



**MEDNET GROUP**

**WORLD MENTAL HEALTH DAY 2019:**

# Employment and Mental Illness

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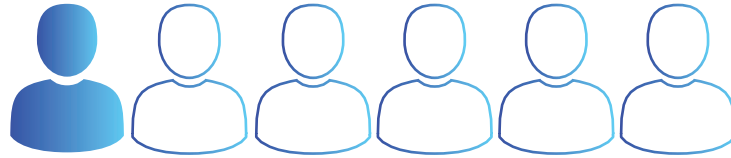
NAVIGATING THE WORLD OF WORK

THE WORLD HEALTH ORGANIZATION DESCRIBE MENTAL HEALTH AS:

“ A state of well-being in which every individual realises his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community and thus mental health cannot be defined simply as the absence of a mental illness.”

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The NHS estimates that one in six adults in the UK have a common mental health disorder (such as depression or anxiety), with factors such as living alone, being in poor physical health and being unemployed increasing risk.<sup>2</sup>



Mental illness is now the single greatest cause of disability in the UK, with an annual cost to the economy of £100 billion.<sup>3</sup> After minor illnesses such as coughs and colds, the largest causes of workplace absence are musculoskeletal conditions (such as a bad back) and mental health conditions, which accounted for **15.8 million days of work absence in 2016.**<sup>4</sup>

The Chartered Institute for Professional Development state that an increase in reported mental health conditions is strongly associated with a rise in stress-related absences, which may be ameliorated by focussing on well-being amongst staff.<sup>5</sup>

Currently, only around a quarter of people in the UK with a mental illness are receiving treatment,<sup>3</sup> meaning that workplace support may be crucial in helping people to maintain good mental health, as employment can provide a sense of identity, routine and structure, as well as a source of income.<sup>6</sup>

This year's World Mental Health Day theme is suicide prevention. Almost 800,000 people worldwide die due to suicide each year, equating to one person every 40 seconds.<sup>7</sup> Suicide affects people from all demographics, and is the leading cause of death in England and Wales for men between the ages of 5 and 49 and for women between the ages of 5 and 34.<sup>8</sup>

Being unemployed is associated with 2-3x increased relative risk of death by suicide, and although some of this may be accounted for by underlying mental illness,<sup>9</sup> employment is known to have an impact on the course and outcome of recovery for those with mental illness with unemployment presenting a barrier to recovery.<sup>10</sup>

### Case Study 1

## Barbara\*

**Looking for a job can be extremely demoralising.** When you apply for jobs and never hear feedback it can feel like you've wasted your time. I also think constant knockbacks and rejection lowers self-esteem and confidence. When I was jobhunting, I felt pressure from family mostly. Having finished my degree I was in a job that wasn't utilising my skills, and I felt pressure to find a job that related to my degree.

**“I think looking for a job can be extremely demoralising.”**

### Case Study 2

## Sarah\*

Having been made redundant while I was pregnant, I decided to use the opportunity to get my degree, so when I started looking for work it was after quite a long break and I was very anxious about it. I was under pressure to find work for financial reasons, but my experience at the Jobcentre was very demoralising and there was no consideration made for my mental health issues. I eventually found support through Leeds Mind and was given a lot of reassurance and put in touch with Attigo, a social enterprise employing people with mental health issues.

It is widely acknowledged that finding employment can positively impact mental health and well-being, and may even have a role in facilitating recovery; the vast majority of people with serious mental illness want to find work,<sup>11-13</sup> however, both unemployment and underemployment are high amongst those with mental illness, leaving individuals vulnerable to social isolation and economic hardship.<sup>14</sup>

People with mental illness face many barriers to finding employment, such as factors specific to their illness (eg. social anxiety), stigma and discrimination amongst employers, a lack of relevant skills or qualifications, and failure of employers to sufficiently implement government recommendations on employing those with disabilities.<sup>15</sup>

Amongst those with mental illness who are seeking employment, studies have shown that there is an expectation of discrimination or unfair treatment. Individuals believe that they would not be hired if they were to disclose their condition, would be treated unfairly in the workplace, would lose credibility with colleagues or employers, be the subject of workplace gossip or be rejected and ostracised by peers and importantly, that they are not adequately protected against discrimination by equality legislation.

