Robin Williams’ Death Should Be a Wake-up Call About Depression

As employers, perhaps it’s time to inform employees about mental illness and depression and let them know what their options are.

As Rita Pyrillis reports in our upcoming September feature story about depression in the workforce, people who are depressed often don’t seek help and those people who know people who are depressed often don’t address it because they don’t know how to address it.

The disease, she reports, costs employers $80 billion a year in lost productivity. In other words, it’s a big deal. But life is worth much more than dollars, of course.

The news that Robin Williams, 63, was found dead on Aug. 11 of an apparent suicide accentuates that point, as the world has lost one of its most talented comedians.

In my personal list of “dream” interviews, Williams was always near the top, not because I knew everything about the man and his career, not because I was his biggest fan, but because I was in awe of his delivery and what he could do. The “legalized insanity,” as he put it. How on earth could someone riff and ad lib about just about anything and get laughs doing it? He was also, from what I’ve read, pretty open in his interviews and, of course, his manic style might have taken the interview in any number of directions. I’m also sure he would have made me laugh.
Before I left the house this morning, I opened up the closet in my office, which is filled with too many artifacts from my past, including dozens of copies of the magazine I edited, wrote and distributed in the mid-'90s, Classic Comedian.

I knew I hadn’t written a feature about Williams for the publication, but I seemed to remember his name had come up. Sure enough, in the first issue I opened, I found this in my “Letter From the Editor” section: “The best comedians are the ones who learn to adapt — like Robin Williams. He can keep an audiences’ attention because of his spontaneity. To be spontaneous is not an easy task. In other words, the pressure builds on a comedian and that comedian’s psyche. Obviously there are pressures in the music field, too. See Kurt Cobain and others.”

The same holds true for most professions.

Was I suggesting at the time I wrote the editor’s letter that Williams’ fate was somehow predetermined? No. I neither had a crystal ball, nor would I ever believe that someone’s fate is sealed. My intention in the article was simply to talk about the pressures comedians are under, the “Tears of a Clown” if you will.

In the following issue, I did a feature story following the death of another comedian, Chris Farley, who died of a drug overdose. Farley, of course, idolized John Belushi who also died of a drug overdose, and to take this full-circle, Williams cited Belushi’s death as a wake-up call about confronting his own addiction to cocaine in the late ’70s and early ’80s. The two comic powerhouses were friends.

When a tragedy like this occurs, you’ll hear people say things like, “Why? He had everything going for him. He had all the money and fame you could ever ask for. Everything in the world.” I don’t agree with this train of thought. People who commit suicide or die from an overdose don’t have everything. There is something missing, something that might not be apparent to anyone in the world but that person.

For many depressed people, there is a feeling of isolation, that they’re in it alone. The suicide prevention phone number is one place to turn to change that (800-273-8255). As employers, perhaps it’s time to inform employees about mental illness and depression and let them know what their options are, something DuPont is doing with its I.C.U. campaign, as Pyrillis reports.

And according to authors Donna LaMar and Betsy Laney, employers should learn and educate themselves about depression, set up resources for workers, talk to staff without diagnosing them, create good working conditions and be prepared to act quickly. But, most of all, employers should be proactive.

Williams lived in a world that many people can relate to, where stereotypes about mental illness exist, where it’s perceived as weak if you seek help. But it doesn’t have to be this way.