncertainty or ambiguity (Statt 2000, 138). Generally speaking, if a manager in a company has this type of anxiety he is not only causing harm to himself but this state of mental health is also effecting the quality of work of the employees beneath him. According to statistics on Psych Centrals website, women have a higher percentage of having anxiety which means that female managers are more likely to suffer from anxiety than male managers.

2.2.2 Effects of Anxiety

“Intolerance for ambiguity is particularly evident at times of organizational change. Anxiety about the unknown will particularly heighten people’s reluctance to change, or even to contemplate change” (Statt 2000, 138). When managers are afraid or unsure of
certain changes they will experience anxiety even if they are trying to control it. Just the simple thought fear already causes the person to have anxiety.

“Distortions caused by wishful thinking for instance, that tries to deny the source of the anxiety, will often creep into what is supposed to be an objective assessment of a situation whether it is the likely profitability of a new product, the effect of interest rates on inflation, or the scoring potential of a new member of a professional sports team” (Statt 2000, 138). This means that the anxiety of the manager can get in the way of rational decision-making, which can ultimately cause a company serious harm or loss.

2.2.3 Stress

“When we look at the psychological effects of stress we will find positive, negative and neutral aspects of the term all used, illustrating that in psychology so much depends on the context of the phenomenon in question and the nature of the individual reaction to it” (Statt 2000, 139). The main focus of this section will be on the negative aspects of stress, as this seems to be the most dominant. “Stress is usually associated with anxiety; particularly in a response to stressful change” (Statt 2000, 141). The first points to strike us are by far the most stressful events in life. These are ones that take place in our private lives outside of work (Statt 2000, 141).

Mainly they deal with the most important relationships a person has which are to spouses or partners. Of course, events such as death and divorce can be stressful, but even positive and joyful life events, like marriage, can also be very stressful (Statt 2000, 141). Even such things as going on vacation to get away from stress can be stressful. “The very fact of change, whether in connection with an unpleasant event like being fired or a pleasant one is itself apparently a potential stressor” (Statt 2000, 141).

Basically, when things happen in a person's personal life it can affect the way they then function in the workplace. This in general can have a negative effect on productivity and on the person’s status in any kind of business. There is no way to permanently avoid stress which means that mangers need to not avoid stress, since this is not possible, but learn how to manage it. On the other hand positive stress such as excitement and stimulation from getting praise for accomplishing a job or from changing jobs can have a very beneficial effect on managers.
2.2.4 Causes of Stress at Work

When talking about managers in general it is possible to find some important differences in the amounts of stress they experience within the same profession (Statt 2000, 143). All managers do not have the same amount of stress simply because each manager has a different set of rules and priorities than another. For example, the manager of McDonald’s will not have nearly as much stress as the manager of Apple because their jobs are totally different in the scope that they require different knowledge and task levels.

Responsibility for others is probably why managers in certain industries suffer more from the effects of stress than the people they supervise (Statt 2000, 143). “Another important occupational difference in stress is the feeling of having a lack of control of one’s working life” (Statt 2000, 143). Business managers in any company can feel this way because they usually have no control over what happens to them. They still have people who are ranked higher than them and those people make all the decisions. The manager of course gets some input but ultimately they cannot make major choices that affect the entire company.

The next, most obvious case of stress at work is sheer overload. “People tend to underestimate the amount of overload they are being subjected to, and seem to treat it as though it was their sole responsibility, thereby increasing the amount of stress they are under” (Statt 2000, 144). This is especially true for certain managers who are high-achievers, who have learned that they get awarded for being able to cope with all demands made on them without questioning reasonability (Statt 2000, 144). Many effects of this kind of stress include numerous physical ailments, in addition to, mental health problems, which include depression and increased rates of suicide (Harnois and Gabriel 2002, 6). Moreover job stress continues to be one of the most common work-related health problems in the EU (European Union) countries (Harnois and Gabriel 2002, 6).

