STRESS AND WORK RELATED DEPRESSION

SHORT-TERM GROUP PSYCHOTHERAPY AND ORGANISATIONAL ISSUES

IGA, Aarhus

9 November 2012
Burn out - Commitment

- Exhaustion
- Cynicism
- Inefficiency

- Energy
- Involvement
- Efficiency
Mismatch (Maslach)

- Workload
- Decision latitude
- Rewards
- Social context
- Feeling of justice
- Values

- Heavy demands
- Too narrow
- Insufficient
- Break down
- Non existent
- Conflict
# Somatic Symptoms

- Tiredness or exhaustion
- Serious sleep disturbances
- Increased sensitivity to pain
- Sensitivity to infection
- Muscle tension
- Gastrointestinal or cardiac problems
- Dizziness
Cognitive Symptoms

- Serious memory disturbances
- Problems with concentration
- Difficulties coping with multiple impressions at the same time
- Low stress tolerance
- Perceptual disturbances (tunnel vision)
- Increased sensitivity to light or sound
Sleep

- Disturbed sleep – a risk factor (not working overtime)
- Unable to relax before going to bed
- Anticipated stress increases wakefulness
- Lack of sleep contributes to next day’s stress
- Sleep pattern – more short periods of wakefulness, less time in deep sleep
- Long period of disturbed sleep influences immune system
Why group therapy?


Results from several meta analyses:
  • No difference in outcome between individual and group therapy
  
  • E.g. Mc Roberts et al. (1998)
  • 23 RCT studies
    • No difference in ES
  • Individual therapy
    • Mean ES = 0.76
  • Group Therapy
    • Mean ES = 0.90
Learning takes part in the group itself
(Dalal, 2001)

- Internalisation of interactions in the group
- Discover similarities in apparent differences and differences in apparent similarities
- The group develops from simple to complex
Therapeutic alliance

- Goals
- Ways of working
- Relation

- Pre-therapy assessment
- Worthy of the patients’ trust
- Values
- Empathic attunement
- Good enough leader
Emotion

• Purpose and meaning
• Response from other members confirm the inner experience
• Only through the emotional expression is it possible to understand the purpose and meaning of other peoples’ behaviour
Empathy

- Resonance of feelings
- Empathic knowledge
- Empathic response
- Momentary role identification
Interpersonal learning – feedback

(Yalom, 1995)

- Message is clear
- Given immediately
- Focus on the person giving the message
- Of emotional nature
- Concerns the relation
- Is non-judgemental
Common factors in group therapy

(Sandahl & Lindgren, 2006)

• Support
  • Cohesion
  • Therapeutic alliance

• Learning
  • Experience of being part of a developing group
  • Building on similarities
  • Affective communication
  • Developing new "ways-of-being-with-the-other"

• Action
  • Increased feeling of competence
  • Mastery of difficult interpersonal situations
  • Communication skills
Group focus:

Close to the presenting problem of the patient category

(Loss of pride and self-esteem as a consequence of feeling less competent)

Basch 1995
Individual focus

- A problematic aspect of "ways-of-being-with-the-other"
- Resources as well as weaknesses
- Expressed as a relational problem

- Example
  - Work related depression
    "I must develop a better tolerance for vague and ambiguous situations, so that my capacity to take responsibility for other people does not affect negatively"
Why focus?

- Patient becomes directly involved
- Patient understands how treatment can help
- Relieves feelings of victimization
- Contributes to the instillation of hope
- Gives increased motivation
- Increases curiosity and self reflection
- Clarifies the presenting problem
- Clarifies negative interpersonal patterns as well as resources
- Helps to build therapeutic alliance
- Guides the therapist
Time limited and Focused Group Psychotherapy

- Pre-therapy assessment
- Joint formulation of focus
- Discussion of fears and negative predictions
- Written information about group psychotherapy
- Closed groups
- 90 minutes sessions
- 18 sessions
- Twice a week until session 9
- Once a week session 10 – 18
- One group conductor
Phases of treatment

• Orientation
  • Understanding how to work, get to know each other, cohesion

• Interaction
  • Group identity, trust, here and now, individual foci, working with differences, emotionally meaningful communication, reflection, intimacy, testing new ways of relating

