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**John Moe:** Some of us—not all of us, but I'd say most of us—have to, at some point, go to work. Maybe an office, maybe a restaurant, a school, a hospital. There are almost always coworkers involved once you get there. There is typically, for almost everyone, a boss or several bosses. Even if you work from home, there are generally other people who exist in your work world as faces on a Zoom call or data bits forming an email or two or a billion emails. There is very often a bureaucracy in play at work—sometimes an efficient one, sometimes a very frustrating one. And I'll say it—and I've said it before, because it's important to remember—work is weird. Jobs are weird.

We live in a society where survival means work: exchanging our labor for many hours, doing pretty much the same thing over and over again each week in order to have the food, shelter, and clothing we require. I'm not saying it's unnatural. But to be fair, I'm probably implying that it's unnatural. The whole work thing can be challenging. Even more challenging if you have an interesting mind, a tricky brain, a mental health condition that makes you function differently than the normies, if there are even normies.

I'm going to try to help you out with all that. This week, that's part of my job. I'm at work right now! I make a podcast. It's *Depresh Mode*. I'm John Moe. I'm glad you're here.

**Transition:** Spirited acoustic guitar.

**John Moe:** Megan Delp is the Director of Workplace Mental Health for NAMI, the National Alliance on Mental Illness. She's here, we're here, to try to shed a little wisdom and insight into the whole work and mental health issue.

**Transition:** Spirited acoustic guitar.

**John Moe:** Megan Delp, welcome to *Depresh Mode*.

**Megan Delp:** Thank you so much. It's a pleasure to be here.

**John Moe:** I have some great questions from our listeners to get to, but I have some questions of my own too. So, let's say I just got a new job—office job, big organization, totally new, don't know anybody there. And I also have some mental health issues that create challenges in my day-to-day functioning. What would you recommend I do about making a plan?

**Megan Delp:** I would definitely start with your provider. So, whoever you are already working with on those mental health challenges, talking with them about what accommodations you might need, what training you might need, but really starting with that provider, that person that's already safe, you already know them, you have that relationship built. If you're starting a new, a new job, you know, you're kind of just figuring things out as you go there. You don't know people are safe yet. And so, starting with that provider is always a good safe bet.

And then as you get more comfortable in that job, as you meet new people, as you kind of feel your way through, you can start saying, “Okay, this supervisor that I have now, they do feel safe. I do feel like I could actually be honest with them. They've shared about their mental health. Great. That means it's safe to share about mine.”

If it's not feeling like that supervisor might be the safest person, then you might want to go more to the human resources department. If you're feeling like you need mental health accommodations or if you need that extra support, human resources might be the safer bet.

**John Moe:** And what legal rights does a person have in the workplace with a mental disorder? What kind of discrimination laws are even on the books in a situation like that?

**Megan Delp:** Absolutely. So, a lot of people are unaware that, you know, mental health conditions cannot be discriminated against—just like any physical health condition you might have or physical health limitation. Whatever there is, you know, there are legal protections there for people. And so, going to a resource online like the Job Accommodation Network to really learn about your rights, to learn about what you are allowed to ask for and what you need to be given as an employee, that can be a great place to start. I will say there are some sticky points that come along with that. For example, most employers will require some amount of documentation there, which usually means disclosing a diagnosis. Whether or not that means there's symptoms that are revealed or if it's just the diagnosis, you know, it really varies employer by employer. But it can get a little sticky, and it is sensitive information.

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So, just being aware that is typically what an employer will ask for is definitely important.

**John Moe:** You mentioned getting a read on your supervisor, trying to figure out if they're amenable or not. People are hard to read. What should people be looking for, before they divulge and before they trust someone?

**Megan Delp:** Yes. So, at NAMI and our stigma free initiative, when we train managers in our corporate partnerships, we always tell them that they need to lead by example. So, are they taking care of their own mental health? Are they signing off at the end of the day? Actually staying off at the end of the day? Are they taking care of their health? Are they asking us how we feel during the day? Are they asking us how our stress levels are? It's really just seeing the person and saying like, “How are they managing themselves, and how are they inviting me to manage myself as an employee?” Are they encouraging me to be healthy? Are they encouraging me to take breaks, to really take a vacation and actually sign off? Or are they really encouraging, you know, “You need to answer your emails no matter when they come in! Can I reach you on vacation?” You know, there are those differences you see in a supervisor who is encouraging healthy behaviors versus one who might not be.