### Case Study 3

## Jessica\*

When applying for a job, the difficulty for me has been being afraid to ask for help or information to ensure I get it right, because I end up requiring help from someone else as my anxiety kicks in and I become quite stressed. I find online personality tests confusing, intimidating and off-putting because they aren't basing the job on you as a person, but on a five-minute test which you can easily overthink. You can feel pressured to hide your mental health issues because they may cause you to be discriminated against. Job applications don't affect my mental health unless I feel I've been judged unfairly or wrongly. If I'm not given a reason why I've been unsuccessful in my application, it sets off my anxiety and paranoia. Interviewers haven't asked about my mental health in the past, although I have been asked if I was active when applying for manual jobs.

I think that speaking to a human being can ease the stress of an application, as using automated online tools can make anyone feel like they will not be understood.

My main issue has always been embarrassment; feeling I will be judged when my depression is active. Forcing myself to attend an interview and knowing that if I don't act happy, bouncy and confident, they will believe I'm disinterested or incapable, which isn't the case at all, but sometimes **depression is difficult to fight, and forcing enthusiasm sometimes feels like pushing a rock through a brick wall.**

**“Depression is difficult to fight, and forcing enthusiasm sometimes feels like pushing a rock through a brick wall.”**

#### Case Study 4

Andy\*

I was forced to take time out of my studies at University when I experienced a prolonged episode of severe depression. The hope was that I would have time to focus on my wellbeing, however the need for an income led to further issues with stress and anxiety. I had multiple negative experiences when applying for work through the JobCentre and felt as though I was being forced into any job available regardless of my health needs. The whole process felt quite impersonal and rushed. I was paranoid about the stigma attached to being on benefits and having a mental illness. I was convinced people were treating me differently and speaking down to me, despite my skills and abilities.

After some time and a lot of help from family, I was able to return to my studies and complete my degree, qualifying as a doctor in 2016. My health took another hit whilst working as a Junior Doctor in a busy hospital setting. It was a rewarding but extremely overwhelming role. I always felt a constant pressure to be available to patients and colleagues and began to neglect my own needs and health. I lost satisfaction in my role and again had to take significant periods of time away from work with symptoms of severe anxiety and depression. My colleagues were as supportive as they could be, but the environment was not conducive to me managing my illness. I began to receive CBT from a Psychiatrist who diagnosed me with PTSD. Recognising this diagnosis enabled me to come to terms with the difficulties I had been having.



Although being in work can have a positive impact on mental health, this is dependent on the nature of the work; low paid and insecure employment can have a negative effect and poses a health risk.<sup>17</sup>

When job hunting or returning to work, it is important to consider what sort of work would be suitable and what would help to support you in remaining employed.

**The Equality Act of 2010 states that it is the duty of an employer to offer reasonable adjustments to those with either mental or physical disabilities** that cause long-term impairments to their functioning.

Adjustments should aim to ensure that employees with disabilities are not disadvantaged, and that obstacles faced by the individual when working or applying for jobs are reduced or removed. This includes ensuring that company policies do not unfairly disadvantage people with disabilities in the workplace.<sup>18</sup>

For job applicants, employers must ensure that they make reasonable adjustments to the recruitment and hiring process if applicants have indicated that they have a disability, if the employer becomes aware of it, or if the candidate requests that the adjustments be made.<sup>18</sup>

Legally, an employer cannot ask questions related to health or disability before offering you a job unless:

- » They need this information to make reasonable adjustments to allow you to attend an interview
- » Certain disabilities may impair your ability to perform certain aspects of the role
- » They wish to record this information as part of their equality and diversity monitoring
- » They have a scheme to favour employment of people with disabilities
- » Specific disabilities are required for the role (such as requiring a deaf person to run a project for others who are deaf)<sup>19</sup>

Once employed, people can be supported in the workplace in a number of ways which all help to remove obstacles and improve the working environment in terms of well-being for all employees. Mind recommend a three-pronged approach to in-work support, including:<sup>7</sup>

1.

### **Promoting well-being for all employees**

Fostering a workplace culture in which people can openly discuss mental health and well-being can help in overcoming stigma. Offering home-working, flexible hours and social activities for staff helps to promote a good work/life balance for all.

2.

