



FLEUR HEAZLEWOOD, SOURCE: SUPPLIED

Worried if an employee is struggling? Watch out for these wellbeing alarm bells

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WELLBEING
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Often a smiling face on the outside masks a myriad of experiences, wounds, stories and suffering on the inside that we don't know anything about. Fear – especially fear of stigma – means that people are likely to mask or hide how they are really feeling, especially at work.

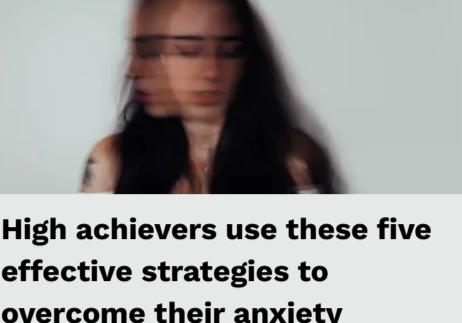
There is no one way that mental health manifests. Every person is unique in how they present themselves. So, what we are looking out for are changes to what is 'normal' for that person. When we use the term 'normal' in a wellbeing context, what we are talking about is how that individual usually shows up, reacts, interacts and behaves.

So, if someone who is usually chatty and social when they are in the office starts avoiding coffee and lunch catch-ups with colleagues, that signifies a change to how they would normally interact. But if another colleague prefers to take their breaks on their own to read or listen to a podcast and chooses not to socialise with their colleagues at lunch, then doing this wouldn't be considered a change to their preferences and how they would usually interact.

How do I tell the difference between everyday stress and distress?

It is natural to experience ups and downs and periods of stress.

For example, someone may shift down their mental health continuum for a couple of weeks because they feel really stressed out when moving house or starting a new job. This stress is not a sign of clinical anxiety but a one-off, reasonable reaction to a high-pressure situation that they are facing. Usually, the stress will resolve itself when the situation has been resolved, and they will recalibrate towards wellbeing.



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A situation becomes a mental health problem when a person's feelings are of such high intensity and long duration that they start to impact the person's ability to function in everyday life and perform their normal activities.

Jordan had been working in the team for three years. He had always been a solid performer at work, and his colleagues valued him for his reliability and attention to detail. Over the last few months, he had been struggling with his mental health.

Jordan was finding it increasingly difficult to control his emotions. He would often get angry and irritable with his colleagues and would snap at them for no apparent reason. On other days, he could be overly emotional and find himself close to tears at the slightest provocation. Some afternoons he needed to leave work early because of headaches and brain fog.

Jordan was also struggling to meet deadlines and making mistakes that he wouldn't usually make. His colleagues noticed that he was becoming increasingly disorganised and forgetful, and his work was suffering as a result.

As leaders, we are not trained to diagnose, but we have three areas where we can look for changes to help us to identify when someone may be experiencing more than everyday stress:

- 1 Changes in emotional intensity
- 2 Duration of the changes
- 3 Adverse impact on functioning.

Changes in emotional intensity

Changes in emotional intensity may be high or elevated, or low or underreacting.

High intensity might look like an overreaction in relation to what would be someone's usual response to a situation. We might see tears, anger, snapping, aggressiveness or defensiveness in response to something that wouldn't usually provoke much of a reaction.

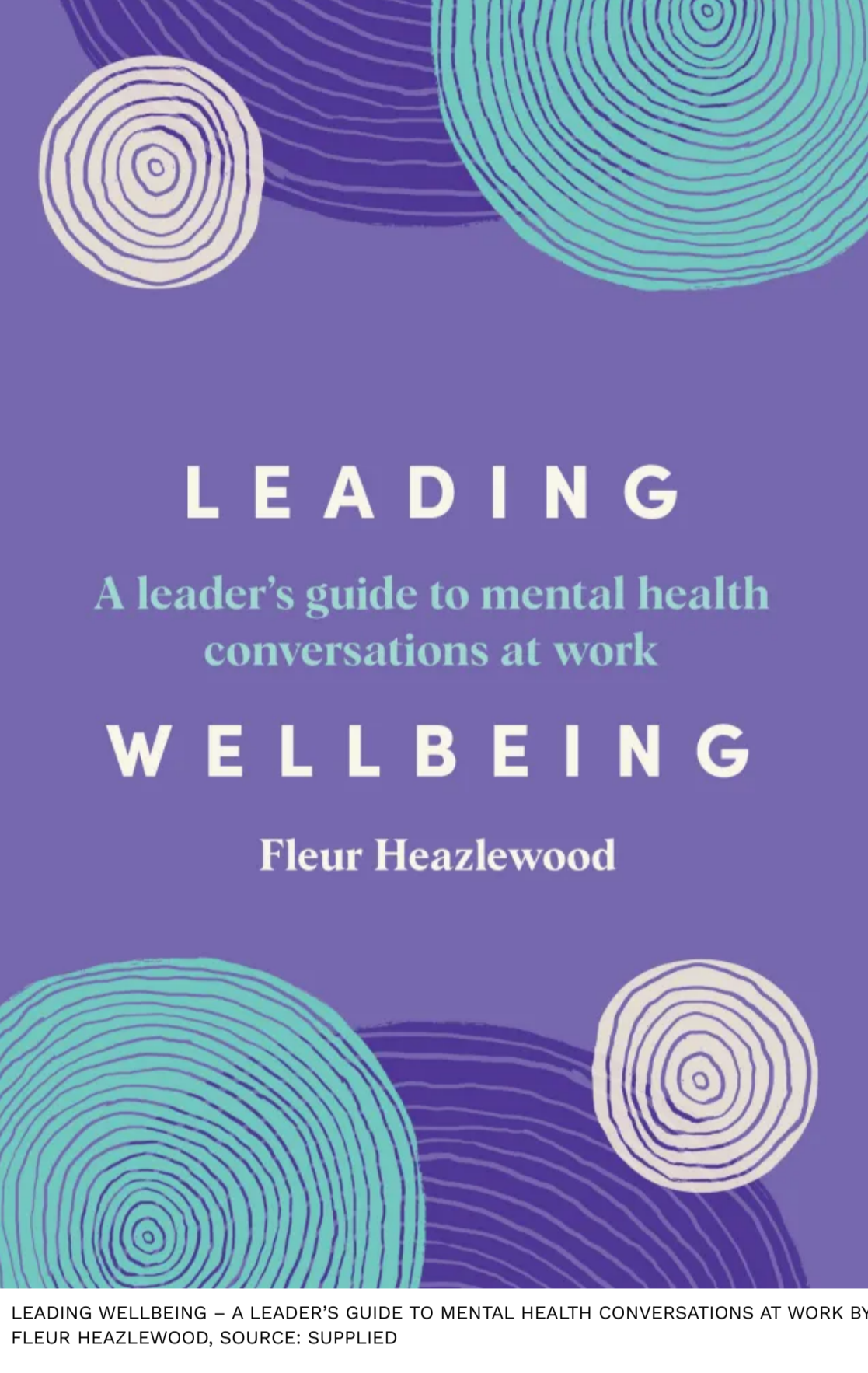
At the other end of the scale, we may notice an underreaction to someone's usual response to a situation. We might notice apathy, withdrawal, an absence or uncharacteristic agreeableness in response to an issue or situation that a person would usually care about and invest time and energy in.