**John Moe:** Let's at look at some questions from our listeners here. Somebody says, “I'm on day three off work due to an unexpected depressive episode. Currently just shared with my supervisor, ‘My allergies flare up.’” In quotes. “Curious what the risks and pros are to being transparent with higher ups regarding the real issue at play. I've experienced negative

consequences where my disclosure was then used against me in a past place of employment, so while I want to be honest, I'm fearful as well.”

What would you suggest to this person?

**Megan Delp:** Yeah, that is—it is a tricky situation. As you mentioned, there can be ramifications to sharing. And it is unfortunately the reality that we live in. It really is, you know, taking the time to know your supervisor. And like you said, you're brand new there. So, it's really hard to know if it's safe; if the supervisor—if HR will be understanding; if there might be ramifications, if not. Unfortunately, with something like disclosing a mental health condition or symptom flare ups, it really is very specific to the workplace that you are in.

And so, as much as I want to say, you know, “Go for it! Stand up for yourself, advocate for yourself,” it does come with risks. And we want to be careful that we aren't putting ourselves in a really negative situation.

**John Moe:** Yeah. That listener mentions calling in sick, and another person says, “Well, I often wonder what constitutes the mental health equivalent of influenza.” That line where you decide you're too ill to go into work that day. You know, it's tricky. Like, you know, you want to take care—if you're sneezing your head off, and you have 103-degree fever, of course you don't go in. But what's the mental health boundary on that, do you think?

**Megan Delp:** You know, I actually kind of don't think that there is a boundary. I love to think of it more as “What do you need in order to stay mentally well?” So, maybe the mental health day is actually preventative. Like, you're starting to notice maybe you're being a little bit more irritable with your colleagues, maybe you're avoiding your emails a little bit, and starting to notice like, “Hey, I might need a break. And before I get to the levels where I need multiple days off, let me just take the day, you know, go for a walk outside, just take care of my mental health.”

So, it could even be preventative to take care of your mental health, to take the day off. But in terms of, quote/unquote, “how sick” do you need to be, I don't know that there is a good answer for that. Like, I don't know how sick enough we have to be to say we deserve something like a day off. I think if we're struggling, that is the clue that we need to take care of ourselves. And maybe that means time off.

**John Moe:** Yeah. It's tricky, though. Because you think, well, in a perfect world, I would tell people, “Yeah, my depression is really acting up, or I'm having a complete panic attack, you know, around the clock. It's a mess.” But we don't live in a perfect world. We live in a world where we get judged on things with our minds differently than we get judged with a broken leg.

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You know, it's balancing how things should work with how things probably do work sometimes.

**Megan Delp:** 100%. And yeah, we do have to be careful with what we disclose. And as a therapist, I always tell my clients it's your information to do with what you want. You never have to disclose; you never have to tell anyone what's going on with you unless you feel safe to do so, unless you want to do so. And so, we are allowed to keep all of that information to ourselves. Now, of course, there might come the time when—if you have to apply for short term disability or FMLA—like, some of those do require disclosure. But until we get to that level, we are perfectly valid in keeping that information safe and sound in our own brains.

**John Moe:** You do a lot of work with NAMI, obviously, in your role there. And you're in private practice. What do you see especially since covid is what I'm wondering about, because it seemed to change everything regarding how we work, where we work, what we're doing, what a workplace even means. What are the mental health issues that you're running across the most, both with NAMI and in your practice?

**Megan Delp:** So, covid definitely brought into crystal clear clarity that we are struggling with our mental health as a nation. And covid definitely exacerbated that. And now we are seeing the ramifications of having to shift our entire culture. And there are a ton of pros to working remotely, to working hybrid. But there are also things that we still need to figure out. So, if someone is working totally remotely, they've lost the community connection of going into the office. They've gained time, they've gained energy, they've gained a ton of things that are amazing. I benefit from that every day. And we are still humans who need that community connection.

So, how are we rebuilding a community in a more remote or hybrid structure? We do just need that human-to-human connection, and I think we're still trying to figure that out. You know, Zoom meetings are great. But there is something to be said for actually standing or sitting next to a person and having a chat with them. So, definitely a lack of community. People are feeling really kind of isolated and lonely in their work. I've definitely seen an increase in isolation. So, first feeling lonely, and then that actually turning into not going out at all—so, turning into an actual symptom of depression even. So, that lack of community and then that leading to actually isolating ourselves fully and starting to not see even friends after work, not seeing our family. So, it kind of spirals.