2.2.5 Depression and Bipolar Disorder

Most of us feel, sad, lonely or depressed at times. This depressed feeling is a normal reaction to loss, life’s struggles or an injured self-esteem. But when these feelings become overwhelming and last for a long period of time, they can keep us from leading a normal, active life. If left untreated symptoms of clinical or major depression may worsen and last for years. They can cause untold suffering and possibly lead to suicide (WebMD 2005-2013). All depression types are not the same because there are seven different kinds. These include major, chronic, atypical, postpartum, bipolar, seasonal, and psychotic.
Luckily most business managers do not suffer from the more critical types of depression. Both men and women managers experience seasonal depression which is quite normal. It is rare but possible that some managers suffer from chronic depression and are unaware of their illness. This type needs to be diagnosed by a specialist because a regular doctor might mistake it as seasonal depression.

Bipolar disorder is another type of mental illness some managers may have. It is not very common but it is possible. “People with this disorder experience mood swings from depression at one extreme to mania (a euphoric, overactive state) at the other” (Kassin 2003, 548). During the manic phases a person can come up with brilliant new ideas, but mania can spiral out of control. This can cause delusions and risky and embarrassing behaviour. This disorder is more common in young adults, meaning that older managers have a lower risk of having this disorder. Bipolar disorder is related to simple depression and managers suffering from this type of depression can be at risk of also having this disorder. Looking at this mental disorder from the positive side it allows business managers to come up with great new ideas but on the other hand it can get out of control and cause the person along with the company to have a bad reputation. If a company becomes aware of a managers history of bipolar disorder, they will most likely let them go because of the fear that that particular person will do something extreme that could or would harm their business.
3 TREATMENTS AND CURES

3.1 Introduction

Many people who think they might have a psychological disorder or a mental health problem avoid getting help because they are afraid of their diagnosis, but getting diagnosed is an essential part of finding the most effective treatment plan. As indicated on Boston University’s Web site, while a single symptom or isolated event is rarely a sign of mental illness, a symptom that occurs frequently, lasts for several weeks, or becomes a general pattern of an individual’s or manager behavior may indicate the onset of a more serious mental health problem that requires treatment. Each person experiences mental illness differently. “For one person, it may occur, stop and re-occur, while another might recover completely” (Australian Human Rights Commission 2010, 7).

Mental illness can be treated, not cured, which means that many people who have mental illness and are being treated, recover well or even completely (Australian Human Rights Commission 2010, 8). The only problem is that because there are many different factors that contributed to the development of each illness it can be hard to “predict how, when, or to what degree someone is going to recover” (Australian Human Rights Commission 2010, 8). This means that with the right treatment each manager with a mental health problem can return to the line of work they were doing before diagnosed. The downside is that not every person recovers at the same rate and it can take weeks, months or even years for someone to fully recover meaning that their previous job might no longer be available to them.

3.1.1 Possible Treatment

“Although some forms of mental illness cannot be prevented, early recognition and seeing a doctor regularly can allow patients to monitor them and keep the illness from escalating” (WebMD 2005-2013). There are many possible treatments for psychological disorders and mental health problems. These treatments can include taking medication, simply talking to a psychologist or changing a person’s lifestyle. Some other possible treatments include clinical counselling, psychotherapy, workshops, intrapersonal therapy, electroconvulsive therapy, exercise, meditation, relaxation training.

When talking about mental health problems such as anxiety, stress or ADHD simple things such as meditation, exercise or relaxation training can be a possible treatment. For example, if a manager has a lot of stress building up at work and attends a yoga class or...
just the gym in general, the stress level goes down and will not have a negative effect on him. For disorders such as OCD, bipolar disorder or depression the treatments above need to be used in combinations with many other. This includes counselling, workshops, medication and psychotherapy. Medication is used to treat mental disorders. They do not actually cure the disorder but they treat the symptoms so the person can feel better and function.

