



He switched on the light – then fell into darkness

To cap a long, high-powered career, Bill Wilkerson led a campaign to transform the way corporate Canada saw mental illness in the workplace. Then as he reveals here for the first time the professional crisis manager unexpectedly slipped into crisis himself.

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Bill Wilkerson woke up early in his Halifax hotel room one Tuesday morning last August. A busy day loomed as usual – at 8 a.m., he was supposed to deliver a one-hour keynote address to more than 1,000 people. He was well-rehearsed. There was just one snag: He wasn't sure he could get out of bed.

"There was a fuzziness behind my eyes. My arms felt limp." He felt heavy and frightened for no apparent reason. The man who for a decade had been giving speeches around the world and lobbying for political action as one of Canada's top mental-health experts was now, himself, battling depression.

Desperate to fight the feeling, he did sit-ups, spoke out loud just to hear his own voice, shadow-boxed and swung an imaginary baseball bat – "anything to get to a point where I could get back to a physical presence," he recalls. "Because if I stepped in front of the mirror, I wasn't sure if I would see anybody."

Ultimately he made it to the conference. He spoke. He urged businesses to make mental health a priority.

He joked (giving a Top 10 list of "management practices now driving us crazy"). And the crowd gave him a standing ovation.

When Mr. Wilkerson gathered together a host of prominent Canadians 10 years ago to address the social and economic effects of mental illness, he wasn't motivated by personal problems.

But along the way, as head of the Global Business and Economic Roundtable on Addiction and Mental Health – whether because of his own makeup, stress, frustration or some mix of causes – his own mental and emotional state began to fray. Tensions grew between his public and private personae.



"There's such a surrealism to it," he says now, sitting in the sun-drenched dining room of his century home in Port Hope, Ont. "It's like ... there is Bill, this person, and there is Bill, the other person" – the effusive, approachable Bill who was at home in any social situation and the inner, angry Bill who saw health-care bureaucracies and indifferent employers cause so much misery for people in need of help. "I had to leave that Bill behind."

Today, he is also leaving the Roundtable, winding the organization down after hitting the one-decade mark. He doubts he could have found a replacement, as he wasn't drawing a salary for much of that time. In any case, other groups and individuals are now carrying the torch. As he prepares to write a book on the Roundtable experience, this skilled professional crisis manager is finally willing to reveal his own crisis to the public.

It's a struggle he kept private for three years, telling no one but his wife, Olga, of his diagnosis.

He never wanted to make his crusade personal – he wanted to present "bulletproof" research to employers and policy-makers to persuade them, with hard-nosed logic, to take the mental-health issue seriously.

"If I'd declared my illness earlier," he says, "I would have become another voice who got religion because they went through it. I got religion long before I had any notion of being affected by it."

But he is willing to reveal himself as he steps down, in the hope that his story will underscore one of his main messages: Mental illness is part of the mainstream in Canada – and it does not spell an end to meaningful work.

Changing the agenda

Mr. Wilkerson is widely credited with moving the conscience of corporate Canada by sparking groundbreaking discussions on mental health among senior executives, scientists and government policymakers in North America and Europe.

"Ten years ago, this wasn't on anyone's agenda. Now, it is," says Michael Wilson, the former finance minister and current Canadian ambassador to the United States, a leading advocate for mental health since his own son's depression-related 1995 suicide. "You need a unique character to do that, and Bill is one."



Mental illness will strike one in every five Canadians at some point in their lives. Depression and anxiety represent up to 90 per cent of such illnesses and cause up to 35 million lost workdays a year in Canada.

Mental illness costs Canadian employers \$51-billion a year (chiefly in lost productivity) and is the leading disability claim for insurers. It's daunting stuff, but Mr. Wilkerson keeps his focus squarely on solutions. "He respects science, he understands the needs of the business community and he is relentlessly optimistic that we can all make a difference if we work together," says Tom Insel, director of the National Institute of Mental Health in the U.S.

It may help that Mr. Wilkerson typically asks his influential contacts not for money but for their time. Fundraising has not been a priority – which explains why both he and long-time administrator Donna Montgomery have worked for stretches without pay.

The Roundtable's partners have included the big banks, not traditionally the most nimble of institutions. Rob MacLellan, chief investment officer at TD Bank, says Mr. Wilkerson persuaded the "big names" to get involved by deploying the plain facts on lost productivity and the links between mental and physical illnesses.

