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## What works?

### Citation for published version:

Marks, A, Richards, J & Loretto, W 2012, *What works? Supporting mental health in the workplace (Executive Summary)*. SAMH, Glasgow. <[http://www.samh.org.uk/media/217314/what\\_works\\_-\\_dismissed\\_report\\_-\\_executive\\_summary\\_-\\_final.pdf](http://www.samh.org.uk/media/217314/what_works_-_dismissed_report_-_executive_summary_-_final.pdf)>

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# What works?

Supporting mental health in the workplace

Executive summary



office manager limousine driver lorry driver joiner  
care assistant civil servant hairdresser personal  
assistant school teacher hospital domestic bank  
associate caretaker teaching assistant developmental  
officer art centre manager public relations manager

## FOREWORD

In 2011, SAMH published *What's It Worth Now?*, a research report investigating the costs of mental health problems to Scotland's employers. The findings were staggering: mental health problems cost Scotland's employers £2.15 billion per year, through sickness absence, lower productivity and staff turnover<sup>1</sup>.

Such figures would be worthy of the public's attention in any economic climate. In the current financial crisis, with both the private and public sectors seeking to cut costs, higher levels of unemployment and far-reaching reforms of the welfare system, the importance of workplace mental health cannot be ignored.

In recognition of these challenges, *Dismissed?*, SAMH's campaign for fairness in mental health and employability, has been working to raise awareness of mental health at work and to help employers in Scotland find practical ways to support the mental health of their staff.

While *What's It Worth Now?* revealed the financial costs of poor mental health, little research has been done to understand

individual's lived experiences of mental health problems in the workplace.

People with mental health problems face numerous challenges to managing their condition as well as their workload. To understand workplace mental health and to devise effective, practical measures by which employers can support the mental health of their staff, we must understand the experiences of the one in six employees who experience a mental health problem at work<sup>2</sup>.

To do this, we have worked with the Centre for Research on Work & Wellbeing at Heriot-Watt University and the Business School at the University of Edinburgh. Together, we surveyed hundreds of employees in Scotland and conducted in-depth interviews with dozens of working people with experience of mental health problems.

The result is this report. *What Works?* reveals the facts about mental health in the workplace and provides employers of all sizes and sectors with practical ways to tackle both the human and financial costs of poor workplace mental health.



**BILLY WATSON**  
CHIEF EXECUTIVE, SAMH

**DISMISSED?**  
SAMH

SAMH's **Dismissed?** campaign focuses on the employability journey of people with mental health problems. From claiming benefits to which people are entitled when they are sick or disabled, to applying for, getting and keeping a job, people with mental health problems are currently disadvantaged in employability.

The *Dismissed?* campaign works with employers to help them support staff and save money by managing mental health in their workplace, and seeks to influence the benefits system to make it fairer and easier to navigate.

There are many ways to get involved in the *Dismissed?* campaign. Visit [www.samh.org.uk](http://www.samh.org.uk) to find out more.

## WHAT WORKS? KEY FINDINGS

The findings in this report were gained through a combination of methods. An online survey was conducted and targeted at employees in Scotland. The survey received 312 respondents, 69% of whom had experience of mental health problems. To supplement the survey, interviews lasting up to two hours were held with 38 working people from a wide range of backgrounds. This research revealed a number of key findings.



- **More than half** of people report that their condition has little or no effect on their day-to-day work. 40% of people say that their condition has not resulted in sickness absence.
- **Stress awareness initiatives** are somewhat effective, with those reporting higher levels of awareness of such initiatives less likely to report feeling stressed at work. However, to be effective such initiatives require concerted promotion.
- **When seeking support** for a mental health problem at work, people prefer to talk to line managers or colleagues over HR or occupational health staff.
- **63% of employees** with experience of mental health problems have disclosed their condition to their employer. 40% of those who disclosed reported satisfaction with their employer's response. 40% stated that they were dissatisfied with the response.
- **Employees who disclose** report higher levels of satisfaction where the employer provides a prompt, appropriate response. In addition, employees report higher levels of satisfaction where they are actively involved in discussions and decisions about the support they receive from an employer.
- **Employees report higher** levels of satisfaction with an employer's response where they are offered a combination of formal and informal support and receive support from their line manager and colleagues.
- **After a period of sickness absence** as a result of mental health problems, a majority of employees prefer to arrange their return to work with their line manager, over HR or occupational health staff.
- **Employers are not the first or only source of support** for a person experiencing mental health problems. Most people seek support from their family and friends, a GP or a mental health professional, often in combination.

