The Germanwings Flight 5925 crash into the French Alps on March 24, 2015 stirred up a lot of needed conversations about how employers assess the mental health of employees. The crash was alleged to have been an intentional murder/suicide by pilot Andreas Lubitz.

It was reported that Lubitz had a history of depression and was actively seeking mental health treatment, but that information was not disclosed to his employers.

Questions that began to surface as a result of this tragedy that killed 144 passengers and six crew members were related to how we assess mental illness, how employers should respond to reported mental illness, and, most importantly, what procedures need to be put in place to prevent these acts in the future. I'm not in human resources and I don't claim to have all the answers to this global issue, but as a Licensed Mental Health Counselor, I believe I have some important insight to share on this topic.
I specialize in working with professional women. The majority of my patients are highly intelligent leaders in our community who have found the strength and courage to reach out for support in coping with different levels of depression and anxiety. Let me share some of what I have learned from my "backstage pass" into their experience.

- Depression and anxiety (or any mental health issues, for that matter) do not discriminate among culture, religion, sex or socioeconomic status. It can be caused by nature, (lack of) nurture or the combination of the two. Often it catches people off guard and they are confused, scared and frustrated with their mental and emotional challenges.

- Victims of depression and anxiety face judgment by those who do not understand their state of mind. This causes them to keep their pain to themselves. They can hide the symptoms from those around them surprisingly well. The result is that people who are experiencing depression and anxiety may appear to be OK on the outside, but feel alone, isolated and suffer silently.

- When people feel alone and isolated with emotional pain day in and day out, they feel hopeless. Suicidal thoughts are NOT uncommon when people are hurting and they don't know how to stop the pain. Ultimately, they do not necessarily want to die, they just want the pain to stop.

I frequently have patients that seek my private paid services rather than utilizing their insurance for fear of consequences if their employer should discover they were receiving counseling. Some of them are in need of medication, which can add another layer of fear to the risk of confidentiality. I had a patient ask me last week if they should admit their history of depression on a job application for fear that the disclosure would eliminate her from the pool of applicants.

I am required by law and will always report a patient that I determine is a danger to themselves or others. My advice to the patient completing her application was that if she were eliminated for admitting a history of depression with appropriate treatment, it would be a good indication of an unhealthy place to work.

What I want business owners of all levels to understand is that we can play an important role in eliminating the stigma surrounding mental health. It takes more than an EAP plan to address the issue.

It is crucial that we create an environment at work that allows employees to be open about their human challenges and support appropriate treatment. I believe initiating discussions about depression and anxiety, normalizing the symptoms in the same way we do with other medical conditions, and assuring employees they will not be penalized or judged for seeking treatment are actions/steps that can be taken to maintain a healthy workplace. Mental health is not a topic to fear, but rather a topic to educate the population about, build empathy for those who suffer and work toward change.
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