And I've seen it the most in my male clients. So, it is a very interesting time for men. I've seen some people calling it the second pandemic. And they're saying that is the pandemic of male loneliness. Apparently many men got most of their socializing done at work and then they just came home to their families. And so, now many people or many men are not having that connection at work, and it has not been replaced with anything. So, it is—that loneliness piece I think is really critical.

**John Moe:** That's interesting. Because you think of male friendship, there's often a context around the friendships that you have. Like, you know, my wife will sometimes get together with her friends just to sit around and talk, and that's sort of the function of the social occasion. Whereas if I'm getting together with my male friends, it's like going to watch a ball game or going to do—there's an activity, there's a context with it that I think men crave in order to enable the socializing. And I'm speaking in broad generalities, of course. That might not be the case as much with people who identify as women.

And I hadn't thought about that at the context of work—that maybe it's a contextual thing where the socializing needs, you know, not a ballgame, but a staff meeting or, you know, gathering around the water cooler.

**Megan Delp:** Absolutely. Yeah. I think you're right in that, you know, there is—unfortunately, still in our culture, there is this kind of sense around manhood or being a male that you kind of keep those emotions close to your chest; you don't really talk about much. You can't just get together and chat. That's weird, or that's not okay. And there's that judgment still, there's that stigma still.

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And so, that idea that we need to have a reason to get together and now we don't have work—you know, it does—it definitely will limit that sense of community for sure.

**Transition:** Spirited acoustic guitar.

**John Moe:** More with Megan Delp and more of your questions after the break.

**Transition:** Gentle acoustic guitar.

**John Moe:** Back with Megan Delp, NAMI's Director of Workplace Mental Health. And we're talking about how the move to working from home, sometimes in isolation, really is affecting people.

During the height of the pandemic, I remember there was—people would have cocktail hours over Zoom, where people were just alone in their homes having cocktails and looking at a screen.

*(They chuckle.)*

Is that—? I mean, we're not probably going back to as much in person work as there was before the pandemic. There's a lot less of it. You know, people have gone back into offices, but it doesn't look like it's ever going to be the same. Is that kind of onscreen social interaction enough of a substitute for, you know, body-to-body proximity?

**Megan Delp:** I would say it probably gets us kind of most of the way there. *(Laughs.)* I don't think it gets us all the way there. There is something—I mean, I do teletherapy, and I love it. And we, you know—we see the same results with teletherapy as we do with in person therapy. And so, I think so too with over Zoom meetings as in person. Like, you can have great results. I think the bigger issue is actually just leaving your house. What I've seen a lot with my clients is where their home was at first a sanctuary and their safe spot from covid and kind of, you know, buckling down and staying safe inside. It's all of a sudden become this place where they never really leave. They don't really go out. They don't go see people. They don't go to the gym. They don't do their old hobbies outside of the house. And it actually becomes a place that is kind of trapping them inside.

So, I think there is definitely something to be said for getting out of the house, going to a new place, having that novelty of seeing people in real life at a new place, at a unique place. It does not have to be at the office. But having that novel experience, because our brains love new things. (*Chuckles.*) And so, yeah, really allowing us to have some fun in person is just so good for our brains.

**John Moe:** Another question from our listeners. At what point does something go from normal work stress to mental health impacts that warrant leaving a job? What symptoms indicate mental illness is a legitimate reason to leave a job or an industry?

**Megan Delp:** Oh, that's a great question.

**John Moe:** What should someone be looking for?

**Megan Delp:** Yeah, so some amount of work stress is good for us, right? It keeps us moving. It motivates us to get the job done. It motivates us to do a good job for our coworkers, for ourselves. Some amount of stress is good. We know it's getting to a dangerous level when it starts feeling like it's taking up all of our energy. We're ending the day, and we can no longer do anything else with our time, because all of our energy has gone towards work. And that starts happening day after day after day. It's not just a season. You know, for accountants, this is season is very, very busy for them. But they know that after this season, after this intense stress tax season is over, they get some smooth sailing for a while. So, that's okay for them.