## PART ONE: MENTAL HEALTH IN THE WORKPLACE

Existing evidence shows that one in six employees will experience a mental health problem at any one time<sup>2</sup>. However, our research shows that the nature, severity and consequences of their illness vary significantly from person to person.

Depression and anxiety disorder are the most common conditions among employees, with a smaller proportion of people experiencing other conditions. More than 75% of employees with a mental health problem report experiencing more than one mental health problem concurrently or over a period of time.

### PREVALENCE OF SPECIFIC MENTAL HEALTH CONDITIONS AMONG SURVEY PARTICIPANTS

MENTAL HEALTH PROBLEM	PER CENT
Depression	75.2
Anxiety	63.6
Eating Disorders	11.7
Other <sup>3</sup>	10.5
Postnatal Depression	9.7
Phobias	8.7
Bipolar Disorder	8.3
Obsessive Compulsive Disorder	4.4
Personality Disorders	1.9
Schizophrenia	0.5

Our research also shows that the severity of problems varies significantly, with almost half reporting their condition as moderate.

### REPORTED SEVERITY OF MENTAL HEALTH CONDITIONS AMONG SURVEY PARTICIPANTS

SEVERITY OF CONDITION	PER CENT
Mild	19
Moderate	49
Severe	27

The duration of employees' mental health problems also varies. Our research shows that an employee's condition may last from a few months to several decades, though any impact on their work is not necessarily of the same duration.

### IMPACT OF MENTAL HEALTH PROBLEMS ON WORK

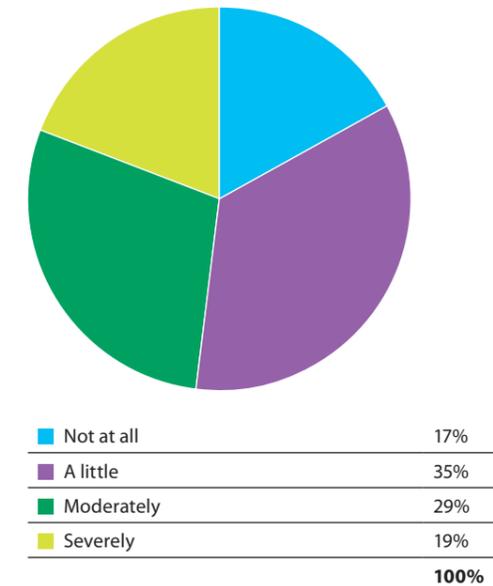
Research has shown that the financial impact of poor mental health at work is significant. Presenteeism or lower productivity alone costs Scotland's employers £1.24 billion<sup>1</sup> per year. However, mental health problems need not have such a dramatic impact on the workplace.

Our research shows that more than half of people report that their mental health problem has little or no affect on their day-to-day work activities or the type of work they do. Twenty-nine per cent report that their condition impacts moderately on their work and 19% state that the impact is severe. Furthermore, 40% of people with mental health problems say that their condition has not led to their being absent from work and where people take sickness absence, the duration of that absence varies greatly.

### IMPACT OF WORK ON MENTAL HEALTH

There is compelling evidence to show a positive link between employment and mental health. As a rule, people enjoy better mental health when they are in work<sup>2</sup>. Even so, our research shows that employees experiencing mental health problems may require additional support in order to feel that their contribution to work is of value. People with mental health problems are more likely to report that their opinion of themselves decreases if their work is not up to their usual standard.

