WORKERS WITH MENTAL DISORDERS IN A DIGITALIZED WORLD: CHALLENGES, OPPORTUNITIES AND NEEDS

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AIM

- to address how workers with mental disorders face, interact, and relate with growing amount of digitalisation in the workplace.

People with mental disorders cope differently with work and relational demands. These differences may lead them to face specific challenges but also to provide novel views and approaches.

The contribution is intended to underline the need for tailored approaches to employees with mental disorders interacting with digitalisation, taking into account their strengths and capacities and not only their vulnerabilities.
**SOME DEFINITIONS**

**Mental health** includes our emotional, psychological, and social **well-being**

Mental health conditions altered the (mental) well-being of a person

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**Mental disorders** are mental health conditions that are diagnosed according to the DSM-5 and that imply emotional distress or impairment in important areas of functioning

**Mental health issues** are related to all the psycho-emotional maladjustments that might be transitionally experienced by a person in the course of his/her life, such as existential crisis or psychological maladjustment after a stressful events/conditions.

They are not considered as mental disorders.
Focus on mental disorders

- **Mental disorders** refer to those mental health conditions that are defined and diagnosed by the American Psychiatric Association's Diagnostic and Statistical Manual of Mental Disorders (DSM) 5th version.

- DSM-5 defines a mental disorder as a syndrome affecting in a significant way one’s individual thinking, feeling, mood, and behavior.

- Despite people with some mental disorders may present areas of good functioning and excellence, all generally experiment **significant emotional distress or challenges in the social or occupational activities or in the everyday functioning.**
Major mental disorders in the adult population following the DSM-5 classification

<table>
<thead>
<tr>
<th>Classification sections</th>
<th>Main/Principal disorders</th>
</tr>
</thead>
<tbody>
<tr>
<td>Neurodevelopmental disorders</td>
<td>Autism spectrum disorder</td>
</tr>
<tr>
<td></td>
<td>Attention-Deficit/Hyperactivity Disorder (ADHD)</td>
</tr>
<tr>
<td>Schizophrenia Spectrum and Other Psychotic Disorders</td>
<td>Schizotypal (Personality) Disorder</td>
</tr>
<tr>
<td></td>
<td>Delusional Disorder</td>
</tr>
<tr>
<td></td>
<td>Brief Psychotic Disorder</td>
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<tr>
<td></td>
<td>Schizophreniform Disorder</td>
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<tr>
<td></td>
<td>Schizophrenia</td>
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<tr>
<td></td>
<td>Schizoaffective Disorder</td>
</tr>
<tr>
<td>Bipolar and Related Disorders</td>
<td>Bipolar I Disorder</td>
</tr>
<tr>
<td></td>
<td>Bipolar II Disorder</td>
</tr>
<tr>
<td></td>
<td>Cyclothymic Disorder</td>
</tr>
<tr>
<td>Depressive Disorders</td>
<td>Disruptive Mood Dysregulation Disorder</td>
</tr>
<tr>
<td></td>
<td>Major Depressive Disorder, Single and Recurrent Episodes</td>
</tr>
<tr>
<td></td>
<td>Persistent Depressive Disorder (Dysthymia)</td>
</tr>
<tr>
<td>Anxiety Disorders</td>
<td>Specific Phobia</td>
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<tr>
<td></td>
<td>Social Anxiety Disorder (Social Phobia)</td>
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<tr>
<td></td>
<td>Panic Disorder</td>
</tr>
<tr>
<td></td>
<td>Panic Attack (Specified)</td>
</tr>
<tr>
<td></td>
<td>Agoraphobia</td>
</tr>
<tr>
<td></td>
<td>Generalized Anxiety Disorder</td>
</tr>
<tr>
<td>Obsessive-Compulsive and Related Disorders</td>
<td>Obsessive-Compulsive Disorder</td>
</tr>
<tr>
<td></td>
<td>Body Dysmorphic Disorder</td>
</tr>
<tr>
<td>Trauma- and Stressor-Related Disorders</td>
<td>Posttraumatic Stress Disorder</td>
</tr>
<tr>
<td></td>
<td>Acute Stress Disorder</td>
</tr>
<tr>
<td></td>
<td>Adjustment Disorders</td>
</tr>
<tr>
<td>Feeding and Eating Disorders</td>
<td>Anorexia Nervosa</td>
</tr>
<tr>
<td></td>
<td>Bulimia Nervosa</td>
</tr>
<tr>
<td></td>
<td>Binge-Eating Disorder</td>
</tr>
<tr>
<td>Substance-Related and Addictive Disorders</td>
<td></td>
</tr>
<tr>
<td>Personality Disorders</td>
<td></td>
</tr>
<tr>
<td>Cluster A</td>
<td>Paranoid Personality Disorder</td>
</tr>
<tr>
<td></td>
<td>Schizoid Personality Disorder</td>
</tr>
<tr>
<td></td>
<td>Schizotypal Personality Disorder</td>
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<tr>
<td>Cluster B</td>
<td>Antisocial Personality Disorder</td>
</tr>
<tr>
<td></td>
<td>Borderline Personality Disorder</td>
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<tr>
<td></td>
<td>Histrionic Personality Disorder</td>
</tr>
<tr>
<td></td>
<td>Narcissistic Personality Disorder</td>
</tr>
<tr>
<td>Cluster C</td>
<td>Avoidant Personality Disorder</td>
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<td>Dependent Personality Disorder</td>
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<td>Obsessive-Compulsive Disorder</td>
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SOME DEFINITIONS: Digitalised work