If that level of stress were to continue year-round, it would be totally unsustainable. It would eat into normal everyday life. It would, you know, keep us from doing our hobbies. It would really, really impact our ability to function. And that is kind of the turning point of this might be too much. This work environment is not supporting me taking care of myself. It's not able to—or it's not allowing me to live my life how I want to. So, it's kind of where that functionality, that life functioning goes from “I can manage” to “I can no longer manage”. And then also, you know, if you try to advocate for yourself and say, “This is unmanageable; can you help me prioritize? Can we figure out how to delegate?” If the answer is no, that's a big problem.

If the answer is, “Great, let's work together. Let's figure this out,” then definitely give that workplace a chance to try and correct.

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But if the answer is no, then it might not be the best place to be spending your time.

**John Moe:** Yeah. You mentioned the work that you do at NAMI with managers, with people who are in supervisory roles. Is there a big obstacle you need to get past with people in that line of work? Like a way of thinking that needs to be overcome that you run across quite a bit?

**Megan Delp:** I definitely have noticed—I mean, even just talking about mental health at work, people are so worried about saying the wrong thing. They're so worried to even start

the conversation about mental health that they just don't do it. And so, then there isn't that advocating for mental health. There isn't that pushing to say, "Hey, I'm really stressed. This is impacting my workflow." Because they're worried about retaliation. They haven't heard anyone talk about mental health, so they don't know if they can talk about mental health. It's just that like initial hurdle of figuring out how to talk about mental health as an organization that really keeps people from starting at all.

**John Moe:** Yeah. How do you overcome something like that?

**Megan Delp:** So, the NAMI way: education! Training! Yes, yes!

**John Moe:** Education! In our own voice, yes.

**Megan Delp:** Yeah, for sure. It is helping people understand you don't have to be a therapist to talk about mental health. Just like—you know, like your example of the broken leg earlier. You don't have to be a surgeon to ask someone, "Hey, how's your leg feeling? I can see it's broken. You told me it's broken. How are you doing?" So too, you do not have to be a therapist to say, "Hey, you told me you were really stressed the other day. How are you feeling? Is that feeling better? Are you feeling taken care of? Do we need to do some more work around that?" You know, it is the same kind of idea.

We want people to feel like mental health is accessible, there isn't a ton of pressure. You learn together. If you ask a question and someone says, "Hey, I'd prefer you ask it this different way." Great. You learn and you move on. It is not as scary as we think it is, even though it is a sensitive topic, for sure. It is not as scary as we think it is.

**John Moe:** This is an interesting question from one of our listeners. It's something we've talked about already, but it's kind of a new wrinkle in it as well. It says, "I am out about my mental health and neurodivergence at work. I think it could be good for other employees to have people who are open about their challenges, but what things should people be on the lookout for in their organization before disclosing?"

**Megan Delp:** Definitely. So, I love, first and foremost, that you are being an advocate. This person is being an advocate and being that mental health leader that we need in organizations. Because it has to come from somewhere, right? Someone has to be that first person to say, "Hey, this is my lived experience. I have a mental health condition. Here's how I'm dealing with it. I invite everyone else to talk to me." I love that.

Some red flags that you might want to look out for is any changes in behaviors towards you after you disclose that are not kind or not friendly. I've even heard from some people that their manager was talking to them about a possible promotion, and then after they disclosed, that conversation stopped. Things like that, where if you're seeing behavior or conversation around you changing in a way that is making you feel more isolated, or making you feel called out for whatever reason, that is what you would want to look for: if there are those negative changes after you disclose.

**John Moe:** Right, but what do you do before you disclose? How can you spot that before you get into that situation?

**Megan Delp:** I would say if people are already talking about mental health, that's a great sign. If no one's talking about it, that's when you know that it is a little bit of a riskier situation. And unfortunately, in some workplaces, you don't know until you try—which is definitely a risk, right? Like sometimes we just do not know how people are going to respond if we disclose. And so, it is a little bit accepting that risk. You can always start by just dropping smaller hints instead of doing a full disclosure right away. You can start by just taking those smaller steps. So, saying things like, “I've been more stressed recently than I have in a while,” and seeing how that is handled, how that is managed. So, instead of, you know, dropping your diagnosis right away, you could just start with some stressors, some smaller symptoms, and see how people respond in that way.

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Eventually, giving more and more information as you feel comfortable.

**Transition:** Spirited acoustic guitar.

**John Moe:** More from Megan Delp in just a moment.

**Transition:** Gentle acoustic guitar.

**John Moe:** Back with Megan Delp, therapist and Director of Workplace Mental Health for NAMI.

Do you see things getting better in terms of the American workplace and its treatment of mental health issues?