### IMPACT OF MENTAL HEALTH PROBLEMS ON WORK ACTIVITIES AS REPORTED BY SURVEY PARTICIPANTS



Though only a small proportion of mental health problems are directly caused by work or working conditions<sup>2</sup>, our research shows that working conditions have a significant impact on a person's mental health. People with mental health problems are more likely to report feeling stressed at work, with this likelihood increasing with the severity of their condition.

Interviews with employees with mental health problems illustrate how problematic stress can result from a combination of unexpected responsibilities, excessive workloads and unrealistic performance targets.

#### EXAMPLE 1: SOCIAL WORKER

"Out of a team of eight workers and two Seniors there's only myself and another worker and another Senior. So we were doing the work, two of us doing the work of eight and I was just knackered and I took a chest infection and my body and my brain just went "Oh let's stop..."

#### EXAMPLE 2: CIVIL SERVANT

"I was deputising [as a line manager]. I actually deputised for a year and a half constantly, that's why I put in for the job and it was just a nightmare, it was an absolute nightmare ... I was in late nearly every single night ... just to try and get things cleared and then the audit failed and everything else and things were in a bit of a mess with inspections and things like that. Just a lot of things, you felt as if you were going home and thinking about the place too much."



## PART 2: SUPPORTING EMPLOYEES WITH MENTAL HEALTH PROBLEMS

Though important, our research shows that employers are not the first or only source of support for a person experiencing mental health problems. Most people seek support from their family and friends, a GP or a mental health professional, often in combination. However, this choice may reflect a lack of awareness on the part of the employee that support is available from their employer.

Where they do seek support at work, people experiencing mental health problems prefer to talk to their line manager and colleagues over HR staff or occupational health staff or services.

### SOURCES OF SUPPORT FOR THOSE EXPERIENCING MENTAL HEALTH PROBLEMS AT WORK (MULTIPLE RESPONSES ALLOWED)

SOURCE OF SUPPORT	PER CENT
Family and friends	62.9
GP	52.9
Counsellor/psychologist/psychiatrist	43.3
Colleagues	27.6
Line manager/supervisor	22.9
Occupational health (work)	8.6
HR/Personnel	8.1
Trade union representative	5.7
Occupational health (outside work)	3.3
Citizens Advice Bureau	1.0
Health and safety representative	0

### DISCLOSURE OF A MENTAL HEALTH PROBLEM

Our research shows that 63% of employees with experience of mental health problems have disclosed their condition to their employer, providing a valuable opportunity to minimise the impact of poor mental health on the employee and their work. However, 37% of employees do not disclose, with the result that employers may not be aware of the mental health problems experienced by their

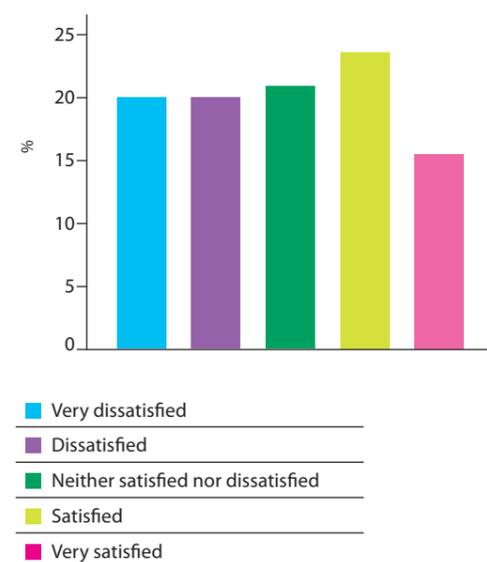
staff. Reasons for non-disclosure vary, though interviews with employees indicate that non-disclosure often stems from distrust and a fear of negative consequences.

#### EXAMPLE: PERSONAL ASSISTANT

"I didn't tell my current employer until it became an issue and I had to be off work with it. I hadn't had to own up to it on the application form because in the job I'd had previously I'd had a really good spell ... Rightly or wrongly I believe that if you have to put something like that down on an application form you're probably slashing your chances of being invited to interview."

Our survey findings show that 40% of those who have disclosed their mental health problem to an employer were satisfied with the response, with an equal number reporting dissatisfaction. This finding provided an excellent opportunity to explore both effective and ineffective responses to disclosure.