Among Mr. Wilkerson's breakthroughs was the creation of the Great-West Life savings and insurance company's Centre for Mental Health in the Workplace. He helped to make workplace issues a top priority when the federal Mental Health Commission of Canada started in 2007. He has also influenced curriculum, designing the first-ever compulsory academic program dealing with mental health for students at the McGill University school of management.

And he has made sure that some of the individuals who have been hurt by government or corporate bureaucracy get a chance to share their stories with senior decision-makers. "Despite the often highly distressing nature of the narratives, Bill always manages to pull out a little ray of hope," says Ron Kessler, a professor of health-care policy at Harvard medical school.

For one thing, he speaks about cures: If we can dream about a cure for cancer, why not for depression or schizophrenia? He also emphasizes that depression is as normal as any other illness or injury. But he doesn't mince words about employers' duty to accommodate (by adjusting work hours, for example) and the health profession's need to make treatment more



accessible.

"I've seen him be dead honest with business leaders," says Rod Phillips, president and chief executive officer of Shepell-fgi, the largest provider of employee-assistance programs in Canada: "You say one thing, but you are not living up to your obligations as an employer."

But Mr. Wilkerson hasn't lavished his attention only on bigwigs. Tanya, a Canada Post employee with a bipolar disorder (she asked that her last name be withheld), went to Mr. Wilkerson for advice on returning to work after a leave. He didn't just offer platitudes, but called Canada Post's president. "It made me feel good to have someone on my side," she says. Tom Regehr was a successful Toronto-based consultant before alcohol and drug abuse left him sleeping on the streets. At the age of 37, he was starting to get clean, but was scared he could go off the rails at any moment. Mr. Wilkerson offered advice, encouragement and his candid opinions.

"There's no bullshit with Bill," says Mr. Regehr, who is now a workplace consultant.

From failure to Fixer

William Edward Wilkerson was born nearly 67 years ago in Niagara Falls, Ont., the last of five kids for an Ontario Hydro generator operator and an American-born, stay-at-home mom.

In high school, he played guard on the basketball team. But he didn't quite sink the shot when it came to graduation – he was kicked out on the last day of Grade 12 after an unfortunate incident involving a water bomb and his math teacher.

His mother was horrified, convinced her son would become a hardened criminal. So that very day, he set out in the family Plymouth to find a job. He landed one as a court reporter for the Tribune in nearby Welland, earning \$45 a week.

The young Mr. Wilkerson turned out to be a fine reporter, landing stories about corruption at the Niagara Parks Commission (where perks included "hookers, lots of booze and very expensive food"), the root cause of the 1965 Northeast Blackout (human error in Ontario) and unguarded comments a bishop made while watching a church burn ("holy smokes"). (You can detect the former headline writer in him in all the phrases he has coined in speeches over the years – for instance, "hurried and worried" as



an apt description for a typical worker; the message that most mental illnesses are "treatable and beatable"; and "social climate change," the process by which stress can melt resilience, drop by drop.)

At 26, however, he heard the call of Liberal politics and left reporting to begin speechwriting for various politicians. Eventually he served as chief of staff and campaign manager for Toronto mayor Art Eggleton.

His career since then has spanned the public and private spectrum, mostly in situations of turmoil. He was spokesman and adviser for the National Hockey League during the 1992 strike. He was the "crisis" president of the Toronto Symphony Orchestra, which at one point in his 2001–02 tenure was hours away from collapsing. (He and then-chairman Bob Rae kept it afloat, barely, with a new marketing strategy and new staff.)

It was as director of communications at the CBC in the early 1980s that he met Olga Cwiek, then a human-resources executive there. They were married in 1987 and now live in a historic home in Port Hope; they have no children, but are surrounded by books, trees and a much-loved dog and cat.

Mr. Wilkerson's last corporate job was as the transitional chief executive of Liberty Health. It was there that the story behind the Roundtable began, surprisingly springing from a business conundrum, rather than any quest for a social cause.

Insurers' drug claims for pain relief, sleeplessness, tension – afflictions with imprecise diagnoses – had spiked in the mid-1990s, especially among young men and women with full-time jobs. No one knew why. Mr. Wilkerson suspected it may have to do with rising rates of depression. After his contract at Liberty Health ended, he set out to investigate further as a consultant to Homewood

Health Centre, a Guelph, Ont., health-care provider that specializes in addiction and mental-illness treatments. That investigation unexpectedly catapulted him into the mental-health field.