• Separation
  • Summary of work done, feelings of loss, expectations and plans for the future
Process

- Here and now
- Interaction
- Safety and support
- Emotional expression
- Feedback
- Structure
Group leader attitude

- Active
- Interested
- Open
- Informing
**Reliable Change Index**

\( \text{RCI} = \frac{M_{f-u} - M_i}{SE_{\text{diff}}} \)

- RCI > 1.96  
  (Sandahl et al. 2011)

<table>
<thead>
<tr>
<th>Depression</th>
<th>Anxiety</th>
<th>GSI</th>
</tr>
</thead>
<tbody>
<tr>
<td>FGT=67%</td>
<td>FGT=47%</td>
<td>FGT=64%</td>
</tr>
<tr>
<td>CGT=70%</td>
<td>CGT=49%</td>
<td>CGT=55%</td>
</tr>
<tr>
<td>CoGr=74%</td>
<td>CoGr=51%</td>
<td>CoGr=53%</td>
</tr>
</tbody>
</table>
Alliance to the group (CALPAS) n=18

(Lindgren et al. 2008)

Predictor:
Mean alliance
GSI p = .005
Dep p = .09
Anx p = .002

Correlations
Session 8
GSI = -.56*
Dep = -.54*
Anx = -.75**
# Time used for therapists’ interventions

<table>
<thead>
<tr>
<th>Terapeut</th>
<th>Tid som terapeuten talat</th>
<th>Antal interventioner</th>
<th>Genomsnittlig tid per intervention</th>
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<tbody>
<tr>
<td>1.</td>
<td>19,09</td>
<td>46</td>
<td>22 sek</td>
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<td>2.</td>
<td>25,76</td>
<td>74</td>
<td>19 sek</td>
</tr>
<tr>
<td>3.</td>
<td>17,07</td>
<td>33</td>
<td>28 sek</td>
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<tr>
<td>4.</td>
<td>19,94</td>
<td>114</td>
<td>9 sek</td>
</tr>
<tr>
<td>5.</td>
<td>10,56</td>
<td>22</td>
<td>25 sek</td>
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</table>
### Percent of verbal communication

<table>
<thead>
<tr>
<th>Terapeut</th>
<th>Här och nu</th>
<th>Uppmuntra interaktion</th>
<th>Eftersträva emotionella uttryck</th>
<th>Synliggöra fokus</th>
<th>Övrigt</th>
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</thead>
<tbody>
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<td>1.</td>
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<td>1,74</td>
<td>3,10</td>
<td>--</td>
<td>74,20</td>
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<tr>
<td>2.</td>
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<td>1,29</td>
<td>5,3</td>
<td>6,61</td>
<td>72,61</td>
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<td>3.</td>
<td>28,42</td>
<td>1,63</td>
<td>3,04</td>
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<td>66,92</td>
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<td>4.</td>
<td>12,44</td>
<td>0,93</td>
<td>10,40</td>
<td>--</td>
<td>76,23</td>
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<tr>
<td>5.</td>
<td>33,68</td>
<td>2,98</td>
<td>--</td>
<td>2,98</td>
<td>60,35</td>
</tr>
</tbody>
</table>
“Poorly managed (i.e. laissez-faire) distributed leadership processes may turn into an explosion of personal dynamics... in which tensions around the location of leadership get played out in accusation and hostility”

(after Huffington, James & Armstrong, 2003)
Holding environment

(After Petriglieri & Petriglieri, 2010)

• Working through
  Absorb, filter and cope with difficult or threatening feelings and ideas, so that they can be worked with

• Interpretation
  Communicate ideas and thoughts which contributes to meaning and coherence

• Role analysis
  Clarity, purpose, boundaries, task and goals
Case study:  
The best work place in Sweden 2003  
(Johansson et al., 2010)

• The vision of good palliative care realized in the daily work

  • Adequate resources and an understandable structure
  • A common experience of meaningfulness
  • Trust and shared responsibility in the work group
  • Reliable, just, predictable, engaged and considerate managers
FIGURE 1. Staff numbers (SN) (log_{10}) per 10,000 in the population during 1993 to 1997, and sickness rates (SR) (log_{10}) for psychiatric disorders during 1998 to 2002 in seventeen Swedish county councils.
FIGURE 1. Staff numbers (SN) \((\log_{10})\) per 10,000 in the population during 1993 to 1997, and sickness rates (SR) \((\log_{10})\) for psychiatric disorders during 1998 to 2002 in seventeen Swedish county councils.