“There is growing evidence that diet can play a significant role in the care and treatment of people with mental health problems” (Nordqvist 2013), including depression and ADHD. “Experts are talking about and integrated approach which recognizes the interplay of biological, psychological, social and environmental factors, with diet in the middle of it as being key, and challenging the growing burden of mental health problems “(Nordqvist 2013). In simpler terms, this means that a manager with, lets say, anxiety or depression can try to change their diet and exercise more often and find relief without taking any type of medication. This does not apply to every person because every person recovers differently with different types of treatments. Something that works for one person does not have to work for another.

3.1.2 Coping Psychologically with Stress

Since the main mental health problem tends to be stress, managers need to learn how to cope with it. “To help cope with stress or any mental health problem, it is very important to have social support, in both private lives and at work” (Statt 2000, 147). If we take a manager who is experiencing stress at work but they have a supportive home environment, the effects of their stress can be reduced Colleagues are the most important in social support when there is ongoing stress at work because they are directly and continually involved (Statt 2000, 147). The social support that I have just mentioned is the best way people cope with stress but it is an ideal and, for many managers and organizations, the reality falls short of this( Statt 2000, 147). Not everyone is lucky enough to have emotionally supporting relationships at home or at work but there are other ways that stress can be managed.

Another option is stress management workshops. These workshops will usually help participants realize that “stress is not an inevitable consequence of a particular situation and that the way they perceive the situation contributes to how much stress they experience” (Statt 2000, 147). Techniques including relaxation and exercise can help people feel better physically and therefore mentally (Statt 2000, 147). This is not the only
ways that stress is coped with there are many other that require different techniques. “More complex psychological techniques can also be employed, like teaching people how to be assertive of themselves without becoming aggressive, or how to plan coping strategies for future stressful situations” (Statt 2000, 148).

In addition clinical counselling and psychotherapy are other options for coping with stress. These techniques are becoming “more available and proving to be helpful for job-related problems of mental health.” Overall, it does not seem to matter what type of psychotherapy is used because “all those used seem to be equally helpful” (Statt 2000, 148). We can see that not only one type of technique is the most useful but, no matter what type of help an unwell manager decides to get will have positive results. The most important concept is that serious attention is being paid to the individual and his or her problems (Statt 2000, 148).

3.1.3 Psychosocial Rehabilitation

This discipline aims at overcoming the difficulties of playing a social role and living in a social environment, the emphasis of this is on skills and abilities rather than on symptoms and disabilities. Focusing on the areas of activities of socialization, daily living and work (Harnois and Gabriel 2002, 21). This type of rehabilitation can be done by professionals such as “psychiatrists, psychologists, social workers, occupational therapists and nurses” only, “if they have the necessary skills and training” (Harnois and Gabriel 2002, 21). Psychosocial rehabilitation in university programs believe that most people with serious mental health problems can improve if they are properly evaluated, trained and supported in the community (Harnois and Gabriel 2002, 21).

Most physicians are responsible for hospital admissions and treatment, which includes the prescription of medication, which a majority of patients will require. With the appropriate treatment it is very possible for the manager with a mental illness to return to their regular lifestyle and lead a fairly interesting life.

3.2 Interview with Psychologist

As part of my research I went to interview a psychologist at the Psychosocial Center in Prerov, Czech Republic. I chose this center because it is the most popular in this area of Czech Republic and is the closest to the University. The psychologists name is Tatana Opletalova and I see her personally, which is why I thought she would be the perfect candidate to interview. I told her I was writing a thesis and needed to interview her for
some information only a psychologist would know. Thankfully, she agreed to help me and this is how I got the information for this next and more practical section of this thesis. Since all of her clients are under patient-doctor confidentiality she was not allowed to reveal which companies her clients work for but the most important part was that they were all managers with psychological disorders or mental health problems.

### 3.2.1 Psychologist vs. Psychiatrist

The first question asked was, if she herself had many patients that work for big companies here in the Czech Republic and if the all have some type of mental health issue. I was very surprised to learn that she only had about ten patients who happen to be managers. When I asked her why so little she told me that many managers visit psychiatrists rather than psychologists due to the fact that a psychologist cannot prescribe medication and because of the issue of time. She said that many patients come to see a psychologist but then later switch to a psychiatrist for this exact reason (Opletalova 2013).