Duration of the changes

A person's change in reactions or behaviours needs to last longer than an off day, or a stressful week, or a few weeks of struggling with bad news, or a few months of working their way through a natural process of grief. There needs to be longevity to the change, where the changes we notice become a new pattern of behaviour for the person.

Adverse impact on functioning

We also start to see a deterioration in a person's ability to function in everyday life and perform their normal activities.



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A drop in in everyday functioning might look like reduced participation in regular hobbies or sporting activities that they would usually participate in outside of work – things like missing book club catch-ups, not turning up for soccer games and then dropping out of the team, not taking the dog for a regular morning walk, missing social events or declining social engagements you know they would usually enjoy.

A deterioration in performance might look like a loss of productivity. Tasks take them longer than they usually would. They may be slower in processing information or making decisions. They may struggle to remember information and lack their usual confidence in completing tasks. Or we might see a reduced quality of work from them – work that is incomplete, less detailed or containing more errors than usual.

The signs are obvious when you look for them

There are a myriad of observable signs that help us recognise when someone isn't travelling well, as well as a number of small signs that indicate poor wellbeing. One way you can start to identify potential mental health challenges in other people is by being aware of how stress and poor mental health shows up in yourself.

The signs for poor mental health can be physical, emotional, behavioural or relating to productivity. Physical signs may include the following:

- 1 **Personal hygiene changes**
Dishevelled appearance or more attention to appearance
- 2 **Physical complaints**
Headaches, aches and pains, gastrointestinal problems
- 3 **Cognitive changes**
Difficulty concentrating, focusing or with memory
- 4 **Differences in sleep patterns**
Not being able to sleep or sleeping all the time
- 5 **Changes in weight**
Losing weight or putting on weight
- 6 **Movement changes**
Moving more slowly or more rapidly
- 7 **Greater substance use**
Tobacco, alcohol or drugs.

Sometimes the physical signs may be what we notice first. Particularly when people have experienced long periods of stress or are tired, exhausted or burning out, we may notice an increased susceptibility to colds or illness before we think to check in on their mental health.

Emotional signs may include the following:

- 1 **Emotional distress**
Crying, complaining
- 2 **Emotional extremes**
Excessive fear, rumination or worry
- 3 **Withdrawal**
Apathy, isolating from others, reduced participation
- 4 **Negativity**
Excessive criticism, complaining, sarcasm
- 5 **Conflict**
Unusual troubles with colleagues.

Behavioural signs and productivity changes may include:

- 1 Erratic behaviour
- 2 Attendance changes, such as more frequent absenteeism, increased lateness or earlier leaving
- 3 Reduced productivity – less work produced, work tasks taking longer or problems with timeliness of delivery
- 4 Reduction in performance – deteriorating quality of work, errors in work or accidents
- 5 Reduced engagement and effort
- 6 Loss of confidence
- 7 Indecisiveness
- 8 Difficulty with information retention, prioritisation or time management
- 9 Reduced participation in work activities.

Leaders who identify these warning signs will be in a better position to provide support to people who may be struggling or in distress.

We don't need to know why someone is showing signs. The same signs may appear if a person is experiencing anxiety, having marital difficulties or struggling with caring responsibilities. We just need to recognise when an individual is experiencing some kind of struggle or crisis and check in based on the observed behaviours rather than trying to speculate, hypothesise or attempt to find out a cause.

We don't need to know what is going on with someone to recognise when they could benefit from a check-in and support.

This article is an extract from the book Leading Wellbeing – A leader's guide to mental health conversations at work by Fleur Heazlewood, founder of the Blueberry Institute.

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