<table>
<thead>
<tr>
<th></th>
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<tr>
<td>Blekinge</td>
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<td>4,764</td>
<td>6.09</td>
<td>66</td>
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<td>8,333</td>
<td>17</td>
<td>80</td>
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<td>114</td>
<td>8,557</td>
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<td>73</td>
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<td>8.73</td>
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<td>7,912</td>
<td>18.71</td>
<td>114</td>
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<td>6.79</td>
<td>72</td>
<td>7,187</td>
<td>10.02</td>
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<td>Jämtland</td>
<td>4,497</td>
<td>3,818</td>
<td>15</td>
<td>30</td>
<td>3,765</td>
<td>7.97</td>
<td>64</td>
<td>3,932</td>
<td>16.28</td>
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<td>Jönköping</td>
<td>12,035</td>
<td>9,197</td>
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<td>Kalmar</td>
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<td>6,921</td>
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<td>5,163</td>
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<td>Södermanland</td>
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<td>6,927</td>
<td>14.44</td>
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<td>53</td>
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<td>10,091</td>
<td>16.35</td>
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<td>Västernorrland</td>
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<td>120</td>
<td>7,750</td>
<td>15.48</td>
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<tr>
<td>Västmanland</td>
<td>9,267</td>
<td>6,444</td>
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<td>29</td>
<td>6,609</td>
<td>4.39</td>
<td>84</td>
<td>6,957</td>
<td>12.07</td>
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<td>Örebro</td>
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<td>8,322</td>
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<td>60</td>
<td>8,379</td>
<td>7.16</td>
<td>137</td>
<td>9,031</td>
<td>15.17</td>
<td>112</td>
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<tr>
<td>Östergötland</td>
<td>15,056</td>
<td>11,598</td>
<td>23</td>
<td>84</td>
<td>11,647</td>
<td>7.21</td>
<td>203</td>
<td>12,020</td>
<td>16.89</td>
<td>134</td>
</tr>
</tbody>
</table>

SN, staff numbers; SR, sickness rates
*Round figures.
### TABLE 2. Association from Bootstrap Regressions Between Staff Reduction (%) from 1993 to 1997 and Changes (%) in Sickness Rates for Psychiatric Disorders from 1998 to 2002 in Seventeen Swedish County Councils, Among all Employees and Stratified by age and sex. 95% Confidence Intervals (percentiles)

<table>
<thead>
<tr>
<th></th>
<th>$B$</th>
<th>95% CI</th>
<th>% Change in the Outcome per 1% Change in the Background Variable</th>
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</thead>
<tbody>
<tr>
<td><strong>All</strong></td>
<td>9.18</td>
<td>4.27; 14.90</td>
<td>9</td>
</tr>
<tr>
<td><strong>Age:</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18–34</td>
<td>11.15</td>
<td>−25.49; 54.05</td>
<td>11</td>
</tr>
<tr>
<td>35–49</td>
<td>9.00</td>
<td>5.31; 13.09</td>
<td>9</td>
</tr>
<tr>
<td>50–64</td>
<td>14.17</td>
<td>−1.03; 33.42</td>
<td>14</td>
</tr>
<tr>
<td><strong>Gender:</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Women</td>
<td>9.41</td>
<td>5.03; 15.85</td>
<td>9</td>
</tr>
<tr>
<td>Men</td>
<td>8.16</td>
<td>−1.94; 15.66</td>
<td>8</td>
</tr>
</tbody>
</table>
Prevention

• Selection
• Replacement
• Organise time for reflection
• Leadership development
Visible, vulnerable, dependent and accountable
Managerial leadership and employee health

(Nyberg, 2009)

• Leadership associated with good employee health
  • Provide means to carry out work in an independent manner (information, power and clarity)
  • Encourage partaking in the development of the workplace
  • Provide support
  • Inspire
  • Show integrity (justice)
  • Integrate team members to work well together

• Leadership associated with poor employee health
  • Acting dictatorial
  • Forcing own opinion on others
  • Being insincere
  • Actively unfriendly
  • Withdrawing
Elliott Jaques

