

If you suddenly realize you're in **moderate or severe depression**, it can feel frightening and disorienting. The most important thing to know is that there *are* clear next steps: look after your safety, get clinical help, protect your position at work, and make the admin (insurance, money, logistics) work for you rather than against you.

1. priority: safety and clinical help

Start by asking yourself two questions:

1. Am I safe?

- If you have thoughts of self-harm, suicide, or not wanting to be alive, or you feel you might act on these thoughts, this is an emergency. In that case, you need **immediate** help: emergency services, the nearest A&E, your psychiatrist's emergency contact, or a crisis line. Do not wait to see if it passes.

2. How much is this affecting my functioning?

- If you are struggling to get out of bed, shower, eat, or care for your child, or you cannot concentrate enough to work safely, you need urgent assessment – within days, not weeks.

Your **first practical actions** are:

- Contact your psychiatrist, GP, or psychologist and tell them clearly: “My mood has dropped sharply, I can't function as usual, and I'm worried this is moderate/severe depression.”
- If you can't get through quickly, use an urgent care pathway (emergency room, crisis team, or on-call doctor).
- Tell at least one trusted person what is happening so you are not holding it alone.

2. Insurance and money: reduce stress where you can

Depression is hard enough without financial uncertainty, so try to stabilize this early:

• Check what your health insurance covers

- Look for outpatient psychiatric consultations, psychotherapy sessions, medication, and any inpatient or day-program coverage.
- Many plans require a referral letter or pre-authorisation; your psychiatrist or GP can often help you complete this quickly.

- **Ask about session limits and co-pays**
 - Knowing how many sessions are covered and what you'll pay out-of-pocket helps you and your clinician plan treatment that is sustainable.
- **If you have income protection or critical-illness cover**, check whether major depressive disorder or extended sick leave can trigger benefits. If yes, note any documentation requirements (diagnosis letters, fit notes, duration thresholds) and keep a simple folder with all medical letters and certificates.

You don't need to solve everything in one day, but **knowing roughly what is covered** can lower anxiety and help you say yes to the right level of care.

3. Your rights at work (especially in Hong Kong)

Once depression is moderate or severe, it often affects work. You have two key issues: **time off** and **protection from unfair treatment**.

- **Sick leave and protection from dismissal**
 - Under the Hong Kong Employment Ordinance, employees on statutory sick leave (supported by medical certificates and with sufficient accrued sick days) are entitled to sickness allowance. They cannot be dismissed on a sick day except for serious misconduct. This includes sick leave due to mental health conditions like depression.
- **Protection as a disability**
 - Under the Disability Discrimination Ordinance, mental illness can count as a disability. It is unlawful for an employer to dismiss you *because of* mental illness if you can perform the inherent requirements of the job, with reasonable adjustments where these do not impose unjustifiable hardship. Employers should consider adjustments (reduced hours, temporary role changes, flexible working) before moving to termination.

Practically, your steps are:

1. Get a **clear medical certificate** stating that you are unfit for work or need reduced duties due to depression.
2. Notify HR or your manager according to policy, keeping the information factual and minimal (diagnosis, expected duration, any recommended adjustments).
3. Keep a record of all communications and copies of medical notes. If you feel you are being treated unfairly because of your mental health, you can speak to a

lawyer, your union (if you have one), or the Equal Opportunities Commission for advice.

4. Who you can call

Beyond your own psychiatrist/GP, useful support points include:

- **Emergency services / A&E** – if you are in crisis or at risk of self-harm.
- **Crisis helplines** – for immediate emotional support when you feel unsafe or overwhelmed.
- **Mental health NGOs / charities** – many offer helplines, peer support groups, or low-cost counselling.
- **Your employer's EAP** (Employee Assistance Program), if available, often includes short-term counselling and practical advice on finances, legal issues, and work.

It can help to create a **small crisis card** on your phone: key numbers, your diagnosis/medication, and one or two people you will contact if you feel you're deteriorating.

5. First practical steps in the first 72 hours

When depression hits hard, thinking becomes foggy. A simple checklist can help:

1. **Tell one professional** – book or attend an appointment; be honest about severity and function.
2. **Tell one trusted person** – so they can check in, help with childcare, or accompany you to appointments.
3. **Secure some time** – use sick leave or reduced hours if you are not safe or effective at work.
4. **Simplify your days** – strip your schedule to basics: sleep, food, movement, essential childcare; postpone anything non-urgent.
5. **Start a brief symptom log** – jot down sleep, appetite, mood, energy, and any suicidal thoughts; this helps your clinician fine-tune treatment and gives you a sense of trackable change.

Depression is serious, but it is also **treatable**. You don't have to navigate it alone, and you are allowed to use every tool available – medical, legal, financial, and social – to get yourself to safer ground.