#### REPORTED SATISFACTION BY SURVEY PARTICIPANTS WHO HAVE INFORMED THEIR EMPLOYER OF THEIR CONDITION



### RESPONDING TO DISCLOSURE OF A MENTAL HEALTH PROBLEM

Our research shows that the initial response of an employer to the disclosure of a mental health problem by an employee has a significant impact on the success of any support offered. A positive, supportive response encourages a more constructive approach to managing a mental health problem and increases the likelihood of a satisfactory outcome.

The experiences of employees show that the most effective responses are those that prioritise informal support, such as flexibility in working hours, over formal approaches such as workplace counselling.

Two further elements are crucial to ensuring an employee receives effective support. First, our interviews with employees show that, even where an employer's initial response was supportive, this can be undermined by significant delays or a lack of follow-up in the provision of support. Second, ensuring the employee is involved in decisions about the support they receive leads to better outcomes for the employee and their work.

#### EXAMPLE: EXECUTIVE OFFICER

"It took my employer 4 months to offer reasonable adjustments in my work environment to address my work based anxiety. I feel that I suffered unnecessarily during this time and this has seriously affected my recovery. Prompt implementation of minor adjustments would have made all the difference."

#### EXAMPLE: IT WORKER

"A bit of flexibility in working times [helped]. I did not want time off, but it helped to be able to do slightly shorter days to avoid the busiest times on public transport when I was at my worst."

### INFORMAL SUPPORT

Our research shows that the actions of line managers and colleagues are crucial to ensuring a successful response to disclosure.

Line managers can provide vital support to employees experiencing mental health problems. This can be practical - developing and overseeing methods of support, such as counselling, workload management or flexible working patterns - and emotional, by making time to listen and talk confidentially to an employee.

Where respondents received a negative response from their line manager, they cited as a reason the line manager's lack of experience of mental health issues or a lack of power on the part of the line manager to provide an appropriate formal response.

#### EXAMPLE: EDUCATION ADVISOR

"Regular contact with Line and Section Managers, reassuring emails and support from Line and Section managers, confidentiality, awareness, trust, encouragement. I wouldn't have survived if it hadn't of been for the support from my Line and Section Managers"

The role of work colleagues should also not be underestimated. More than half of employees we spoke to disclosed their mental health problem to coworkers, who are more likely to give a satisfactory response to disclosure than employers. Where employees do report a negative response, testimony suggests that this stems from ignorance of mental health problems on the part of colleagues.

### EXAMPLE: HOSPITAL DOMESTIC

“Well, I can text [my colleague] during the week sometimes or I see her about but she’s more just like a colleague and we sort of share things when we’re working like “what are you up to” and “how’s your week been this week” or whatever but I don’t visit or go out of my way to see her or anything when we’re not at work.”

However, informal approaches are vulnerable to inconsistency or changes in staff or workplace arrangements, leading to a sudden withdrawal of support. To be effective, informal support from line managers and colleagues should be supplemented with more formal, systemic approaches. Limitations to the benefits of support received from colleagues also highlight a disparity between the supportive attitudes of colleagues and less effective support from the wider organisation.

### EXAMPLE: HR MANAGER

“Having gone through a difficult 12 months I was supported well by my previous line manager. However, having transferred line management in the last 6 weeks, in one phone call with my new line manager this has all been swept away.”

### FORMAL SUPPORT

A range of formal responses to disclosure is available to employers. Our research shows that these can vary depending on the size and sector of the organisation and such measures often work best in combination with informal sources of support.

Formal support can include:

- Providing access to employee assistance programmes
- Providing access to workplace counselling or similar services off-site
- Accommodating time off for treatment and / or convalescence
- Offering flexible workload and working hours or the option of working from home

Testimony from those interviewed shows that formal measures are most successful when the employee affected is actively involved in decisions about their support.

### CASE STUDY: PAULA, BANK WORKER

Paula works as a bank associate and has been in her current job for approximately 10 years. Paula’s life changed dramatically with the loss of her baby in the advanced stages of pregnancy followed by the death of her father.

