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Equality and  
Human Rights  
Commission

# Mental health is your business

Campaign pack for trade union representatives



# Mental health is your business

Mental ill health is not confined to the home but affects the whole lives of those concerned, which includes their work and careers. It may affect productivity, performance, attendance, emotional and physical health and well being.

Most people with mental health conditions are in paid employment and are almost as likely to be working as anyone else.

Employers should expect to find that **at any one time nearly one in six** of their workforce is affected by a mental health condition

Mental ill health has huge implications for employers as research shows that 91 million days are lost each year due to mental health conditions.

The combined costs of sickness absence, non-employment, effects on unpaid work and output losses in the UK is **£26 billion a year**.

## We are asking you to:

Make your workplace a safe place where colleagues can discuss, disclose and ask for help when experiencing mental distress.

Mental ill health can be managed more effectively benefiting both employer and staff member. Effective practice can reduce sickness absence, improve productivity and decrease recovery time. By supporting valued members of staff, you are retaining skills, knowledge and experience, which can be very difficult to replace.

## This can be achieved by:

- Developing and implementing an effective mental health workplace policy
- Providing training on mental health
- Raising awareness of mental health in the workplace

# Tools

This campaign pack contains the following tools to help you promote mental health and wellbeing at work:

- **Mental health is your business: Guidance for developing a workplace policy** publication
- Campaigning **ideas for union reps** for creating a mentally healthy workplace
- **Myths and Facts** about mental health
- A **quiz** to test your knowledge

You can also download the following tools from our website:

- A short three minute **digital story** and a presentation you can customise
- **'James' story** of how his own mental distress was treated by his employer

## Partners



## Contact

If you would like more information or help in planning your activities please contact:

Emma Ward at the Equality and Human Rights Commission on 029 20447710 or at [Emma.Ward@equalityhumanrights.com](mailto:Emma.Ward@equalityhumanrights.com).

This guidance and supporting materials are available online at [www.equalityhumanrights.com/yourbusiness](http://www.equalityhumanrights.com/yourbusiness)

# Trade Union Representatives - What can you do?

By putting mental health on the bargaining agenda, reps can persuade managers and employers to adopt a less prejudiced attitude to mental health. Reducing stigma will enable members to access appropriate help more quickly. Steps for trade union representatives could include:

## Negotiating a policy and effective practice

- Negotiate and implement a mental health workplace policy to prevent mental ill health, provide protection and ensure provision of services for those affected by mental ill health
- Negotiate a staff training programme such as Mental Health First Aid
- Link the mental health policy to other workplace policies e.g. dignity at work, capability, sickness absence, domestic abuse etc.
- Promote the policy to all union members and ensure they know where to find it and carry out an annual awareness campaign
- In the public sector use the Disability Equality Duty and Human Rights Act as levers to effectively prioritise mental health and make the link to the wider health issues, such as stress and wellbeing

## Raising awareness and ensuring a supportive workplace

- Encourage members to discuss, disclose and ask for help
- Talk about how mental health fits into the wider wellbeing agenda including work / life balance, health and fitness etc.
- Familiarise yourself with the TUC guide for reps: *Representing and supporting members with mental health problems at work*
- Publicise the services offered by trade unions that are beneficial to staff experiencing mental ill health, e.g. helplines and provide information about local support services
- Write articles about the 'mental health is your business' campaign in your union newsletters - provide links to the mental health workplace policy
- Collaborate with local voluntary groups to run awareness raising days for members

# Myths and Facts

**Myth: Mental health conditions are rare and unusual. None of my staff have a mental health condition.**

1 in 5 employees are affected by depression, anxiety or other mental health condition to a clinically diagnosable degree.

*Psychiatric Morbidity report, ONS (2000)*

**Myth: People with severe mental health conditions are not able to work**

Not necessarily. Just because someone is diagnosed with a mental health condition like schizophrenia, it does not mean that they cannot work or are unable to work. The vast majority of people who have experienced a mental health condition continue or return to work successfully.

**Myth: Work makes mental health problems worse**

Not necessarily. In fact it has been shown that long periods out of work can actually lead to the deterioration in health and well-being. Work is therefore generally good for health and beneficial to well-being and the benefits apply equally to people who have mental health problems, including those who have more severe conditions.

Poor conditions in the workplace however can make poor mental health worse and thus limit the benefits of working. For this reason it is imperative for employers to foster work environments that are conducive to good mental well-being.

