



Mental Health
Commission
of Canada

Commission de
la santé mentale
du Canada



Understanding mental health, mental illness, and their impacts in the workplace

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Executive Summary

Introduction

One in every five Canadians experiences a mental health problem or illness within a given year^[1]. This figure equates to 20% of the Canadian population, approximately 7.1 million individuals; or the population of the 15 largest Canadian cities combined. We also know one in two Canadians under the age of 40 will experience a mental health problem or illness by the time they turn 40 years of age^[1]. These numbers also have a direct impact on the workplace, as every week 500,000 Canadians are unable to work due to mental health problems or illnesses^[2].

These statistics were the genesis for asking the research question, “Who are the one in five Canadians in the workplace and what is their daily experience?” Morneau Shepell, in partnership with the Globe and Mail created The Mental Health Experience in Canada’s Workplaces survey, encouraging readers to fill in the survey through a series of thoughtful articles on workplace mental health co-authored by, among others, the President and CEO of the Mental Health Commission of Canada. The goal was to understand what insights we could provide to employers to support employees who experience mental health problems and illnesses in the workplace^[3].

Mental health is not a binary outcome (i.e., have issue or do not). It lies along a continuum, and can change depending on the challenges we face. Canadians manage their mental health on a daily basis as it moves back and forth between good mental health, strained mental health and mental illness.

This study reports on the average professional Canadian employee with a mental health problem or mental illness in the workplace experiences. It also explores the actions employers can take to better support employees in the workplace who are experiencing a mental health problem or illness, as well as what employers can do to prevent mental injuries at work.

^[1] Smetanin, P., Stiff, D., Briante, C., Adair, C., Ahmad, S. & Khan, M. (2011). *The life and economic impact of major mental illnesses in Canada: 2011 to 2041*. RiskAnalytica, on behalf of the Mental Health Commission of Canada.

^[1] Smetanin, P., Stiff, D., Briante, C., Adair, C., Ahmad, S. & Khan, M. (2011). *The life and economic impact of major mental illnesses in Canada: 2011 to 2041*. RiskAnalytica, on behalf of the Mental Health Commission of Canada.

^[2] <https://www.mentalhealthcommission.ca/English/focus-areas/mental-health-matters>

^[3] Howatt, W. (2017). The mental health experience in Canada’s workplaces: What is your experience?

<https://www.theglobeandmail.com/report-on-business/careers/workplace-award/exploring-employees-experience-with-mental-health-issues/article34237902/>

Study Population Overview

This study was conducted in Canada and was run over a six-month period from early 2017 to August 2017. The survey collected 1575 responses. Of the sample population, the majority identified as millennials or Generation Xers; 49% reported working for a large employer (501 or more), 52% resided in Ontario and the most predominant sector represented was healthcare (19%).

Study Findings

Survey respondents reported that the primary cause of their mental health problem or illness, was workplace stress (34%), with depression and anxiety being reported as the top two issues. These two issues made up a total of 69% of all reported mental health problems, with 37% attributed to depression, and 32% to anxiety.

Respondents reported a high level of concern regarding the potential impact of their mental health problem or illness on their career, work experience and job performance. Seventy-two per cent of employees surveyed reported they believed their mental health problem had or would negatively impact their careers. Similarly, 70% reported that their workplace experience was affected by their mental health, and 68% of employees reported that they could only maintain their optimal performance for less than 70% of their workday.

It was also found that mental health problems and illnesses were a primary reason for missing work, with 78% of respondents reporting they missed work due to mental health concerns, and of those missing work, 34% reported missing work for two or more months.

The core coping strategies respondents said they employed to manage their mental health problem or illness were family resources and professional treatment. Forty-five per cent of participants reported using family resources, and 82% professional treatment¹. Of those undergoing professional treatment, 50% reported using talk therapy, and 53% prescription medication (29% prescribed by a primary care physician and 24% by a psychiatrist).

In terms of support options in the workplace 71% of respondents reported their organization offered Employee and Family Assistance Programs (EFAP), with only 20% of respondents using EFAP².

In terms of other support options in the workplace, the survey found employers could curb risk by developing or maturing their current approach to supporting employee mental health. Specifically, organizations can implement and evaluate the effectiveness of initiatives such as campaigns to reduce the stigma related to mental illness, mental health policies, the adoption of a mental health strategy such as the National Standard of Canada for Psychological Health and Safety in the Workplace. This includes evolving accommodations policies and reviewing current attendance policies to ensure the flexibility needed to support mental health.

Much work remains to be done to support mental health in today's workplace. This is evidenced by the survey results where 66% of respondents reported their employers did not have any policies or programs to reduce stigma, 75% reported that to their knowledge their workplace did not have an overall workplace mental health strategy, and 90% reported there were no attendance policies that addressed mental health (e.g., effective disability management and safe return-to-work programs).

What can organizations do to effectively support mental health?

Employers are advised to shift how they support mental health and by broadening their concept of workplace mental health—to act proactively rather than solely reactively (e.g., send employees in need to EFAP). Mental health doesn't only affect the one in five employees who experience a problem, it is something that concerns five out of five employees. How an employer behaves and supports employees in the workplace can positively or negatively colour the perception of all employees when it comes to creating a culture where workers feel they can safely ask for support in times of need. For an employer to effectively reduce the risk of mental injuries to employees (e.g., bullying), as well as promote and support mental health, requires intention, planning, action and commitment.

Effective support often starts with an effective talent management process that focuses on the entire lifecycle of the employee from hiring (e.g., onboarding training) to retirement or turnover (e.g., exit interviews). A key is to support an employee's overall health, including their mental health.

