National Survey on Drug Use and Health

# The NSDUH Report

October 11, 2007

# Depression among Adults Employed Full-Time, by Occupational Category

epression can seriously impact a person's ability to perform routine activities at work. It negatively affects U.S. industry through lost productivity, employee absenteeism, and low morale.<sup>1,2</sup> U.S. companies lose an

# In Brief

- Combined data from 2004 to 2006 indicate that an annual average of 7.0 percent of full-time workers aged 18 to 64 experienced a major depressive episode (MDE) in the past year
- The highest rates of past year MDE among full-time workers aged 18 to 64 were found in the personal care and service occupations (10.8 percent) and the food preparation and serving related occupations (10.3 percent)
- The highest rates of past year MDE among female full-time workers aged 18 to 64 were found in the food preparation and serving related occupations (14.8 percent), and the highest rates among male full-time workers aged 18 to 64 were found in the arts, design, entertainment, sports, and media occupations (6.7 percent)

estimated \$30 to \$44 billion dollars per year<sup>3,4</sup> because of employee depression. Research shows that the rate of depression varies by occupation and industry.

The National Survey on Drug Use and Health (NSDUH) includes questions for adults aged 18 or older to assess lifetime and past year major depressive episode (MDE).<sup>5</sup> In NSDUH, MDE is defined using the diagnostic criteria set forth in the 4th edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM-IV),<sup>6</sup> which specifies a period of 2 weeks or longer during which there is either depressed mood or loss of interest or pleasure and at least four other symptoms that reflect a change in functioning, including problems with sleep, eating, energy, concentration, and self-image. NSDUH also asks respondents about their current employment situation and the type of occupation and industry in which they work. NSDUH defines full-time employed respondents as those who usually work 35 or more hours per week and who worked in the past week or had a job despite not working in the past week.

This issue of *The NSDUH Report* uses data from the combined 2004 to 2006 surveys to present estimates of past year MDE among full-time workers aged 18 to 64 by occupational category.

# MDE, by Employment Status

Combined data from 2004 to 2006 indicate that the prevalence of past year MDE among adults aged 18 to 64 was higher among the unemployed and those of "Other" employment status than among persons employed part time or full time (Table 1). Among adults aged 18 to 64, an estimated 12.7 percent of those who were unemployed and 12.7 percent of those in the "Other" group experienced an MDE in the past year compared with 9.3 percent of those employed part time and 7.0 percent of those employed full time.

Reflecting the fact that over half of the adult population (64.3 percent) were employed full time, a majority of those who experienced an MDE in the past year also were employed full time. From 2004 to 2006, over half of all persons aged 18 to 64 who experienced a past year MDE (52.4 percent) were employed full time.

# **MDE, by Occupational Category**

Among the 21 major occupational categories, the highest rates of past year MDE among full-time workers aged 18 to 64 were found in the personal care and service occupations (10.8 percent) and the food preparation and serving related occupations (10.3 percent) (Figure 1). The occupational categories with the lowest rates of past year MDE were engineering, architecture, and surveying (4.3 percent); life, physical, and social science (4.4 percent); and installation, maintenance, and repair (4.4 percent).

# MDE, by Demographic Characteristics and Occupational Category

Among full-time workers aged 18 to 64, females were more likely than males to have a past year MDE (10.1 vs. 4.7 percent). The highest rates of past year MDE among female full-time workers aged 18 to 64 were found in the food preparation and serving related occupations (14.8 percent) and community and social service occupations (13.3 percent) (Table 2). The highest rates of past year MDE among male full-time workers aged 18 to 64 were found in the arts, design, entertainment, sports, and media occupations (6.7 percent). The lowest rates of past year MDE among both males and females were found in life, physical, and social science occupations (2.3 percent for males and 7.2 percent for females).