### **Addressing causes of work-related mental health difficulties**

Managers should be trained in recognising mental health difficulties, supporting staff to manage their workloads and conducting regular one-to-one meetings where employees are encouraged to raise any problems they have. As poor work environment and culture can cause stress and poor mental health, efforts should be made to improve the environment and provide or signpost sources of support, such as any Employee Assistance Programmes in effect.

3.

### **Support those with mental illness**

In addition to company policies on reasonable adjustments, establishing trust and communication is crucial. Personal experiences differ widely, and employees should feel they can communicate their needs in the workplace, which might include changes to working hours, flexible working, temporary or permanent changes to the job role, and increased managerial support in managing workload.

## Case Study 5

## Simon\*

I took leave from postgraduate study due to my mental health. I felt incapable of working, useless, lazy and worthless, reinforcing a cycle of depression and anxiety. I had no income and felt pressured to earn enough to get by. When family asked how it was going; the lies that I was applying for jobs combined with cultural assumptions that people are only worth as much as they produce impacted my confidence and self-esteem. I didn't know what work I could do, when I was unable to start anything remotely productive. This worsened my chronic avoidance.

A few months later **I received an ADHD diagnosis which put my entire life into context;** racing and chaotic thoughts, difficulties with education and work, motivation and focus. Self-understanding, and treatment totally changed my perspective, but the idea of telling an employer I had ADHD filled me with dread.

Stigma originates from ignorance about ADHD and the difficulties it causes with motivation, staying focused and calm. Many people label those behaviours as lazy, or as personal failures, without understanding the impact of lower dopamine and differences in brain structure. I was extremely lucky to find a job with Attigo, whose goal is to employ people with lived experience of mental health difficulties. Fears of stigmatisation paralysed me when applying for other jobs, but their goal to employ inclusively turned that fear into excitement; I felt I could engage with employment and find ways to channel the positive aspects of my neurodivergence.

**“I received an ADHD diagnosis which put my entire life into context”**

\* Names changed to keep anonymity  
ADHD=Attention Deficit Hyperactivity Disorder

Case Study 5

Simon\*

A non-judgemental and open culture with an individualised approach is vital to accommodate people with mental health conditions. I've felt fortunate in finding employment with Attigo where this approach is actualised; my first meeting covered what reasonable adjustments may be helpful. These were small adjustments not unique to the needs of someone with ADHD; I need to take a walk every hour or two rather than sitting for extended periods, and for my hours to be somewhat flexible due to time management problems and attending therapy. I've also asked for instructions on tasks by email due to difficulties remembering spoken instructions. These small adjustments made a huge impact on reducing my anxiety and increasing my productivity, but this is the exception not the norm, and work needs to be done by employers to remove obstacles faced by people experiencing difficulties.

**"I was extremely lucky to find a job with Attigo, whose goal is to employ people with lived experience of mental health difficulties"**

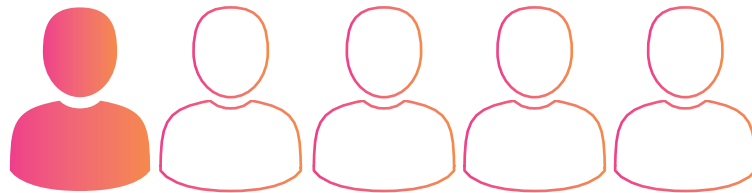
## Case Study 5

# Sophie\*

Some interviews were better than others. I definitely felt misunderstood at times if people struggled to understand why I had given up a career in medicine. I didn't want to get into my mental health struggles but had to find a way to explain my decisions and to express the support I might need in fitting into a new role. The application process here at Attigo was really positive. Following my initial submission of a CV and cover letter I received a friendly email from one of the Attigo staff members inviting me to take part in a telephone interview. This was a relaxed conversation, which gave me good insight into the role. My face-to-face interview was also very relaxed, and I was made to feel welcome and at ease. I felt like I could be myself. I was encouraged by the friendly environment and the enthusiasm of those who interviewed me. One thing which really helped to ease my anxiety was that I was kept informed at all stages. I was informed of my success the day after the interview, which was a great relief and settled the inevitable worries that I had.

Maintaining strong communication with applicants is one way all employers can support those with mental health needs. In some cases, an employer might need to know up front about an applicant's health needs but their focus should always be on the attributes that individual has and this should be made clear in order to reassure and encourage. People perform at their best when they feel valued and respected, not limited to a diagnosis or disability.