**Megan Delp:** I hope so. (*Laughs.*) I think so.

**John Moe:** That doesn't sound very solid, Meg.

**Megan Delp:** No, I don't—I really, I do think so. I think there are so many people who really want mentally healthy workplaces. I do hear a little bit more frequently now than I did maybe two years ago a little bit of a swing backwards—this idea that bringing mental health into the workplace means we have to coddle our employees or that it's making us soft. And I get out my soap box, and I stand on that soap box, and I say, “No, no, no. If we care about mental health in the workplace, we're actually helping our employees be more resilient and be more productive. Because their brains are literally healthier.” Like, it is the opposite of the concern that I'm hearing more of. And so, that is—yeah, that kind of rhetoric is definitely becoming a little bit more popular, which is concerning. But I do still see this big tide of people who want mentally healthy workplaces. I mean, Gen Z especially; they are a force to be reckoned with.

**John Moe:** Yes, the young people will save us. That's (*inaudible*).



**Megan Delp:** That is my hope.

**John Moe:** That's my hope, yeah. It maybe be a hope, but it's hope at least. Follow up question on, on that one from the same listener. Should people always assume that when push comes to shove, the company will not be on their side? Kind of a negative view, but maybe a realistic one.

**Megan Delp:** Right. Unfortunately, that is the safer option. Employers, they want to mitigate risk above all else. And so, they are always thinking about things from a legal standpoint, protecting themselves. And so, employees have to do the same, right? They need to think first and foremost about protecting themselves and making sure that what they are sharing, what they are asking for is something that—first, that their employer could actually give them, right? There are some accommodations that some workplaces literally cannot provide. And so, that workplace is just not a reasonable place for a certain person to work. You know, there are just certain places that cannot provide certain accommodations.

That being said, employees do have the legal right to have accommodations that work within their workplace. And that could be anything from, you know, having a distraction-free environment if a person has ADHD, all the way to having breaks, having noise canceling headphones. Like, there are so many options that an employer can work with their employee to help them feel safe at work. But again, it is still a risk to ask for it. Even if it is legally protected, it is still a risk.

**John Moe:** Yeah. What I'm hearing is it doesn't seem like there is a foolproof way to be out and open about your mental health and guarantee your job security in the workplace today.

**Megan Delp:** Unfortunately, that is probably the takeaway. You know, we want to be moving in this direction where we can advocate for ourselves, where we can be a leader in the mental health space, where we can share and be open. And in the workplace, it is just a little bit trickier. And so, it really—it changes so much workplace to workplace. Some workplaces are amazing, right? They really welcome you sharing about your disability or your mental health condition. They want to work with you. And they'll, you know, do whatever it takes to help you be a productive employee. And then there are other workplaces who are the exact opposite, and then everyone in between. So, it really is important to first protect ourselves.

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**John Moe:** Yeah. And it seems like too, you know, if you didn't get the promotion, because there was a mental health issue that was known, and thus the promotion was no longer being discussed with you—as we talked about earlier—it's kind of unprovable. You're kind of stuck.

**Megan Delp:** Yeah, you know, it is a very tricky thing. Because that is discrimination, right? Like that is—

**John Moe:** Yeah! It's discrimination. That's the definition.

**Megan Delp:** Right, it is illegal. And like you said, it is very difficult to prove it. Now, should you go ahead and try to prove it? Yes, for sure. If you want to take that route, definitely stand up for yourself. Definitely look into that. That comes with its own risks, of course. That comes with its own consequences. But you know, as we are all learning how to advocate for our mental health in the workplace, we might need to be a little bit more pushy, a little bit more up front about what our rights as employees are. Because if no one stands up against the employer, then we're not going to make any movement.

**John Moe:** Yeah. It's a matter of figuring out how to fight this war without dying on the hill, you know. (*Chuckles.*) Like, without sacrificing yourself in the process. I mean, it's—would you say it's worth it to be a crusader, to be someone who tries to bring about change? Or is it better just to keep your head down and stay in your cubicle about this kind of thing?