### 3.2.2 Medication vs. Natural Remedies

According to psychologist Mgr. Tatana Opletalova, most business managers prefer to take medication as a treatment because it is the fastest and easiest way to keep living a normal life. She mentioned that many times those types of people are very busy with their positions in certain companies and do not have time to take an hour out of their day to come sit and talk about their problems. It is much easier for them to come and get a prescription written and go back to work. Also, many times they do not want to admit that they have some sort of problem and taking medication allows them to avoid thinking about it and lets them feel normal again without the hassle of trying to figure out the source of their problem (Opletalova 2013).

### 3.2.3 Hometown vs. Out of Town

Opletalova stated “these people are sometimes ashamed that they have these kinds of problems so they visit doctors in towns where no one knows them so no one else will find out.” She also said “This is easier for them because they do not have any extra added stress from the fear of running into friends or colleagues”. “They have the freedom to go any psychiatrist and even change psychiatrists or psychologists many times before they feel comfortable enough with someone to even share their problems” (Opletalova 2013).
3.2.4 Treated or Medicated

According to Mgr. Tatana Opletalova, many business managers do not seek to get the right treatment for their mental illnesses. They do not feel “they have the need or the time for such treatment and many believe that it will not be effective. Many times managers come in to a session one time to say what their problem is and then want to be prescribed medication to treat their symptoms and make them better.” The only problem with this is that not all illnesses should be treated with mediation as a first choice and other actions should be taken instead. It is better for the patient to get a full evaluation and see a psychologist or psychiatrist more than one time so they can get the accurate help that they need and deserve (Opletalova 2013).

Another problem that she mentioned was that these medications can be addicting and can cause people to rely on them and sometimes cause patients to use other drugs because the prescription no longer works as it did before. Other medical problems of using certain prescription drugs to help treat illnesses cause weight gain or weight loss and can cause the manager to then become depressed because of their body image (Opletalova 2013).
4 RETURNING TO THE WORKPLACE

4.1 Introduction

After being diagnosed with a mental illness or psychological problem, returning to work can be a difficult task for some managers. With the right treatment and time it is very possible for a manager to return to work and resume their position. Returning to work can be a difficult task for anybody but returning to work after a mental health problem can be even harder. Chances are that word has spread as to why the manager has not been at work which means that the manager will not feel comfortable coming back to work. On the other hand if the company really supports that employee they will do everything in their power to make them feel their best on the first day back. However, a person who has been treated or is being treated for some kind of mental illness should know many coping skills and techniques to relieve stress and come back into the workplace ready to continue where they left off. Most importantly, the manager needs to inform their health professional of what kind of duties they have at work so that they can make the final and right decision on the right time to return to work.

“Paid employment, generally speaking, is expected to provide some measure of independence and autonomy, a feeling of competence, achievement and self-worth, a feeling of being valued, of making a contribution and of belonging” (Statt 2000, 137). A recovering manager needs to return to a job where he feels all of these things so that they can have a positive effect on them. “If these feelings are genuinely felt then they are real enough to the people concerned and they are all vital to the kind of psychological climate that fosters good mental health” (Statt 2000, 137). Many people enter the work world with optimism and hope but after a while little of these feeling remains and reality kicks in. If the manager realizes that they were not happy in their job previous to mental health issues they should not return because it can have a negative effect on their new mental state.

4.2 Website Cultural Adaptation Study

The key to good mental health at work lies in the goodness of fit between the individual and his or her job. If managers feel their job provides them with the right amount of simulation, reward and challenge they will respond with their best efforts and creativity (Statt 200, 150). If the manager returns to their old job after being treated and they do not feel what is stated above they will not be able to maintain their mental well being and can possibly have reoccurring mental health problems. Managers need to decide
personally if their job is the perfect fit for them because no one else will do it for them. Increased awareness is “required at all levels of their own psychological needs and how they interact with those of other people in the organization” (Statt 2000, 150). Basically, it is up to each manager to specifically self evaluate their job and working conditions and if they think they are good enough to help prevent mental illness or how to make the job better. If they are able to come up with a way to improve their current job they can remain in that position without having to worry about reoccurring mental health problems.