• Over the last 30 years, an extensive technological and digital development has affected extensive sectors of production and the workforce
  • It is virtually impossible to be part of the workforce without dealing with digitalisation
  • Digitalisation is not only cutting edge-technologies: it encompasses everything from office work, to specialised machinery, to homeworking

• Digitalisation at work has consequences for physical and mental well-being
  • As noted by EU-OSHA and other organisations
WORKING WITH A MENTAL DISORDER
Scale of the phenomenon in the EU

• The exact number of workers with MD is difficult to be calculated, as there are many confounders which make these analyses more difficult
  • Stigma, attitude, disclosure, diagnosis
• The share of EU workers with an MD has been estimated with different metrics:
  • Cross sectional (age, comorbidities), indirect factors (absenteism, presenteeism)
WORKING WITH A MENTAL DISORDER

The disclosure

SYMPTOMS CONCERNS
- threat to safety of other employees or clients
- person would be incapable of handling stress
- strange or unpredictable behaviour

WORK PERFORMANCE CONCERNS
- impaired job performance
- absenteeism

ADMINISTRATIVE CONCERNS
- level of monitoring needed
- negative attitude of other employees

People with MD are dangerous or unpredictable
Working is not healthy for people with MD
People with MD lack of motivation: MDs are excuses to work less or to have job facilitations
People with MD lack the competence to meet the demands of work
Providing employment for people with MD is an act of charity
Providing employment for people with MD is only a cost/should be done by law

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WORKING WITH A MENTAL DISORDER

Challenges for employees:
- difficulties related to the MD disclosure; problems in recovering and job reintegration after an acute episode; distress related to job performance and productivity, acquiring new competences, or working in teams.

Opportunity for employees:
- feeling good and satisfied, improve or develop skills, competence and experience, foster autonomy and give a source of purpose, feeling actively part of the society.

Challenges for employers:
- costs for absenteeism and decrease in productivity; actions to facilitate disclosure, to reduce risk factors of crisis or hospitalization and to promote job reintegration.

Opportunity for employers:
- support a competent, capable and productive workforce, with its own peculiarities.

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DIGITALISATION AND MENTAL DISORDERS: BARRIERS AND FACILITATORS

• When speaking of MD generalization are often meaningless and useless

• What could be a challenge for a worker with a type of MD might in turn be a facilitator for a worker with another MD

When looking at the relationship of MD workers with digitalisation, it could be valuable adopting an **individualized perspective** basing on each person’s (or category of MD) **fragilities and resources**
The relationship with technology and digitalization has the precious advantage to help to smooth out, soothe or prevent the important relational problems.

The aspect of communication with the employer and the work group (e.g., psychosis or anxiety disorders VS schizoid personalities).

The management of the workload fluctuations.

Tailored employment support program for people with MD (e.g., ClubHouses).
IMPLICATION FOR POLICY

• There are no current EU directives regarding mental health and digitalisation, but there is progress:
  • Since the last decade, EU and EU-OSHA have focused on new technologies and the promotion of mental health at work
  • Suggested interventions range from investments in the supply of digital skills, standardization across the EU, accessibility measures for all workers
• There is the need to redefine who a digitalised worker is, what are the risks associated with the modern digital workspace, to consider alignment of current and future EU legislation
IMPLICATION FOR PRACTICE

• Often MD associated problems are not sufficiently investigated by the OP during health surveillance visits
  • Lack of specific tools available, tendency to conceal disorders

• Goal: pick up on indirect signs of mental disorders for early diagnosis and/or diagnosis of underlying MD

• Requires coordinated collaboration between OP, clinical psychology, and employers

• Most important: no mental disorder or individual is the same
IMPLICATION FOR RESEARCH

• More research in needed
• Longer follow-up needed to evaluate specific populations
  • Both in terms of specific digitalisation aspects and specific
    MDs
• Need to investigate the phenomenon further at a EU level
  • Implementation of EU-wide studies with the collaboration of
    EU-OSHA and member states
NEXT STEPS

• Technology and mental disorders → a complicated relationship

• What can we do as Occupational physicians to evaluate this relationship?
TECHNOSTRESS

• An increasing presence in academic research

• "A modern disease of adaptation caused by an inability to cope with the new computer technologies in a healthy manner.»

  • Technostress: The Human Cost of the Computer Revolution (Brod, 1984)

• Technostress creators (Taraftdar, 2007)
THE RESEARCH

• Population = our hospital setting
• Tools = anonymous survey, technostress questionnaire
• Aim is to study both:
  • Technostress + healthcare workers
  • Technostress + mental disorders
THE QUESTIONNAIRE

Techno-overload
I am forced by technology to work much faster
I am forced by technology to do more work than I can handle
I am forced by technology to work with very tight time schedules
I am forced to change my work habits to adapt to new technologies

Techno-invasion
I spend less time with my family due to technology
I have to be in touch with my work even during my vacation due to technology
I feel my personal life is being invaded by this technology

Techno-complexity
I do not know enough about technology to handle my job satisfactorily
I need a long time to understand and use new technologies
I do not find enough time to study and upgrade my technology skills
I often find it too complex for me to understand and use new technologies
Thank you!

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