Consequently diagnosed with depression by her GP and prescribed anti-depressants, Paula began to plan a return to work after a two month absence.

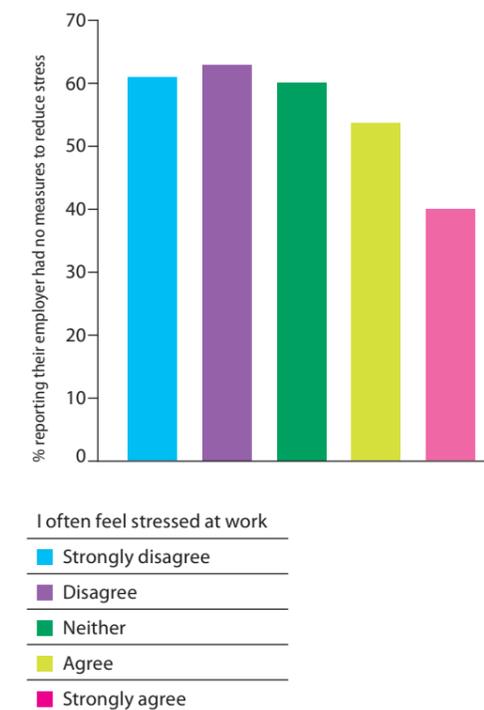
This began informally through discussions with Paula’s managers in a city centre cafe. Paula’s employer then organised regular visits for her to the company nurse and helped to arrange private bereavement counselling.

Paula says that thoughtful comments and gestures by colleagues played a part in the recovery process too. Since then Paula has taken no time off due to her depression and reports high levels of job satisfaction and an employer more than satisfied with her efforts and commitment.

Many large employers provide workplace initiatives to raise awareness of and reduce stress. These can include Employee Assistance Programmes, provision of a mentor or “buddy system” and stress-based Risk Assessments.

Our research shows that workplace stress initiatives can be effective, with levels of workplace stress decreasing with awareness of such programmes. However, the evidence also shows that provision does not necessarily result in uptake by employees.

RELATIONSHIP BETWEEN SURVEY PARTICIPANT’S PERCEPTION OF STRESS AT WORK AND AWARENESS OF AVAILABILITY OF INITIATIVES TO MANAGE STRESS



### SUPPORT IN RETURNING TO WORK

Employees with mental health problems may at times need to take sickness absence in order to manage their condition. The period of absence required varies considerably depending on the individual and their condition. Where an employer is not aware of an employee’s mental health problem, frequent or extended periods of sickness absence may be an indication of poor mental health. Testimony obtained through interview shows that many employees are forced to disclose a mental health problem to their employer as a result of requiring a sick line to justify frequent or extended absence.

Our research shows that, during absence and upon returning to work, employees rely particularly on effective support from their line manager.

SOURCE OF ADVICE RE RETURN TO WORK	PER CENT
GP	54.8
Line manager/supervisor	38.1
Family and friends	28.1
Counsellor/psychologist/psychiatrist	18.6
HR/Personnel	14.8
Occupational health (work)	11.9
Colleagues	8.6
Trade union representative	7.1
Occupational health (outside work)	1.9
Health and safety representative	1.4
Citizens Advice Bureau	1

## PART 3: RECOMMENDATIONS

Based on our research findings, these recommendations provide advice and details of a variety of formal and informal support methods that employers of any size or sector can use to support the mental health of their employees.

### RECOMMENDATION 1: UNDERSTAND INDIVIDUAL NEEDS

Employers should recognise that people with mental health problems can work effectively and do not have to be entirely symptom-free to work successfully.

Variation in the nature, severity and duration of mental health problems poses a challenge to employers when designing and implementing support measures. Support measures should be flexible enough to recognise the individual needs, personal circumstances and work environment of the employee, while also taking account of the business needs of the employer.

### RECOMMENDATION 2: RAISE AWARENESS

Our research shows that provision of workplace mental health programmes is not on its own sufficient to meet the needs of employees.