For many reasons, employees may feel unable to articulate their mental health needs with colleagues and managers. Data gathered by the Time to Change campaign shows that fears about disclosure of a mental health condition are often greater than the level of actual discrimination, and therefore employers should endeavour not to reinforce these fears and should aim to lead by example, fostering an open and supportive environment where employees feel confident that they will be treated with respect and not negatively affected by disclosure.<sup>20</sup>



Mind have reported that one in five people would not be prepared to disclose difficulties with mental health to their manager due to the perception that they would be denied promotions or be first in line for redundancy. Where staff don't feel able to communicate their needs, undetected issues can easily develop into a more serious period of mental illness, resulting in work absence, or 'presenteeism'; coming to work and underperforming during periods off ill-health.<sup>21</sup>

Some of this perception of stigma can be ameliorated by clear company policies that state the organisation's stance on equal opportunities, such as statements in recruitment materials that indicate a commitment to promoting physical and mental well-being amongst staff.<sup>21</sup>

Open work cultures which encourage discussion and communication about mental health, offer training or talks on mental health and coping resources, take a proactive stance on ending workplace stigma, and organise volunteering and social activities can help employees to feel that they will be treated with sensitivity should they decide to disclose mental health difficulties.<sup>22</sup>

Ensure that employees are aware of what constitutes bullying or harassment in the workplace, such as asking personal questions about a person's illness, making unreasonable demands on an individual, making assumptions about a person's ability or sickness absence, or excluding them from social events, all of which may be examples of direct discrimination or even harassment.<sup>23</sup>

Most stigma surrounding mental illness comes from a place of ignorance about certain conditions. It is known that many employees do not disclose mental health conditions in the workplace, and it is therefore important that all staff and managers make attempts to avoid the use of stigmatising or belittling language related to mental illness and disability. This includes common jokes or turns of phrase, such as describing an angry person as 'psychotic' or a very tidy person as 'OCD'. These sorts of comments can make a person with mental illness feel that their condition isn't taken seriously, or that they are at fault for experiencing it.<sup>24</sup>

Make it clear in the workplace that the relationship between 'signals' of stigma, such as labels and assumptions, directly lead to societal stereotypes and exclusion which, in turn, leads to unfair treatment of people with mental illness.<sup>25</sup>

#### Case Study 4

Gary\*

Working with mental health issues can be tough, especially in a customer facing role. I am always thinking “what if I make a mistake? Will I have another panic attack?” I’ve had them at work when customers were impolite, which can be very intimidating. Several employers have offered me support so I know I don’t have to cope alone.

I think workplaces in general should have more mental health support. Employers need to understand the different needs of those with anxiety, depression, OCD and PTSD to name just a few. Not everyone will act the same just because they have the same mental illness.

**Employers should have procedures in place to deal with employees who make jokes and use slurs about mental health; it’s not funny and it can cause great pain and upset.**

Staff should be educated about the impact of offhand jokes. Workplaces that are unsupportive can be really distressing. Where I work now is known for being supportive, which helped me to be less anxious and more confident in accepting my illness. Previous employers haven’t been so welcoming and workplaces have been hostile which caused my mental health to worsen. I have had anxiety attacks at work, but my colleagues have supported me, allowing me to take time out to calm myself. With anxiety attacks, I don’t like to be touched, held or spoken to and my colleagues understand that, so they may stay with me for support without trying to hug me or talk about it. Knowing that colleagues are there, reminding me that everything is okay and that they understand what I need from them makes me feel reassured and comfortable.

**“Just being offered support is a wonderful relief, even if you don’t take them up on it, it’s nice to know it’s there.”**

\* Names changed to keep anonymity  
OCD=obsessive compulsive disorder;  
PTSD=post-traumatic stress disorder



Attigo

## Miranda Stead

**“It is extremely rewarding to see people gain confidence and fulfil their potential”**

The Mednet Group has been working on national and international projects in the field of mental health for over 10 years and it is something we are very passionate about. Therefore, when incorporating Attigo Social Enterprise just over two years ago, we felt that the social aim should reflect our passion about employing people who may struggle to find and retain employment as a result of long-term conditions, including mental illness. We aspire to offer flexibility, empathy and support to employees, empowering them to achieve purposeful and skilled employment in the life sciences sector. As an employer, it has meant that we are able to give opportunities to highly skilled individuals and in return have a loyal and diverse workforce. **It is extremely rewarding to see people gain confidence and fulfil their potential.**

## Working together to prevent suicide

### Case Study - Attigo

As a social enterprise, Attigo's social aim is to recruit people with long-term health conditions, including mental health conditions, which may otherwise make it difficult for them to gain or retain employment.

