

Summertime blues? Let's talk.





ANGER AND DEPRESSION: TEAMMATES.

A narrative between employees.

"Jensen? Is that you?"

"Last time I looked it was. You need your glasses adjusted?"

"No, Jens, I don't. You just look like you've been going through something heavy."

"I don't blab my problems to everybody like some people do."

"Just wondered, Buddy. You look like you've lost weight. And dark circles under your..."

"What is this? Some kind of interview? You want me to tell you how you look?"

"Relax! I'm just trying to talk with you. What're you so angry about?"

"Work. That's what."

"You don't like your job anymore? I thought you did?"

"I don't feel like I like anything anymore."

"That sounds more like depression than anger about your job."

"All I can tell you is I'm snappy with Jan, with the kids, especially her two, but even mine. And if I hear one more word about how to do my job from that new foreman, I'll snap him."

"Have you tried talking to him?"

"Once, and once is once too many. He knows it all."

"Tried the super?"

"Same attitude, different salary."

"Other guys on the crew feel the same as you about your situation?"

"Like I said, I keep my feelings to myself."

"Jan know how you're feeling?"

"Listen, Archer. I don't need the third degree. What I need is some sun, a month in Mexico or Costa Rica. Or to win the lottery so I could afford to get away from this bloody town. Snow and cold, slush

and graveyard shifts, kids arguing. I feel like I'm made of misery. I'm on the verge of uncorking the bottle again, but that'd just be out of the frying pan and back into the fire."

"Jensen, can I tell you something about my experience? I went through this same thing two years ago."

"Sounds like you need to talk about it, Arch. Get it over with."

"You just nailed it: I did need to talk. Call it the blues, call it the job, the weather. Call it what you want. I was locked up inside myself and snarling at anyone who looked sideways at me. It started to affect me at work and it got to the point where Marla threatened to leave if I didn't talk to someone and get straight so I went to our EFAP counsellor."

"It helped?"

"It did."

"Just like that?"

"Took a couple sessions to find out exactly what was under my skin. Just knew I wanted to get out of it."

"Archer."

"What?"

"Thanks for taking the risk of pushing me a little. Sorry if I bit your head off."

"You just took off part of my nose. No worry."

"You look better now though, Arch. Your beak needed a trim."

EFAP is the Employee & Family Assistance Program. This voluntary, short-term counselling program is offered at no cost to eligible employees and their families.

Call any time 800 481 5511 to arrange an appointment or enquire by e-mail to help@efap.ca.



SEASONAL AFFECTIVE DISORDER AND DEPRESSION

Depression can have a profoundly negative impact on the work force. When severe depression affects employees, it can have serious consequences on productivity, quality of work performed and even safety.

Although many people believe that the long, grey winters we experience in northern climates contribute to depression, those who suffer that condition know it can strike any time. Not many would associate springtime—a season which brings back

sunshine and new growth—with feelings of sadness. But, for those still suffering “the blues” that remains a reality.

Seasonal Affective Disorder (SAD) has become regarded as a form of depression triggered by changing light conditions. New understanding of this mood-affecting reaction is that it is brought about by a change in light levels (as opposed to simply a reduction in the level of sunlight). Simply summarized, the decrease in light over fall and winter may trigger SAD but the increase in

levels of sunlight in spring and summer may also trigger SAD.

This new understanding helps explain why some individuals are not depressed over the fall and winter months but develop SAD-associated depression during the spring or summer months.

The depression associated with SAD appears to have similar symptoms to those associated with clinical depression. There can be seasonal differences in SAD depression. Symptoms which manifest during the fall/winter seasons include anxiety, loss of energy, a heavy “leadens” feeling in the arms or legs, social withdrawal, oversleeping, loss of interest in activities once enjoyed and weight gain. Some theories propose that fall/winter SAD is also connected to the reduction in social activity, outside activities and exercise that comes with the colder months.

Spring/summer onset of SAD can include symptoms of anxiety, trouble sleeping (insomnia), irritability, agitation, weight loss, reduced appetite and increased sex drive. There is some speculation that summer SAD can also be influenced by heat, humidity and body image issues.

SAD is a type of depression which can vary in terms of its severity. Typically, the intensity of SAD symptoms is less severe than that of clinical depression. SAD is most easily differentiated from clinical depression because symptoms emerge at the arrival of a particular season and recur for at least two consecutive years without any other explanation for the changes in mood or behaviour.



There are many types of exercise a person can do to increase serotonin including weight training, Pilates, yoga and even stretching exercises for flexibility. The more physically demanding the exercise, the better the chances are at increasing the production of serotonin in the brain. In essence, exercise that involves intense repetitive motion and increases heart rate seems to be most effective in raising levels of serotonin (a brain chemical which is diminished in depression).

Support from friends and loved ones is important for feeling that the condition is recognized and understood.

Because SAD can present with less severe symptoms, people sometimes assume that it is “just the seasonal blues” (whether the winter or summer time blues). Such a relaxed attitude towards SAD can be dangerous because the intensity of the symptoms can intensify and SAD can even turn into clinical depression.

It is important to recognize that the more severe the depression, the more severe the potential negative consequences can become in the workplace.

An example is the fact that diminished cognitive processing associated with depression can potentially be the cause of workplace accidents.

Fortunately, there are things that individuals can do to treat depression. Whether the depression is clinical or caused by SAD, these recommendations are helpful for both conditions:

Exercise has been shown to be as effective as an antidepressant.

Self-help in the form of positive self-talk, eating nutritious food and establishing a regular sleep schedule can make a difference in managing sadness.

Depression in whatever form is serious. It affects not only the workplace but all aspects of a person’s life. Never hesitate to seek treatment for this condition. Contact a health professional for help.

There is always somebody who will care.