Through research and interviews, he found several shifts under way: The transition to a knowledge-based economy from manufacturing was bringing more chronic stress; more young people in the work force were being diagnosed with depression; and scientists were discovering links between stress, depression and heart disease.



In other words, it was no coincidence people were getting sick: The whole nature of work was changing.

Chronic job stress – a frantic, relentless pace that can bring sleeplessness, soon to be exacerbated by endless e-mails and BlackBerrying – is a trigger for depression. The World Health Organization projects that depression and heart disease will swell to become the top contributors to the global disease burden by 2020.

Job insecurity was another key factor. "The mass-layoff culture, in my judgment, was a trigger point, if not the cause of the unfolding epidemic of depression which has now taken hold 12 years later," he says.

"And it hasn't gone away."

On the other hand, he realized, an employer that could prevent even one long-term disability case would see benefits go directly to the bottom line. Mr. Wilkerson, a man with no medical or academic training, did what few others had: He connected the dots.

On Oct. 10, 1997, he gathered a group around a polished Bay Street boardroom table that included former Ontario premier Bill Davis, Michael Wilson (then vice-chairman of RBC Dominion Securities), Tim Price (then chairman of Trilon Financial Corp., later Brascan) and Claude Lamoureux, then head of the Ontario Teachers' Pension Plan.

That was the seed of the Global Business and Economic Roundtable on Addiction and Mental Health.

"Everybody around the room had a personal experience with mental illness – a son, daughter, brother, sister, wife, husband," says Mr. Wilkerson, whose father suffered from bouts of paranoia and depression. "That was never the intention of the meeting. But of the 35 people in that room, there was not one from the business side who didn't have a family experience or concern with it. And they wanted to learn about it because, back then, the subject was on no one's agenda."

Indeed, the topic was a complete taboo. It made people squeamish. As Vancouver-based philanthropist Edgar Kaiser puts it, it was like walking around in the dark and banging your shins. Mr. Wilkerson's skill, he says, was in turning on the lights. "He makes the subject non-threatening." That meeting led to a report, to a book Mr. Wilkerson co-wrote with Edgardo Pérez entitled *Mental Health: The Ultimate Productivity Weapon*



and to a series of Roundtable meetings across North America.

There were failures. At his first speech at a global conference in Vancouver a decade ago, Mr. Wilkerson spoke in front of 150 empty chairs. But then came the successes, and now when he speaks to business leaders, rooms are overflowing.

His cheeky, boyish irreverence and love of a good yarn help to explain why – the man has not worn a tie in seven years, his silver hair waves past his ears and his laughter booms.

But, of course, his audiences haven't been privy to the days when the laughter won't come.

Everyday people

The persistent stereotypes about the mentally ill drive Mr. Wilkerson to distraction. The typical person with a mental illness is not the guy on the street who talks to himself. It's not the violent killer or the woman who stays hidden in her parents' basement. Those, he says, are the extremes, not the mainstream of this crisis.

"It's the mothers who get up and go to work every day and struggle. It's fathers and brothers who fight uphill just to get routine things done. It's the heart patient who's having difficulty recovering and who's about to have another [attack]. It's the female executive who can't stop obsessively checking whether she turned the tap off, but she gets to work and does her job," he says.

"It's the lawyer who decides to take a year off to get well, and then struggles to explain why she took that year off. It's the teacher who was told not to go back in the classroom after a depression because the school board and the principal worry he would somehow harm the children. And it's the kid who, at three months old, is exhibiting stress symptoms but can't get in to see a child psychiatrist until they're much older."

And it's Bill Wilkerson himself. There had been some warning signs: For decades, he wrestled with coping with anger and disappointment. In his Roundtable work, surrounded by some of the world's top neurologists and business leaders, he was anxious about lacking a university degree. Over the past decade, his frustrations snowballed. His phone was ringing non-stop with people who were struggling. These were "logical and reasonable cases, and they're being treated like damaged goods and thrown into isolation. And I began to feel this was a less hopeful cause



than I'd thought."

He often felt alone. "Rumination is a predictor of depression – and I seethed a lot," he says. He never showed the inner side "because if you're going to be an effective voice for anything or anyone, you can't be an angry public person. I was never that. But my disappointments and frustrations got internalized."