4.3 The workplace and One’s Mental Well-being

The workplace is one of the most important environments that affect a person’s mental well-being and health. There is a growing awareness of the role that work has in promoting or preventing mental wellness and mental illness (Harnois and Gabriel 2002, 5). According to the World Health Organization’s Website, “Although it is difficult to quantify the impact of work alone on personal identity, self-esteem and social recognition, most mental health professionals agree that the workplace environment can have a major impact on an individual’s mental well-being” (Harnois and Gabriel 2002, 5). The workplace as I have already mentioned earlier can cause unstable mental health but it can also provide a positive experience for the manager. Employment can provide five categories of psychological experience that often promote mental wellbeing (Harnois and Gabriel 2002, 5). These five things are time structure, purpose, collective effort, social contact, social identity and regular activity. Many companies now realize how, not only their managers, but also their employees’ productivity is linked to their well-being (Harnois and Gabriel 2002, 5).

4.4 Workplace Mental Health

“Notions of mental health at work tend to focus on the individual rather than the organization. A comprehensive policy of mental health at work includes, however, an assessment of the mental health of the organization itself. The gain to both individuals and the organization from promoting good mental health at work is reflected in increased in presence, wellbeing and production” (Harnois and Gabriel 2002, 6). The constant rate of change that affects all types of businesses today is progressively motivating employers to address the health of their staff.

According to the World Health Organization Website, the global marketplace is forcing organizations to upgrade their efficiency. In return, this is encouraging employers
to find ways to enhance the “performance of employees and to avoid losses associated with health and safety” (Harnois and Gabriel 2002, 6). As I mentioned before, full recovery is aided by the help and support of the organization that the manager is employed by. It is becoming quite common for companies to create changes in their organization so that they do not lose money. If their manager has good mental health then he can help manage the mental health of the other employees saving the company money.

4.5 Using the Workplace to Promote Mental Well-Being

The workplace is the appropriate environment in which employers should “educate individuals about, and raise awareness of, mental health problems” (Harnois and Gabriel 2002, 3). The workplace can, for example, promote good mental health practices and provide the necessary tools for the recognition and identification of mental health problems. For managers with mental health problems returning to work and continuing a job after treatment can be a challenge. Work is a very important part of contemporary life for most managers because it provides them with a sense of personal identity, financial security and the opportunity to make their contribution to something. If the manager has recovered from a mental illness they are able to due all of these things but only if their place of employment has a balanced state of mental well-being

4.6 Creating a Safe and Healthy Workplace

A key component to the success of creating a safe and healthy work environment is commitment and awareness (Australian Human Rights Commission 2010, 22). If a manager returns to the workplace they need to have this type of environment so that they feel welcome and wanted. This can be demonstrated throughout the organization by the commitment from the other senior managers and senior staff to develop such an environment through, mission statements and policies. Also treated managers should demonstrate their commitment by implementing these strategies so that no other employees suffer. Lastly, by making all staff aware of the managerial commitment to having a healthy and safe working environment (Australian Human Rights Commission 2010, 22). Returning managers often have a great drive to better the work environment because they do not want any of their employees to suffer like they did. Of course this is not the case of every manager because some are more discreet and do not even want anyone to know why they were gone or do not care to bother with such commitments and
solutions. Some managers may blow this entire idea off because they do not want to waste their own time and energy on such tasks and want to save money.

4.6.1 Effective Communication

As a manager, the person must grapple how to describe and talk about mental health with his or her employer and other co-workers. Becoming familiar with the words that describe mental illness allows them to negotiate reasonable adjustments in the workplace and obtain advice and assistance from external support services (Australian Human Rights Commission 2010, 9). Furthermore, it allows the manager to feel welcome in his or her company but also allows them to openly discuss mental illness with any other employee who may be showing symptoms. This allows there to be a system of better communication and understanding for the topic of psychological disorders and mental health. Having good communication in a company is one of the key points to making it a successful company.