- Authority
  - Trust
  - Equitable payment
  - Meaning
  - Full capacity
Leadership is a state of mind
Acquired skills

- Are dependent on
  - Experience
  - Context
  - Relations

- Involve
  - Tacit (implicit) knowledge
  - Automatic behaviour
  - Schemes (ways-of-being-with-the-other)
    - Values
    - Affects
    - Self-knowledge
    - Trust
    - Sense of coherence and meaning
    - Moments of meeting
Learning by doing

Backstage

Reflection & metareflection

On stage

Act

Reflection & metareflection

Act
Backstage groups

→ Groups of 8 first line or middle managers
→ Three hours, once monthly
→ 12 occasions
→ Manual based
→ "Lay persons" as group conductors
→ Group supervision between sessions for the group conductors
→ Confidentiality
→ Real problems or dilemmas
→ Problem solving at the work place
Examples

• How to deal with an employee who does not function satisfyingly
• Role ambiguity
• Role conflicts
• Non-productive meetings
• Problems in cooperation
• How to deal with a development project
• Stress and worry for one’s own work load
• A sense of not being in control of one’s work situation.
Qualitative analysis of focus group interviews

• Main category

  • A non-competitive forum
    • The region behind the scene
    • Not alone with problems
    • Confidentiality and presence
    • "Strangers" group
**Similar results**  
*(Different cohorts in the public sector; education, health care, social services, technical management etc. 70% female managers, n>700)*

<table>
<thead>
<tr>
<th>Question</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Could you bring up problems from your own work place that you were personally engaged in?</td>
<td>90%</td>
</tr>
<tr>
<td>Did the other members bring up interesting problems?</td>
<td>95%</td>
</tr>
<tr>
<td>My participation in the Backstage group contributed to strengthen my self confidence?</td>
<td>65%</td>
</tr>
</tbody>
</table>
Why better self confidence?

1. To be able to contribute with ones own knowledge and competence
2. The sense of community and the support from the group
3. Instrumental problem solving
## Coping as leader

\( (n=38) \)

<table>
<thead>
<tr>
<th>Factors in WQ</th>
<th>M (Sd) Before</th>
<th>M (Sd) After</th>
<th>T</th>
</tr>
</thead>
<tbody>
<tr>
<td>Discrimination</td>
<td>0.60 (0.27)</td>
<td>0.53 (0.23)</td>
<td>1.59</td>
</tr>
<tr>
<td>Attitude</td>
<td>3.43 (0.42)</td>
<td>3.71 (0.46)</td>
<td>4.49 **</td>
</tr>
<tr>
<td>Control</td>
<td>2.29 (0.34)</td>
<td>2.25 (0.42)</td>
<td>0.57</td>
</tr>
<tr>
<td>Engagement</td>
<td>13.39 (4.01)</td>
<td>14.13 (3.65)</td>
<td>1.08</td>
</tr>
<tr>
<td>Intensity</td>
<td>15.12 (5.11)</td>
<td>18.38 (5.22)</td>
<td>3.92 **</td>
</tr>
<tr>
<td>Coping</td>
<td>38.12 (9.91)</td>
<td>41.77 (9.55)</td>
<td>2.38 *</td>
</tr>
</tbody>
</table>

Christer Sandahl, Medical Management Centre, Karolinska Institutet
Qualitative analysis of responses to WQ

- Increased
  - Relation orientation
  - Confidence in leader role
  - Focus on leadership qualities ("teamleader", "coach" etc)
  - Future orientation
Employee Assistance Program

- Telephone counselling
  - 365 days
  - 24 hours
- F2F counselling
- Follow-up
- Reports to management
ADA (arbetsplatsdialog för arbetsåtergång)

- Screening interview
- Whole day assessment, physician, psychologist, social worker
- Interview with supervisor
- "Convergence consultation", patient, supervisor and two from the team
- 4 hours lectures on stress, patients and supervisors separately
Group therapy and work place consultation

- Pre-therapy assessment
- Three-part consultation
- Therapy
- End of therapy: Three-part consultation
- Follow-up
Top management?

- Involved and engaged
  - On the agenda
  - Learning and development

- Systematic evaluations
  - Health
  - Economy