

## Schizophrenia and the Workplace

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Schizophrenia is a debilitating mental illness characterized by classic symptoms of loss in touch with reality, experiencing hallucinations and delusions and formal thought disorder (disorganized speech and behavior). The individual suffering from schizophrenia may also experience loss of motivation (avolition), loss of interest in earlier pleasurable activities (anhedonia), blunted affect and ambivalence in attitudes and emotions expressed. At a global level, the prevalence of schizophrenia is up to 1% (1 out of 100 people). Genetic vulnerability, imbalance in biochemical matrix, environmental factors and dysfunctional brain anatomy are implicated risk factors in the development of schizophrenia [1].

### Socio-occupational dysfunction in schizophrenia

Many patients with schizophrenia have problems in occupational and social functioning. Cognitive dysfunction is paramount in schizophrenia and is central to the development of the psychotic symptoms of the illness. Multiple areas of cognition are affected and include attention, learning, memory (working memory and semantic memory), reasoning, processing speed, task shifting and executive functioning [2]. The cognitive reserve and cognitive capacity of the individual is reduced in patients of schizophrenia. The deterioration in cognitive functioning is related to the severity of illness and consequently affects the social, occupational and day to day functioning of the individual. Thus, relationships with people, working and performing day to day functions such as maintaining personal hygiene and social relationships deteriorate [3].

### Schizophrenia and its impact on the Workplace

The functional ability of an individual at the workplace is inversely proportionate to the severity of psychiatric illness he may have. Cognitive deficits in schizophrenia lead to problems with planning and organizing work, remembering tasks, socializing with colleagues and paying attention to targets. At times, the positive symptoms (hallucinations and delusions) may also actively interfere with work. However, the psychotic process in schizophrenia is shown to defeat productivity and participation [4].

An essential aspect of understanding the effect of schizophrenia at workplace depends on who is affected the workplace. When the employees at the lower rung are diagnosed with schizophrenia, it does not impact the overall organization as much as they either lose the job or their work may get covered by other co-employees. Whereas, if someone from the managerial level is affected by schizophrenia, the entire team bears the brunt of mismanagement and lowered work output; as a result of which the team suffers without any anchor out of the situation. Multiple areas at the workplace may be impacted by schizophrenia and these include –

1. **Can the issue be resolved during screening and recruitment:** There is no particular type of job that is well suited for an individual with schizophrenia. The severity of the illness (which consequently determines the socio-occupational functioning of the individual) along with the interest levels and skill set of the individual determine if an individual will be capable of doing that job. The extent of disability differs from individual to individual and is positively correlated with the severity of illness. Some of the general accommodations made for people with mental health problems include- providing them the comfort of workplace, allowing them to leave early the days they may feel a trigger, flexible working hours and allowance to do a job that may not push them too much in a zone of discomfort [5].

2. **Absenteeism at the workplace:** As the disability increases due to schizophrenia, it eventually culminates in absenteeism at the workplace. This threatens the job security of an individual and affects the overall productivity for an organization. Repeated hospitalizations and relapse of an illness are also major contributors for absenteeism. It is also crucial to consider that sometimes it may not be the illness itself but a comorbid condition that may lead to absenteeism. Alcoholism or substance dependence (47%), depression (50%), obsessive compulsive disorder (23%) and panic attacks (15%) are the commonly co-occurring mental conditions that may lead to absenteeism [6].
3. **Being present but not working due to the illness:** When the employee suffering from schizophrenia maintains to come to work, the quality of work may dwindle down severely and productivity suffers. The work output of the employee drastically reduces and may involve troubles for the co-workers where the employee suffering from schizophrenia may hamper work of the employees, disrupt working environment and have interpersonal disturbances at the workplace at all rungs of employment [7].
4. **Delusions related to the workplace and colleagues:** There are two instances when it severely hampers the occupational functioning of an individual at work. One, is when the severity of illness is high enough to impair work and two, if delusions are based with relation to their co-employees. Since delusions are irrational beliefs that are deeply entrenched, it is better to have the individual work in independent positions as far as possible and have minimal team interaction as possible (in the case that it may irk them in any way) [8].
5. **Violence and Aggression at the workplace:** Though the depiction of violence is stigmatic in association with mental illnesses, it is in evidence that people with mental illnesses may indulge in some bizarre and arbitrary acts of violence. There are controlled studies in arrested offenders, inpatients, outpatients, and families with a mentally ill member, epidemiological surveys, and longitudinal cohort studies all report a relationship between violence and schizophrenia [9]. One of the most common and predictable factors for violence in schizophrenia is a previous act of violent behavior. There are some clinical predictors of violence in schizophrenic patients with exacerbation of psychotic symptoms viz. type and characteristics of delusions, delusions causing fear and anguish, persecutory delusions, active seeking of information to confirm or refute the delusional belief, systematization and conviction of the delusion, quality of the hallucinations, previous violence and less insight into symptoms [10].
6. **Reintegration at the workplace after treatment:** Reintegrating individuals who have had psychoses, into the workforce, a number of factors are considered to be associated with good occupational outcomes. The fitness to work of someone after a first episode of illness remains unanswered in most cases. Studies of patients admitted for schizophrenia, evidences that those with predominantly negative symptoms are less likely to be employed [11].