We have developed a well-being strategy in order to support the mental health of employees through multiple channels, based on the three-pronged approach recommended by Mind.

### Promoting well-being for staff

- » We ensure that accessible information is available to all members of staff regarding well-being, including signposting to self-help and support resources, managerial support, and the development of disorder-specific guidelines for both physical and psychological problems.
- » Promoting an open and relaxed workspace where mental health is discussed openly without stigma, as awareness reduces stigma.
- » Mental health awareness days and coffee mornings help us to keep an open dialogue between colleagues.
- » Flexible working hours help many employees to develop a healthy work/life balance and attend appointments such as psychotherapy.
- » Home-working is available and helps some people when they may be struggling to cope but feel able to continue their work.

## Case Study - Attigo

### Tackling the causes of work-related mental health difficulties

- » It is vital to have processes in place to discourage bullying, harassment and discrimination
- » Encourage employees to report such instances and discipline perpetrators in order to communicate a zero-tolerance approach to such behaviour
- » Training some staff members as mental health first aiders can be valuable in supporting staff mental health; as a channel for discussion of confidential issues, a source of non-judgemental support, and for signposting to external sources of support

### Support those with mental illness

- » At Attigo we use a Wellness Action Plan, where every employee develops a plan with their manager including reasonable adjustments they require, triggers for worsening symptoms and signs their manager can look out for that they are unwell

### **Mental Health First Aiders**

Mental Health First Aid England offer training in mental health skills and awareness, including training for employees to become mental health first aiders for their workplace.

#### **Those who attend mental health first aid training will learn to:**

- » Spot the early signs of a mental health issue
- » Feel confident in how to offer and provide initial help to a person experiencing a mental health issue
- » Preserve life where a person may be at risk of harm to themselves or others
- » Help stop mental illness from getting worse
- » Promote recovery of good mental health
- » Guide someone towards appropriate treatment and other sources of help
- » Understand the stigma that exists around mental health

### Getting support to find employment

In order to navigate the obstacles faced when seeking employment, people with mental health difficulties can seek support through organisations such as Leeds Mind.

Workplace Leeds, part of Leeds Mind, offer Employment Support and Job Retention Services for people with mental health difficulties in the IPS (Individual Placement and Support) model, in partnership with local voluntary and statutory sector organisations and Leeds City Council.<sup>27</sup>

Support is personalised to cater for individual needs and may include help with CV writing and interview skills, help with job searching and negotiation of reasonable adjustments in the workplace, as well as advice on maintaining well-being once employed.<sup>28</sup>

#### Helen Kemp - Leeds Mind CEO

At least one in six workers experience common mental health difficulties, including anxiety and depression. Research shows work is the biggest cause of stress in people's lives, more so than debt or financial problems. It's fantastic to see an increased awareness around workplace well-being across the country, and Leeds Mind is proud to be supporting this in West Yorkshire.