*Government Office for Science. (2008). Foresight Mental Capital and Well-being Project (2008). Final Project report. Making the most of ourselves in the 21st Century.*

**Myth: Employing someone with a mental health problem will be difficult or impossible**

Research suggests the opposite. It has been found, for example, that 85% of employers who took on staff with mental health conditions did not regret doing so. *Royal College of Psychiatrists (2008)*

Since it is estimated that 1 in 5 employees already have a mental health problem then it's extremely likely that you are already employing someone with a mental health problem, you are just unaware of it.

**Myth: Someone who states that they have previously had a mental health condition will have a bad sickness absence record in the future**

Although some people who experience mental health conditions may need to take time off work, many are able to continue without time off, or return after a period of ill health. People can and do recover from mental health conditions and although some experience conditions over a long period of time, the vast majority of people experience only a single episode and recover completely. This is true of schizophrenia as it is of depression. Over 70% of people who experience a mental health problem recover fully.

*The British Psychological Society (2000)*

**Myth: When a member of staff goes on sickness absence due to a mental health problem it is best to leave them for as long as possible to avoid hassling them.**

Contrary to this belief, research has shown that a lack of contact from a manager can actually make people feel less able to return. Early, regular and sensitive contact can in fact be a key factor in facilitating an early return to work.

**Myth: Mental health conditions are a sign of weakness. Those who have them are not as intelligent as other people and therefore less likely to be able to do a good job.**

Do you consider these people to be weak or less able than others? Winston Churchill, Sir Isaac Newton, Charles Dickens, Ludwig Van Beethoven. These people have all had mental health conditions and have made a vital contribution to world history. Is discrimination getting in the way of recruiting someone who could make a real contribution to your organisation?

**Myth: It will cost a lot for me to put adjustments in place for someone who has a mental health problem.**

The vast majority of adjustments are simple, inexpensive, and make good business sense. Many employers report significant 'universal design' benefits for their other staff too. For example, implementing flexible working hours, occasionally being allowed to work from home. A looked-after workforce will also be more committed and less likely to go off sick. It should also be remembered that implementing reasonable adjustments for someone with a mental health problem is also law under the Disability Discrimination Act. For extra funding for this you can use the government Access to Work fund (unless you're a government dept). To find out more go to: [www.directgov.co.uk](http://www.directgov.co.uk)

**Myth: I am putting my staff / customers at risk of violence if I employ an individual with mental health conditions as they are dangerous**

Not the case. Sensationalist reporting of a tiny minority of cases of individuals with severe mental illnesses spread this myth. The sad truth is that people with mental health conditions are more likely to hurt themselves than others. 0.01% of all deaths in the UK, and 6% of all murders were committed by somebody with a diagnosed mental disorder in 2005 *ONS (2005)*

You are more likely to get knocked over by a bus than experience violence from someone with a mental health condition.

**Myth: "There's nothing I can do to help."**

Actually, there's lots you can do. Issues in the workplace can have a significant effect on someone's state of mind. Feeling like they have control over their work and understanding of their role can really help someone who is anxious, for example.

(Source: [www.shift.org.uk](http://www.shift.org.uk) Shift is an initiative to tackle stigma and discrimination surrounding mental health issues)



# Quiz

1. In a recent study when asked 'What percentage of your employees do you think will have a mental health problem at some point during their working lives?', 70% of the employers surveyed said that

- A. Between 0-5% employees will
- B. Between 5-10% employees will
- C. Between 10-20% employees will

2. What percentage of employers thought that *none* of their staff will suffer from a mental health problem during their working life?

- A. 5%
- B. 15%
- C. 45%

3. What percentage of employees are in fact suffering from some kind of mental health problem at work?

- A. 2.4%
- B. 5%?
- C. 22.3%?

4. Mental ill health is now the;

- A. Second largest cause of time lost due to sickness absence in organisations in the UK
- B. Fourth
- C. Eighth

5. Approximately how much does mental ill health at work cost an employer each year?

- A. £500 for every employee
- B. £1000 for every employee
- C. £1500 for every employee

6. Good management of mental health at work including prevention and early identification can bring this cost down by as much as

- A. 10%
- B. 20%
- C. 30%

7. Impaired performance of people who continue to work whilst mentally unwell costs employers nationally approximately;

- A. 5 million/year
- B. 15 million/year
- C. 15 billion/year

8. What percentage of managers have received training on mental health awareness?

- A. 13%
- B. 26%
- C. 63%

9. What percentage of senior managers are aware they have a policy on mental health and feel that it is effective in doing what it is intended to do?