**Megan Delp:** Ooh, that is a fun question!

(*They laugh.*)

I would say it depends on what kind of life you want for yourself. There is nothing wrong with wanting to live a quiet life, to not be someone who like pushes, pushes, pushes. It is okay to say, "I have a mental health condition. It is mine to manage. I'm going to sit at home and read my book." And that's okay. And then it's also okay if you want to be, you know, standing on my soapbox with me, asking for change, demanding change, standing out at work, asking for accommodations, like doing all these different things. It is okay one way or the other. And then again, everything in between. It is just figuring out how you want your life to look based around your mental health condition. It is figuring out how you want to live your life and how much advocacy fits into that lifestyle that you want for yourself.

**John Moe:** Obviously, there's a million different mental health conditions a person can have and nuances and variations even within those, so I don't want to generalize too much. But if a person with a mental health condition is maybe a little more delicate, a little more vulnerable than the person without, how can you take care of yourself at work? Given the egos at work, given the hierarchies, given the—you know, if there's some amount of mistrust, or you know, it could be a political place. How do you take care of yourself?

**Megan Delp:** I would say starting outside work first. So, making sure you have that great support system—whether that's a professional, like a therapist, or your own friend group who really knows you, who can support you, who can be there for you, cheerlead you. Like, really making sure everything outside of work is supporting you as wonderfully as possible. So, are you taking care of your physical health? Are you eating well, drinking water, getting enough sleep, really doing the things that support your mental health outside of work? That is where I always tell people to start. And then figuring out how to exist within a workplace ecosystem—I mean, that can change day to day these days. Like, there are layoffs happening, there's stress, there's financial stuff. Like, there's so much change. So, if we're taking care of ourselves outside of work, first and foremost, we are much more able to adjust and be flexible no matter what our mental health condition is—whether we have one or not. We are much more able to be flexible if we are taking care of ourselves and if we have that community.

And then within the workplace ecosystem, it is figuring out how to structure your day that works for you. So, for example, I have ADHD. And I know if I don't literally schedule every half hour of my day, I won't do anything. Don't tell my supervisor. Nothing (*inaudible*) them. (*Laughs.*) And so, I have to set out blocks to write my emails. I have to, you know, say I'm working on a presentation from 1 to 1:30, or it won't happen.

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And so, figuring out how to work with your own mental health so that you feel like you are the one in control of how you're going through your day. You're the one in control of how you are navigating things. You are even blocking off time so people can't schedule meetings with you if that's what you need. But really trying your best to figure out how to structure your work life so it is supporting your mental health the best.

**John Moe:** It's so often the case that, with one's mental health—again, being broad in general about it—but I always tell people it's often just a matter of budgeting out extra time for to consciously figure out how to deal with the issue that you're dealing with. You know, in a way that other people can just show up to work and start working, maybe you—if you have something going on—need to have a little extra time just to do that planning. You can do the same job. You could do just as good of a job as anybody else, but it just requires a little more executive functioning.

**Megan Delp:** Oh, absolutely. I know for myself, if I—I know a ton of my friends just kind of roll out of bed and start working.

**John Moe:** Must be nice.

**Megan Delp:** I know! (*Laughs.*) If I don't have a solid two hours before I start my workday, I am discombobulated. I need time to gradually get ready, have some good breakfast, stand out on my deck with my dogs. Like, I really—I know myself. I need time to wake up and kind of get myself moving. And it just—it makes such a difference for me. So, yeah, it is really figuring out how to work with your specific brain.

**John Moe:** What about depression individually? Like, if you—when you're working with clients or with patients who deal with depression and are struggling in the workplace, what do you bring up to them?

**Megan Delp:** For my clients with depression, it is honestly really difficult. Because depression tells you, “You are tired. You can't do things.” You know, it's all of those negative voices swirling in your head all day long. And so, in the workplace, those can be really exacerbated. Because we're—we do get feedback sometimes that is negative or even feedback that's like, “Hey, could you just update this slide for me?” If a person is depressed, that depression voice in their head might take that small comment and spiral it so big. So, it's really—for my clients who are experiencing really intense depression, it is a lot of catching those thoughts. It is a lot of noticing: am I spiraling? Am I staying grounded? Am I really kind of noticing throughout my day where my brain is going, where my thoughts are going? Am I taking time for some mindfulness? Whatever your mindfulness is, it is important—whether that's going outside, if it's mindfully eating your lunch, something that takes you out

of work, reconnects with your body so that you really can be present with yourself and recognize your needs. Which then supports really being kind of present with your own brain and noticing those depression thoughts.