1. World Health Organization. *Social determinants of mental health*. Available from [http://www.who.int/mental\\_health/publications/gulbenkian\\_paper\\_social\\_determinants\\_of\\_mental\\_health/en/](http://www.who.int/mental_health/publications/gulbenkian_paper_social_determinants_of_mental_health/en/) [Accessed 2019 Oct].
2. McManus S et al. *Mental health and wellbeing in England: Adult Psychiatric Morbidity Survey 2014*. 2016. Leeds: NHS Digital.
3. NHS. *Five Year Forward View*. 2014. Available from <https://www.england.nhs.uk/wp-content/uploads/2014/10/5yfv-web.pdf> [Accessed 2019 Oct].
4. ONS. *Sickness absence in the UK labour market: 2016*. Available from <https://www.ons.gov.uk/employmentandlabourmarket/peopleinwork/labourproductivity/articles/sicknessabsenceinthelabourmarket/2016> [Accessed 2019 Oct].
5. CIPD. *Absence Management*. 2016. Available from [https://www.cipd.co.uk/Images/absence-management\\_2016\\_tcm18-16360.pdf](https://www.cipd.co.uk/Images/absence-management_2016_tcm18-16360.pdf) [Accessed 2019 Oct].
6. Mind (The National Association for Mental Health). *Workplace mental health*. 2016. Available from <https://www.mind.org.uk/information-support/tips-for-everyday-living/workplace-mental-health/#.XZySdKZKiUk> [Accessed 2019 Oct].
7. World Health Organization. *WHO: Suicide data*. Available from [http://www.who.int/mental\\_health/prevention/suicide/suicideprevent/en/](http://www.who.int/mental_health/prevention/suicide/suicideprevent/en/) [Accessed 2019 Oct].
8. Office for National Statistics. *Deaths registered in England and Wales (series DR)*. 2017.
9. Blakely T et al. *J Epidemiol Community Health*. 2003;57:594–600.
10. Evans-Lacko S et al. *PLOS ONE*. 2013;8(7):e69792.
11. Mind (National Association for Mental Health). *Transforming Employment and Back-to-Work Support for People with Mental Health Problems*. 2014. Available from [https://www.mind.org.uk/media/1690126/weve\\_got\\_work\\_to\\_do.pdf](https://www.mind.org.uk/media/1690126/weve_got_work_to_do.pdf) [Accessed 2019 Oct].
12. Modini M et al. *Australas Psychiatry Bull R Aust N Z Coll Psychiatr*. 2016;24(4):331–336.
13. Crowther RE et al. *BMJ*. 2001;322(7280):204–208.
14. Dunn EC et al. *Psychiatr Rehabil J*. 2008;32(1):59–62.
15. Ebuenyi, ID. *Barriers to and facilitators of employment for people with psychiatric disabilities in Africa: a scoping review: Global Health Action: Vol 11, No 1*. Available from <https://www.tandfonline.com/doi/full/10.1080/16549716.2018.1463658> [Accessed 2019 Oct].
16. Brohan, E. *Systematic review of beliefs, behaviours and influencing factors associated with disclosure of a mental health problem in the workplace | BMC Psychiatry | Full Text*. Available from <https://bmcpsy psychiatry.biomedcentral.com/articles/10.1186/1471-244X-12-11> [Accessed 2019 Oct].
17. Mental Health Foundation. *Fundamental Facts about mental health 2016*. 2016. Available from <https://www.mentalhealth.org.uk/publications/fundamental-facts-about-mental-health-2016> [Accessed 2019 Oct].
18. ACAS. *Reasonable adjustments in the workplace | Advice and guidance*. 2017. Available from <https://www.acas.org.uk/article/6074/Reasonable-adjustments-in-the-workplace> [Accessed 2019 Oct].
19. Rethink. *Work and mental illness*. Available from <https://www.rethink.org/advice-and-information/rights-restrictions/money-benefits-and-employment/work-and-mental-illness/> [Accessed 2019 Oct].
20. Time to Change, Corry P. *Stigma Shout Service user and carer experiences of stigma and discrimination*. 2008.
21. Mind (The National Association for Mental Health). *Managing and supporting mental health at work: disclosure tools for managers*. 2011.
22. Business in the Community. *Mental health toolkit for employers*. Public Health England; Available from [https://wellbeing.bitc.org.uk/sites/default/files/mental\\_health\\_toolkit\\_for\\_employers\\_-\\_small.pdf](https://wellbeing.bitc.org.uk/sites/default/files/mental_health_toolkit_for_employers_-_small.pdf) [Accessed 2019 Oct].
23. ACAS. *Disability discrimination: key points for the workplace*. 2017.
24. Time to Change. *Mind Your language!* 2019.
25. Corrigan P. *Clin Psychol Sci Pract*. 7:48–67.
26. MHFA. *Adult MHFA Manual*. MHFA England; 2016.
27. Mind (The National Association for Mental Health). *Employment Support*. 2019. Available from <https://www.leedsmind.org.uk/our-services/employment/employment-support-2/> [Accessed 2019 Oct].
28. Workplace Leeds. *Mental Health Employment & Community Support Directory*. 2019. Available from <https://www.leedsmind.org.uk/wp-content/uploads/2016/06/MHdirectory.pdf> [Accessed 2019 Oct].



**MEDNET GROUP**

With diversity and inclusion at its core,  
Mednet Group consists of Attigo CIC and Mednet Ltd.