4.6.2 Accommodating Mental Illness at work

According to the Canadian Mental Health Association’s Website, when returning to work from a leave related to mental illness, one should consider negotiating a graduated return-to-work with the employer. This can mean only working three days a week or working shorter days. Also the manager should be clear to the employer about what situations in the workplace cause stress and how they can be addressed. The last thing that could help get back into the old routine is to have the superior manager or supervisor provide instructions and directions in writing. Since recovery from a mental illness is more difficult if levels of stress are high managers should know some techniques for how to manage stress better in the workplace. If they are unable to learnt this in treatment the next best thing is to change jobs or pick a new career. Changing professions can be difficult but could possibly be the best way for a manager to minimize stress. Some managerial positions require a person to handle more stress than others.

4.6.3 Mentoring and Peer Support Systems

“Some managers have found mentoring and peer support systems have had a positive impact on their workplaces” (Australian Human Rights Commission 2010, 25). Many managers have also developed partnerships with workplace counselling services. These services benefit the workplace and the manager because it increases their productivity, worker efficiency and it minimizes absences from work. With this said, manager’s benefit upon returning to their companies if they have such services. They have support systems in
place that did not exist before and this means that the workplace is a more positive place and has a better atmosphere.

4.6.4 Flexible Workplace

A flexible workplace not only benefits the manager but also all other workers as well as the organization. This system allows treated managers to get back into the flow of things slowly which helps reduce stress. Some flexible workplace practices include being able to work from home or start and finish work at different times as long as all the required hours are met. This minimizes stress levels and improves morale and commitment. It simply allows the manager to do their job at a more peaceful pace and prevents extra stress from building up.

4.6.5 Proactive Measures to Achieve a Safe Workplace

Enterprises or returning managers should take some key measures to help create a healthy and safe workplace and improve mental health (Australian Human Rights Association 2010, 24). These measure include having effective policies and procedures, developing a greater understanding through education and training, ensure safe and health work positions and everything else that has been mentioned about in section 4. Taking these key measures can turn an enterprise with sense of mental health and change into a positive atmosphere where any manager would be happy to work.
CONCLUSION

This thesis has investigated what psychological disorders and mental health are and what affect they have on business managers no matter what age, race, or gender they are. It also investigated which types of psychological disorders and mental health are most common and the symptoms, causes, and treatments, not cures.

The research has shown that the main cause of this problem goes back to the employer and the way that they address the mental health of their employees. This not only harms the manager but also harms the company because it reflects on their productivity. The second major finding was that stress and anxiety are the most common mental health problems within any company and what effects this has on their productivity and other work related skills. The research also mentioned that all these illnesses can be treated but not cured by the means of medication, clinical counselling, psychotherapy, workshops, intrapersonal therapy, electroconvulsive therapy, exercise, meditation, relaxation training. It all depends on what the doctor and patient decide on; like it was mentioned above every person is different and is treated with the method that fits them best.

The practical part of my research proved that managers do not like to admit that they have any disorders or mental health problems and try to find the fastest treatment possible so they can go back to living their normal lives. It was also found that many visit psychiatrists rather than psychologists and seek help in towns far from their homes. The study did not confirm which particular steps companies are taking to promote good mental health in their managers but it did state several things that can be done to help make a change and have a positive impact.

Taken together, these results suggest that I have answered all my questions and my hypothesis. Returning to the hypothesis posed at the beginning of this study, it is possible to state that a manager that has been treated or is being treated for a psychological disorder or mental health problem can fully recover with no negative affects and return to the workplace. There are, of course exceptions to this because not every person is the same and it can happen that someone can not fully recover with no affects made on their career and workplace.
BIBLIOGRAPHY


APPENDICES