### **Role of the Human Resource Team in an Organization**

When an employee suffers from schizophrenia, the organization and its team are also implicated in the process of screening and recruiting, accommodating at the workplace and reintegrating them back to work. It must be the responsibility of the Human Resource (HR) department in the organization to make sure that the individual / employee suffering from schizophrenia is provided with adequate on the job training, extra supportive training (if required) and that the individual receives sufficient accommodation to carry out work adequately. However, this scenario is ideal and not all organizations may be able to make available the aforementioned accommodations. Making therapeutic sessions available on the job if required or otherwise for cognitive remediation and social skills training also is a part of HR responsibility when there is knowledge about an employee suffering from schizophrenia.

A panel of psychotherapists and psychiatrists is a crucial aspect of the HR that may play focal role to not just manage employees with schizophrenia but also assist them at the work, psycho-educate co-workers and keep the best of interest for employees and the organization. It is important to recognize that having seniors who support mental health problems at work makes a huge difference about making workplace more inclusive for people with mental illnesses.

### Role of Organizations

Every organization has provisions for employee well-being. Employment provides five categories of psychological experience that promote mental well-being: [12]

1. Time structure (an absence of time structure can be a major psychological burden)
2. Social contact
3. Collective effort and purpose (employment offers a social context outside the family)
4. Social identity (employment is an important element in defining oneself)
5. Regular activity (organizing one's daily life).

With regards to mental health, there may not be specifically laid out rules and provisions however, there are some organizations that do provide for accommodation for people with mental illnesses. Most accommodations in the workplace can be established with minimal or no cost. Accommodations call for some flexibility and creativity, and quick to place in the system.

Accommodations may include –

1. **Creating a supportive environment** – It is critical for individuals with mental health conditions to work with colleagues and leadership who are positive, open, and welcoming.
2. **Removing workplace stressors** – Working in an office or workspace that is quiet may be more comfortable and manageable.
3. **Adjusting the approach to supervising** – It could be as simple as scheduling recurring one-on-one meetings to see how things are going.
4. **Flexible schedules** – Flexible arrival and departure times also allow individuals to perform duties when they can be most productive.
5. **Providing opportunity to telework** – Telework may be an option in circumstances where the physical presence may not be necessary.
6. **Treatment** – Counselling and Psychotherapeutic help should be made available as part of the HR in order to manage employees with schizophrenia when the time arises.

### Leave for Mental Health Problems

Paid leave for medical illnesses, maternity and paternity leave are a norm of every company/organization. Considering the rampantly growing burden of mental illnesses, it is a dutiful consideration to raise the question if organizations should pass a bill for paid leaves for mental illness. Though, there are some organizations in the West that do allow 'mental health days' however, it is not a norm. It may be wise to consider mental health leaves as they may aid in retaining talent as more employees can successfully return to work after mental health-related leaves of absence [13].

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