Inside, he would rage against the powers that be, and yet "to alienate them would lose the cause."

Now, he figures he should have sought help earlier. He felt he was losing control, he felt consistently generally unwell and daily routines – even getting a glass of water – seemed overwhelming.

Three years ago, he was officially diagnosed with depression. "It's like the energy being taken away. It's an absence, not a presence. It's not a bad mood. It's almost no mood. There's also that physicality: my achy stuff – my scar, my baseball shoulder – got achier."

He now takes antidepressants to keep the black dog at bay. It still sneaks back every few weeks or months, especially when he hasn't been sleeping. "I kick it in the teeth and it goes away again."

Rough road ahead

As the Roundtable winds up its work, Mr. Wilkerson has mixed emotions. For all the accolades its work has earned, he is frustrated he has not achieved more.

"I don't see, after 10 years, the kind of change that I know has to happen," he says. "If someone like me – a high-school fucking dropout – can become one of the top experts on this, you can see how bereft this field is."

Did such disappointments bring about his mental illness? No. But "it's had to contribute something.

Nothing satisfies me." Still, experiencing depression himself has given him more empathy, and added to his existing passion. And it has not remotely slowed him down – he continues to crisscross the country.

He will devote the next year to giving speeches, writing his book on the Roundtable's decade and advising the RCMP and the Canadian military on



mental health.

Meanwhile, the sinking global economy is aggravating his concerns. In a culture of mass layoffs that treats workers as disposable commodities, he says, they are even more apt to stay quiet about depression, stress and anxiety, fearful of stigma. Few employers have moved beyond "wellness" programs to a hard commitment to help prevent mental illness and accommodate those who do fall ill and successfully reintegrate them back into the work force.

It's easy to see why Mr. Wilkerson is apprehensive. Leaders such as Michael Kirby, first chair of the Mental Health Commission of Canada, predict that work overload, job insecurity and financial fears will spark a fresh wave of depression and other disorders. Psychiatrists across Canada are already reporting heavier caseloads.

Mr. Wilkerson recalls being required to lay off 105 workers while he was at Liberty Health. It initially saved a few million dollars in overhead, but the company wound up having to rehire some because it couldn't function without them.

"Job cuts as a measure to improve competitiveness are fool's gold," he says. "When all was said and done, savings were minimal. It undermined and probably devastated our competitive advantage." It's a lesson he thinks of often in these days of downsizing.

Yet Mr. Wilkerson also sees potential for the crisis to help motivate Canadian workplaces to become venues for mental-health education and prevention – for workplaces to act as communities and invest in human capital.

"The sanity to come out of this mess would be to rediscover the long-term value of people. We've got to get back to the basics of human decency." Still, sometimes his frustrations erupt into fury – as when an acquaintance in dire need of psychiatric help was recently placed on an 18-month waiting list.

"Maybe this is the source of why and how I wear down," he says. "It's not the task of helping individuals as best I can, but the awful realization of how limited and limiting is the mental-health care system we have allowed to exist in Ontario and in Canada for so goddamn long."

It may be Olga who can most eloquently summarize the challenges her husband has endured, having seen him through the highs and lows of his



crusade.

"What's hard to do is to be a first. And he's done 10 years of firsts," she says. "He was the first to bring in businesses, to translate medical language into laymen's terms, to hold Canada-U.S. forums. Nobody spoke of these things before. He was the first to bring it all out into the open.

He's a pioneer. But firsts are the hardest things to do because you're usually alone.

"Most people do only one first. Billy has done 60."

Tavia Grant is a Globe and Mail writer.

Hurried and worried

In his speech in Halifax in the summer, Bill Wilkerson presented a set of stress-inducing workplace situations with a humorous twist: "With apologies to David Letterman, let me give you my Top 10 list of management practices now driving us crazy."

10. Treadmill effect. Got that done? Get this done.
9. Lots of responsibility, not much discretion.
8. Too much work, not enough resources? Join the club.
7. Got something to say? E-mail me.
6. What's the priority? Everything.
5. Not sure what's expected of you? So what's your point?
4. Job fulfilment? What's that? Besides, be glad you even have a job.
3. Skills and job don't match up? Not what you were hired to do? Too bad.
2. That's not fair, doesn't make sense? Is it supposed to?
1. Turned your cellphone off? Who told you to do that?