

Will employers be able to overcome the stigma of mental ill-health at work?

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Anna's story



Meet Anna

- **Anna works for an organisation which helps people with alcohol and drug addiction, offering counselling and rehabilitation**
 - **Anna is excellent at her job and shows great empathy to her clients**
 - **Anna has a diagnosed mental health illness for which she has been taking medication for over a decade**
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- Decorative graphic at the bottom of the slide consisting of several overlapping, semi-transparent curved shapes in shades of blue and grey, creating a modern, abstract design.

Anna at work

- **Anna decided not to disclose her condition because she wanted to be judged on her work alone and not by any preconceptions**
 - **Anna has a colleague with the same medical condition who had chosen to tell her manager, but Anna has overheard this woman being referred to in a derogatory manner**
 - **Working with people with addictions is very emotionally demanding. Many of Anna's clients are ex-servicemen and many have criminal records. On being admitted to the centre, they would try and smuggle razors, alcohol, and drugs in with them**
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Anna's workplace culture



- **The prevailing ethos is of 'emotional isolation' rather than 'emotional resilience'**
- **Supervision is for staff is virtually non-existent**
- **A one-to-one with her manager involved "leaning out of the window for a quick chat" because there was no private space to speak**
- **Anna's workplace typical of many: communication often haphazard with little focus on 'people skills' when it comes to each other**



Anna's absence

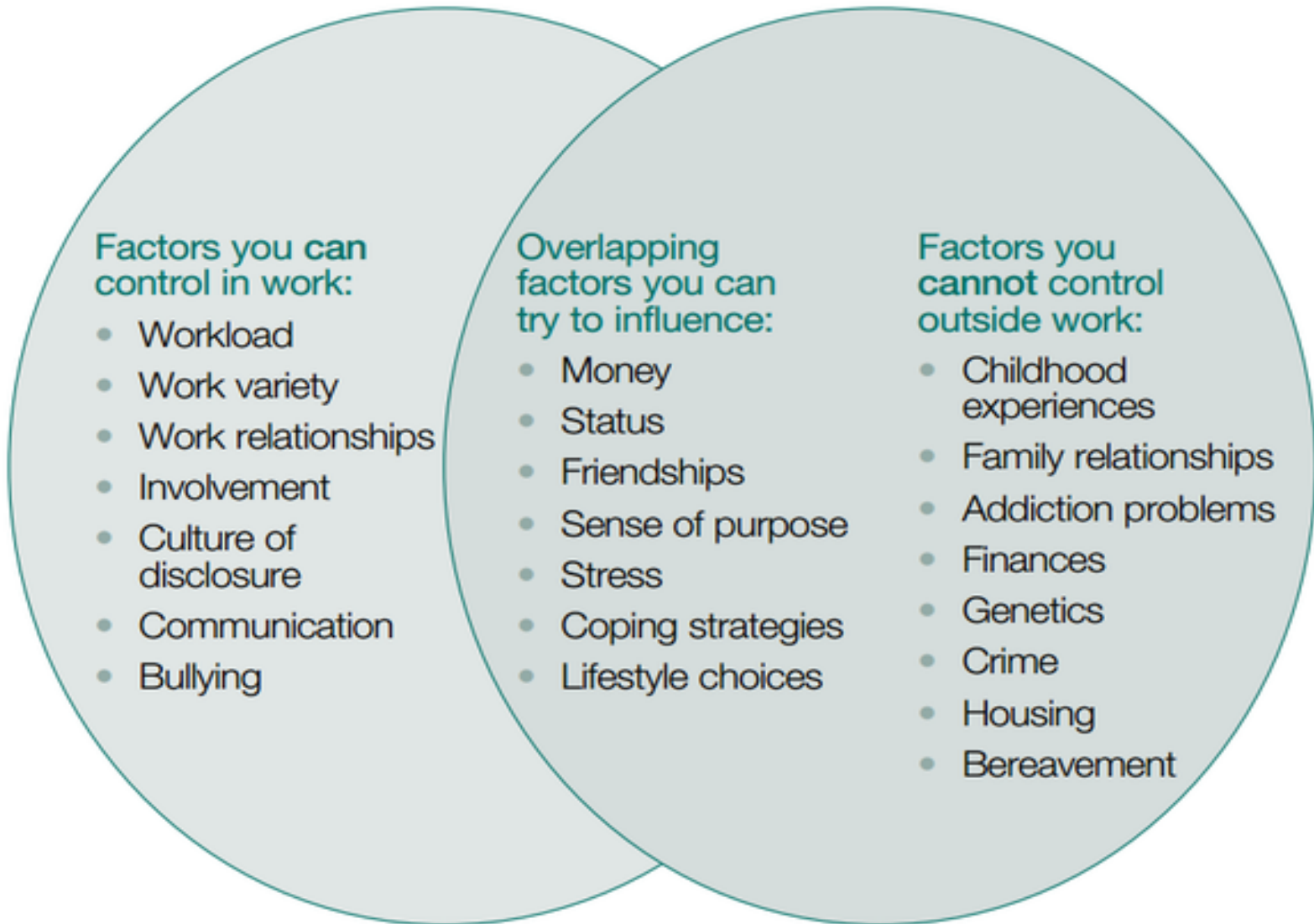
- **The huge decision to take time off: Anna loves her work but felt she could no longer cope without support. She had spent years getting into this position and felt very bad having to step away**
 - **The stress of being off: Anna had to review her medication and seek help. She was questioned on numerous occasions by the health insurer employed by her work. They did not seem to believe her 'story'**
 - **The trauma of coming back: after six months she came back part-time. She knew that people would know about her condition and was anxious how they would react to her.**
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What can we learn from Anna's experience?

- **From an organisational point of view we all need to reflect on the balance between:**
 - **Skills:** line manager competences, having difficult conversations
 - **Values:** culture, creating an environment that is conducive to disclosure
 - **Processes:** first day back Anna put her hand in a client's bag to check the contents and cut her hand on a razor blade (there was no fixed rule on H&S).



Mental wellbeing: what influence does a manager have?



Can we overcome the stigma?



- **Priorities:** what values do we want to prioritise as a society?
- **Balance:** alright having values but are they lived? Are they supported by the right skills and processes?
- **Secret is to be open and receptive** to the experience of others and be willing to listen and learn
- **Further advice:**
 - Acas booklet: www.acas.org.uk/mentalhealth
 - CIPD collection of thought pieces: www.cipd.co.uk/wellbeing
 - Acas helpline: 0300 123 1100

Thank you

Any questions?