- A. 3%
- B. 33%
- C. 63%

10. People with mental health problems returning to work after sickness absence are more likely to;

- A. Go off sick again
- B. Be demoted or placed under close supervision
- C. Do a poorer job than before

# Answers

## 1. A.

70% of employers estimated that 5% or fewer of their employees would have mental ill-health in their entire working life (*Shaw Trust (2006) Mental Health: The Last Workplace Taboo. London: Shaw Trust*). In fact it is over 5 times higher than that illustrating that the prevalence of mental health problems amongst staff is grossly underestimated by employers

## 2. C.

45%. Nearly half of all employers thought that none of their staff would ever have a mental health problem during their working life. (*Shaw Trust (2006) Mental Health: The Last Workplace Taboo. Wiltshire: Shaw Trust*)

## 3. C.

22.3% (Psychiatric Morbidity report, ONS 2000) 22.3% equates to 1 in 5 employees who are affected by depression, anxiety or other mental health condition to a clinically diagnosable degree. Alcohol and drug dependence are also included in this figure. Excluding alcohol and drug dependence then the statistic is 15.4% equivalent to 1 in 6 employees who are affected by a mental health condition.

*Singleton, N., Bumpstead, R., O'Brien., Lee, A & Meltzer, H. (2001) Psychiatric Morbidity among Adult Living in Private Households. London: Office for National Statistics. Meltzer, H., Singleton, N., Lee, A., Bebbington, P., Brugha, T. & Jenkins, R. (2002). The Social and Economic Circumstances of Adults with Mental Disorders. London: Office for National Statistics.*

## 4. A.

Musculo-skeletal disorders are the most common cause of time lost due to sickness absence from organisations in the UK with mental ill-health being the second. Stress, depression, and anxiety account for over 50% of these mental health problems

*(CIPD & Active Partners (2007) New Directions in managing employee absence. London: Chartered Institute of Personnel and Development cited in Sainsbury Centre for Mental Health (2007) Briefing 33: Mental Health and Employment. London: Sainsbury Centre for Mental Health)*

### **5.B.**

Mental illness costs employers £1,035 for every employee in the UK workforce, an estimated £26 billion each year comprising of over £8 billion a year in sickness absence; £15.1 billion a year in reduced productivity at work and £2.4 billion a year in replacing staff.

*(Sainsbury Centre for Mental Health (2007) Policy Paper 8: Mental Health at Work: Developing the business case. London: SainsburyCentre for Mental Health)*

### **6.C.**

Good management of mental health at work including prevention and early identification can bring this cost down by as much as 30%.

*(Sainsbury Centre for Mental Health (2007) Policy Paper 8: Mental Health at Work: Developing the business case. London: SainsburyCentre for Mental Health)*

### **7.C.**

£15.1 billion. Reduced productivity of people at work due to mental health problems accounts for 1.5 times as much working time lost as sickness absence.

*(Sainsbury Centre for Mental Health (2007) Policy Paper 8: Mental Health at Work: Developing the business case. London: Sainsbury Centre for Mental Health)*

This therefore has a much bigger impact in terms of lost productivity. Staff may turn up to work even though they feel mentally unwell as they fear the possible stigma and discrimination from colleagues and managers if they disclose their condition.

### **8. A.**

13% of employers have received training on mental health awareness.

*(Employers' Forum on Disability in association with Great Place to Work (2008). A survey of line managers' mental health knowledge. London: Employers' Forum on Disability).*

This type of training can be extremely beneficial. There is now a national Mental Health First Aid training which employers can receive. For more information visit; <http://www.mhfa-wales.org.uk/>

9. **A.**

Only 3% of senior managers are aware they have a policy on mental health and feel that it is effective in doing what it is intended. (Shaw Trust (2006) Mental Health: The Last Workplace Taboo. London: Shaw Trust)

10. **B.**

People with mental health problems returning to work after sickness absence are more likely to be demoted or placed under close supervision (*The Royal College of Psychiatrists (2008). Mental Health and Work. London: The Royal College of Psychiatrists*) Contrary to the perception that people with mental health problems will do a poorer job and take a lot of sickness absence, research actually shows that once given the chance, employees take less sick leave than average and demonstrate strong loyalty towards their employer.

(Source: [www.shift.org.uk](http://www.shift.org.uk) Shift is an initiative to tackle stigma and discrimination surrounding mental health issues)