To improve uptake, stress management initiatives and other support available to employees experiencing poor mental health should be promoted widely and consistently.

### RECOMMENDATION 3: RECOGNISE THE ROLE OF LINE MANAGERS AND COLLEAGUES

Our research shows that colleagues can

provide valuable emotional support to employees with mental health problems.

Line managers play a vital role in supporting employees with mental health problems, providing both emotional support and practical help. Knowledge of mental health and the confidence to support their staff is crucial to ensuring a satisfactory response.

To ensure that employees disclosing a mental health problem receive an appropriate response from their colleagues, employers should provide mental health awareness training to line managers and provide information on mental health to all employees.

### RECOMMENDATION 4: ENSURE A POSITIVE RESPONSE TO DISCLOSURE

The decision to disclose a mental health problem at work and the initial response to that disclosure are crucial to ensuring a satisfactory outcome for both employees and employers.

Employees with mental health problems should be encouraged to disclose their conditions safe in the knowledge that they will not be ignored, stigmatised or disciplined.

Though organisational procedures can take time, formal responses to disclosure of a mental health problem should be prompt to ensure that an initially positive response is not undermined by subsequent delays. This can be achieved by providing informal support until formal procedures are in place.



### RECOMMENDATION 5: INVOLVE EMPLOYEES IN DECISION-MAKING

Our research shows that the most positive and mutually beneficial outcomes are ensured by actively engaging employees with mental health problems in decision making and dialogue about the support they receive.

As well as providing a vital element of control for those experiencing mental health problems, this serves to reduce the burden placed on line managers and HR staff to devise an appropriate response.

Furthermore, interviews with employees indicate that feelings of persecution and discrimination are common when undergoing workplace health procedures. Keeping an employee informed and involved in such processes ensures that they understand the purpose and outcomes of such procedures.

### RECOMMENDATION 6: BALANCE FORMAL AND INFORMAL APPROACHES

While formal policies and initiatives have an important place in managing mental health at work, our research shows that these work best when coupled with informal intervention.

Informal support can take many forms, from small adjustments at work to taking a colleague for a cup of coffee and a chat. Such measures can be the most effective in ensuring a satisfactory outcome for an employee.

This also means that employers that do not have the capacity to provide formal support can instead prioritise informal support, for example by providing mental health training and information resources for line managers and staff.

### RECOMMENDATION 7: SHARING RESPONSIBILITY

By ensuring that workplace mental health is the responsibility of all staff and departments within an organisation, employers can respond comprehensively and consistently to the mental health needs of their staff.

However, employers should be aware that other sources of support are available to employees. Family, friends, GPs, counsellors and others can all help to support employees with mental health problems. Employees should be encouraged to seek other forms of support if necessary and employers should be aware of mental health services and resources in their local area.



## REFERENCES

1. SAMH & Centre for Mental Health (2011) *What's it Worth Now? The Social & Economic Costs of Mental Health Problems in Scotland*
2. McManus S, Meltzer H, Brugha T, Bebbington P and Jenkins R (2009) *Adult Psychiatric Morbidity in England, 2007*. London: NHS Information Centre
3. These included: sleep problems, Seasonal Affective Disorder, self-harming, Post-traumatic Stress Disorder

SAMH can provide further information, guidance and training on workplace mental health. To find out more, visit [www.samh.org.uk](http://www.samh.org.uk) or contact us on 0141 530 1000.

bank associate telephone advisor security guard  
transport manager civil servant administrator release  
support assistant fitter social worker bartender care  
assistant school transport assistant team leader  
administrator retail manager police officer call  
centre operator store worker painter and decorator

### SAMH

SAMH is the Scottish Association for Mental Health, a charity working across Scotland. Every year, we provide over a million hours of support to people who need our help. Every week, we work with around 3,000 individuals in over 80 services. Every day, we campaign for better mental health for the people of Scotland.

To find out about making a donation, volunteering or training your staff in managing mental health at work, visit [www.samh.org.uk](http://www.samh.org.uk) or call 0800 917 34 66.

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