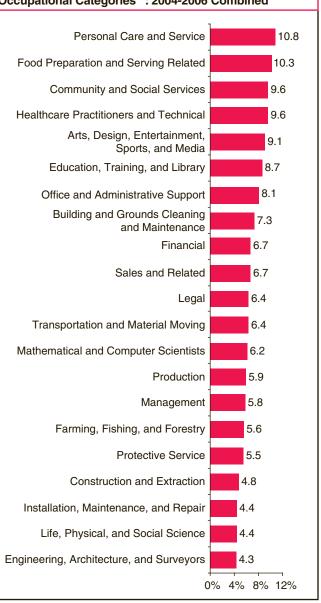
Full-time workers aged 18 to 25 were more likely to have a past year MDE than full-time workers in all other age groups (8.9 percent for those aged 18 to 25; 7.6 percent for those aged 26 to 34; 7.2 for those aged 35 to 49; and 5.1 percent for those aged 50 to 64). Among full-time workers aged 18 to 25, the highest rates of past year MDE were found in the health care practitioners and technical occupations (11.9 percent) and the lowest in the life, physical, and social science occupations (4.3 percent).

Table 1. Past Year Major Depressive Episode (MDE) among Persons Aged 18 to 64, by Employment Status: 2004-2006 Combined

Employment Status	Percent	Number in Thousands
Total	8.6	15,531
Full-Time	7.0	8,143
Part-Time	9.3	2,277
Unemployed	12.7	911
Other*	12.7	4,200

Source: SAMHSA, 2004, 2005, and 2006 NSDUHs.

Figure 1. Past Year Major Depressive Episode (MDE) among Full-Time Workers Aged 18 to 64, by Occupational Categories\*\*: 2004-2006 Combined



Source: SAMHSA, 2004, 2005, and 2006 NSDUHs.

Table 2. Past Year Major Depressive Episode (MDE) among Full-time Workers Aged 18 to 64, by Demographic Characteristics and Occupational Categories\*\*: 2004-2006 Combined

	Ge	nder	Age Group			
Occupational Category	Male	Female	18 to 25	26 to 34	35 to 49	50 to 64
Personal Care and Service	***	10.3	9.8	10.5	12.2	9.7
Food Preparation and Serving Related	5.4	14.8	11.5	9.0	11.9	5.6
Community and Social Services	4.4	13.3	10.3	15.6	7.4	8.3
Healthcare Practitioners and Technical	6.0	10.7	11.9	9.3	11.3	6.3
Arts, Design, Entertainment, Sports, and Media	6.7	12.5	7.5	13.5	7.2	8.0
Education, Training, and Library	6.3	9.6	8.8	8.4	11.7	5.4
Office and Administrative Support	5.2	9.3	10.9	8.9	8.2	5.9
Building and Grounds Cleaning and Maintenance	4.5	11.8	7.2	5.0	9.7	5.3
Financial	5.5	7.9	8.7	7.9	3.8	9.8
Sales and Related	4.2	10.0	10.1	9.1	5.9	3.6
Legal	4.6	8.2	***	6.0	6.3	***
Transportation and Material Moving	5.8	10.6	8.1	6.7	5.4	6.7
Mathematical and Computer Scientists	4.6	10.4	8.2	7.7	6.7	***
Production	4.9	8.5	7.3	7.4	6.0	3.7
Management	3.3	9.5	10.2	7.4	5.4	4.8
Farming, Fishing, and Forestry	5.4	***	11.0	***	2.6	***
Protective Service	3.5	***	5.7	2.1	6.5	***
Construction and Extraction	4.5	***	4.5	4.7	5.3	4.0
Installation, Maintenance, and Repair	4.3	***	5.1	3.8	6.3	***
Life, Physical, and Social Science	2.3	7.2	4.3	4.9	6.1	***
Engineering, Architecture, and Surveyors	3.3	11.1	6.9	2.5	4.5	4.6

Source: SAMHSA, 2004, 2005, and 2006 NSDUHs.