Again, I will say a lot of the depression management will come outside of work, where you are building that community, you're seeking treatment if you need it. Which if you have depression, yes. But it is definitely getting those fundamentals in place outside of work that are going to support you. And also, recognizing there might be a time where you need time off from work to really manage depression, to maybe do a more intensive program where you are doing group therapy, art therapy, whatever it is. It is okay to recognize that at some point you might need time off to really heal from depression.

**John Moe:** It almost sounds too like—whatever the condition is, whether it's depression, anxiety disorders, ADHD, OCD—it's almost like it's a second job. Like, you've got— (*chuckling*) it's almost like a side hustle that doesn't pay, where you have to put in a little extra work than other people do. And maybe treat that as work. Maybe treat that as like, “Here are the duties I have to perform as part of having this condition to understand what's going on and make a plan.”

**Megan Delp:** Yes, it's funny you mentioned that. I actually just told a client earlier this week, “You are your first job. You are going to take the most energy. You're going to take the most of the resources that you have. You need to be your own first job.” So, are you putting in the energy to take care of yourself the best first? (*Laughs.*) Your actual job needs to come second, because if we are not well, our job will not be done well. We are going to struggle!

[00:40:00]

We're going to not be our best selves at work. And so, if our energy isn't going towards ourselves first, our work is definitely going to struggle.

**John Moe:** See, this is why you're a therapist and not me, because I characterized it as a side hustle. And you characterize it as the primary important job.

(*Megan laughs.*)

Maybe your job at the office or the restaurant, think of that as the side hustle in addition to your other work.

**Megan Delp:** Yeah, I like that visual much better.

**John Moe:** Yeah, I think that works better. Megan Delp is the Director of Workplace Mental Health for NAMI, the National Alliance on Mental Illness. Megan, thanks.

**Megan Delp:** Thank you so much. It's been a delight.

**Music:** “Building Wings” by Rhett Miller, an up-tempo acoustic guitar song. The music continues quietly under the dialogue.

**John Moe:** I want to thank Megan Delp for being with me. I'll be honest, parts of this turned out a little less optimistic than I was hoping for. No fault of Megan's! She was great. But I guess I was just hoping that there was a way of navigating the typical workplace—if there is such a thing as a typical workplace—so that things like discrimination and stigma and the choppy waters of office politics could be avoided 100%. Failsafe. But there might not be a way to do that. Maybe I was wearing rose-colored glasses. I don't know. Maybe I thought that because of the privilege that I always have available to me as a straight, White man. And I need to be aware of that at all times. It could be that that privilege makes me think that unfair situations can be made fair if you just have a plan. And that is very often not the case.

I do think there is some hope, though, in the point Megan made about taking care of yourself, making yourself the number one job you have. Mind you, it sucks that a job such as that offers neither salary nor benefits—though the job security can't be beat. And I suppose you could apply a little bit of the serenity prayer to this situation as well, when it comes to the workplace and mental health. Accept the things you cannot change, change the things you can, know the difference. Good luck out there.

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Hi, credits listeners. Last week, we had Lindy West on the show, and she talked about life with two spouses and how there's twice the chance that someone else will do the dishes compared to life with one spouse. That led Jason Novak over on Twitter to say, “I'd love to be optimistic with her, but that just sounds like a recipe for twice as many unwashed dishes.” Fair point, Jason! *Depresh Mode* is made possible by your contributions. Our production team includes Raghu Manavalan, Kevin Ferguson, and me. We get booking help from Mara Davis, Rhett Miller wrote and performed our theme song, “Building Wings”.

*Depresh Mode* is a production of Maximum Fun and Poputchik. I'm John Moe. Bye now.

**Music:** “Building Wings” by Rhett Miller.

*I'm always falling off of cliffs, now  
Building wings on the way down  
I am figuring things out  
Building wings, building wings, building wings*

*No one knows the reason  
Maybe there's no reason  
I just keep believing  
No one knows the answer  
Maybe there's no answer  
I just keep on dancing*

**Caitlin:** Hi, this is Caitlin from Boston, Mass. And I just wanted to say that you are valid the way you are, and I see you.

**Transition:** Cheerful ukulele chord.

**Speaker 1:** Maximum Fun.

**Speaker 2:** A worker-owned network.

**Speaker 3:** Of artist owned shows.

**Speaker 4:** Supported—

**Speaker 5:** —directly—

**Speaker 6:** —by you!

[00:45:00]