### **End Notes**

- <sup>1</sup> Druss, B. G., Rosenheck, R. A., & Sledge, W. H. (2000). Health and disability costs of depressive illness in a major U.S. corporation. *American Journal of Psychiatry* 157,1274-1278.
- <sup>2</sup> Kessler, R. C., Greenberg, P. E., Mickelson, K. D., Meneades, L. M., & Wang, P. S. (2001). The effects of chronic medical conditions on work loss and work cutback. *Journal of Occupational and Environmental Medicine*, 43, 218-225.
- <sup>3</sup> Elinson, L., Houck, P., Marcus, S. C., & Pincus, H. A. (2004). Depression and the ability to work. *Psychiatric Services*, *55*, 29-34.
- Stewart, W. F., Ricci, J. A., Chee, E., Hahn, S. R., & Morganstein, D. (2003). Cost of lost productive work time among U.S. workers with depression. *The Journal of the American Medical Association*, 289, 3135-3144.
- <sup>5</sup> A split-sample design was implemented for adults in 2004. Adult respondents in sample A

- received the full module of mental health questions as administered in prior years of the survey (including the K6 scale), but did not receive the new depression module. Adult respondents in sample B received the new depression module, but only received the K6 questions from the previous mental health module. Separate analysis weights were constructed for each subsample. In 2005 and 2006, all adults were administered the depression module.
- <sup>6</sup> American Psychiatric Association. (1994). *Diagnostic and statistical manual of mental disorders* (4th ed.). Washington, DC: Author.
- <sup>7</sup> In assessing MDE, no exclusions were made for MDE caused by medical illness, bereavement, or substance use disorders.

## **Table and Figure Notes**

\* Retired persons, disabled persons, homemakers, students, or other persons not in the labor force are included in the "Other" employment category.

- \*\* Respondents with unknown MDE status or Occupation Classification are excluded from the analysis. Occupations were coded using the 2000 Standard Occupational Classification released by the U.S. Department of Labor, Bureau of Statistics (2000), which categorizes all occupations into 21 major groups. Within these major groups are 96 minor groups, 449 broad occupations, and 821 detailed occupations. Occupations with similar skills or work activities are grouped at each of the four levels of hierarchy to facilitate comparisons.
- \*\*\*Data suppressed because of low precision.

# **Suggested Citation**

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Research findings from the SAMHSA 2004, 2005, and 2006 National Surveys on Drug Use and Health (NSDUHs)

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The National Survey on Drug Use and Health (NSDUH) is an annual survey sponsored by the Substance Abuse and Mental Health Services Administration (SAMHSA). The 2004, 2005, and 2006 data used in this report are based on information obtained from a total of 107,209 persons aged 18 to 64. The survey collects data by administering questionnaires to a representative sample of the population through face-to-face interviews at their place of residence.

The NSDUH Report is prepared by the Office of Applied Studies (OAS), SAMHSA, and by RTI International in Research Triangle Park, North Carolina. (RTI International is a trade name of Research Triangle Institute.)

Information on NSDUH used in compiling data for this issue is available in the following publications:

Office of Applied Studies. (2007). Results from the 2006 National Survey on Drug Use and Health: National findings (DHHS Publication No. SMA 07-4293, NSDUH Series H-32). Rockville, MD: Substance Abuse and Mental Health Services Administration.

Office of Applied Studies. (2006). Results from the 2005 National Survey on Drug Use and Health: National findings (DHHS Publication No. SMA 06-4194, NSDUH Series H-30). Rockville, MD: Substance Abuse and Mental Health Services Administration.

Office of Applied Studies. (2005). Results from the 2004 National Survey on Drug Use and Health: National findings (DHHS Publication No. SMA 05-4062, NSDUH Series H-28). Rockville, MD: Substance Abuse and Mental Health Services Administration.

Also available online: http://www.oas.samhsa.gov.

Because of improvements and modifications to the 2002 NSDUH, estimates from the 2002, 2003, 2004, 2005, and 2006 surveys should not be compared with estimates from the 2001 or earlier versions of the survey to examine changes over time.



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