To reduce and manage the prevalence and impact of mental health problems and illnesses in the workplace, it is critical to embed policies, processes and structures and to measure their impact on regular basis using a psychological health and safety management system (PHSMS). Better yet, employers can increase the attention they give to early identification and the modification of workplace stressors (e.g., bolstering employee resiliency and coping skills with training)³. Effective workplace strategies have a positive effect on employee mental health, both in terms of supporting those with existing problems and preventing the onset of new challenges⁴.

To develop a sustainable and effective strategy that supports employee mental health in the workplace, a solution that is founded on continuous improvement and a joint responsibility model is imperative.

Below highlights some key considerations to actively address mental health in the workplace:

- ***Sustained, visible leadership:*** Buy-in from senior leadership is about being fully engaged, this includes role-modelling, supporting mental health as a priority and active participation in initiatives.
- ***If you can't observe it, define it or measure it; you are guessing:*** We recommend organizations start by capturing a baseline of where they are today. This can help focus actions and understand the areas that can foster the greatest impact.
- ***Embed vs. Silo:*** Incorporate your mental health strategy into your organization's overall human resource strategy. For optimal impact it is beneficial to focus on the whole individual or total health (i.e., physical, mental, workplace, and life health).
- ***Create a caring culture:*** Employees need to feel safe at work and develop a trusting relationship with their employer. Creating a caring mental health culture begins by encouraging open conversations about mental health, reducing stigma, and educating employees and leaders about mental health.
- ***Support the employee-manager relationship:*** Training managers to understand and support employees with mental health problems and illnesses is both advantageous and proactive.

³ Memish, K., Martin, A., Bartlett, L., Dawkins, S., & Sanderson, K. (2017). Workplace mental health: An international review of guidelines. *Preventative Medicine, 100*, 213-222.

⁴ Modini, M., Joyce, S., Mykletun, A., Christensen, H., Bryant, R., Mitchell, P., & Harvey, S. (2016). The mental health benefits of employment: Results of a systematic meta-review. *Australasian Psychiatry, 24*(4), 331-336. doi:10.1177/1039856215618523

- ***Include mental health in your everyday conversations:*** Normalize mental health throughout your workforce. Supporting people to share their experiences can help break stigma and prevent negative attitudes and behaviours from flourishing.
- ***Adopt best practices:*** Use the [National Standard of Canada for Psychological Health and Safety in the Workplace](#) – the first of its kind in the world. It is a set of voluntary guidelines, tools and resources intended to guide organizations in promoting mental health and preventing psychological harm at work and can help your organization.

Part 1 – Understanding Mental Health

Mental Health – An Overview

What is mental health? The World Health Organization defines mental health as “a state of well-being where every individual realizes his or her own potential, can cope with the normal stresses of life, work productively, and is able to make a positive contribution to her or his community⁵.” The ability to achieve this state of well-being is dependent on one’s ability to both cope with external demand factors (e.g., works, finances, relationships) and to create an internal sense of well-being through learned and developed skills such as emotional intelligence⁶, locus of control⁷ and positive thinking⁸.

Today, one in every five Canadians experiences a mental health issue in a given year⁹. This figure equates to 20 per cent of the Canadian population, approximately 7.1 million individuals; or the population of the 15 largest Canadian cities combined. We also know one in two Canadians under the age of 40 will experience a mental health issue by the time they turn 40 years of age¹⁰. These numbers also have a direct impact on the workplace, as every day 500,000 Canadians are unable to work due to mental health problems or illnesses¹¹. This statistic was the genesis for asking the research question, “Who are the one in five?” The path Morneau Shepell and The Globe and Mail took to answer this question was using [The Mental Health Experience in Canada's Workplaces](#) survey.

As we thought about this question, we concluded that mental health is relevant to every employee. Therefore, employers are well-advised to address the mental health of all employees, not just the one in five. To effectively reduce the risk of mental injury (e.g., bullying) among employees and to promote and support their mental health requires intention, action and commitment on the part of the employer.

⁵ WHO (2014). Mental health: A state of well-being. *World Health Organization*. Retrieved from http://www.who.int/features/factfiles/mental_health/en/

⁶ Howatt, B. (2016). What’s your emotional IQ. <https://www.theglobeandmail.com/report-on-business/careers/career-advice/life-at-work/whats-your-emotional-iq/article28398892/>

⁷ Howatt, B. (2017). Tips to gain control of your daily decisions. <https://www.theglobeandmail.com/report-on-business/careers/workplace-award/tips-to-gain-control-of-your-daily-decisions/article36009196/>

⁸ Howatt, B. (2017). Rewire your brain to think positively. <https://www.theglobeandmail.com/report-on-business/careers/workplace-award/rewire-your-brain-to-think-positively/article36798533/>

⁹ Smetanin, P., Stiff, D., Briante, C., Adair, C., Ahmad, S. & Khan, M. (2011). *The life and economic impact of major mental illnesses in Canada: 2011 to 2041*. RiskAnalytica, on behalf of the Mental Health Commission of Canada.

¹⁰ Smetanin, P., Stiff, D., Briante, C., Adair, C., Ahmad, S. & Khan, M. (2011). *The life and economic impact of major mental illnesses in Canada: 2011 to 2041*. RiskAnalytica, on behalf of the Mental Health Commission of Canada.

¹¹ <https://www.mentalhealthcommission.ca/English/focus-areas/mental-health-matters>

Every employee can be impacted either positively or negatively by how an employer behaves and supports employees in the workplace.

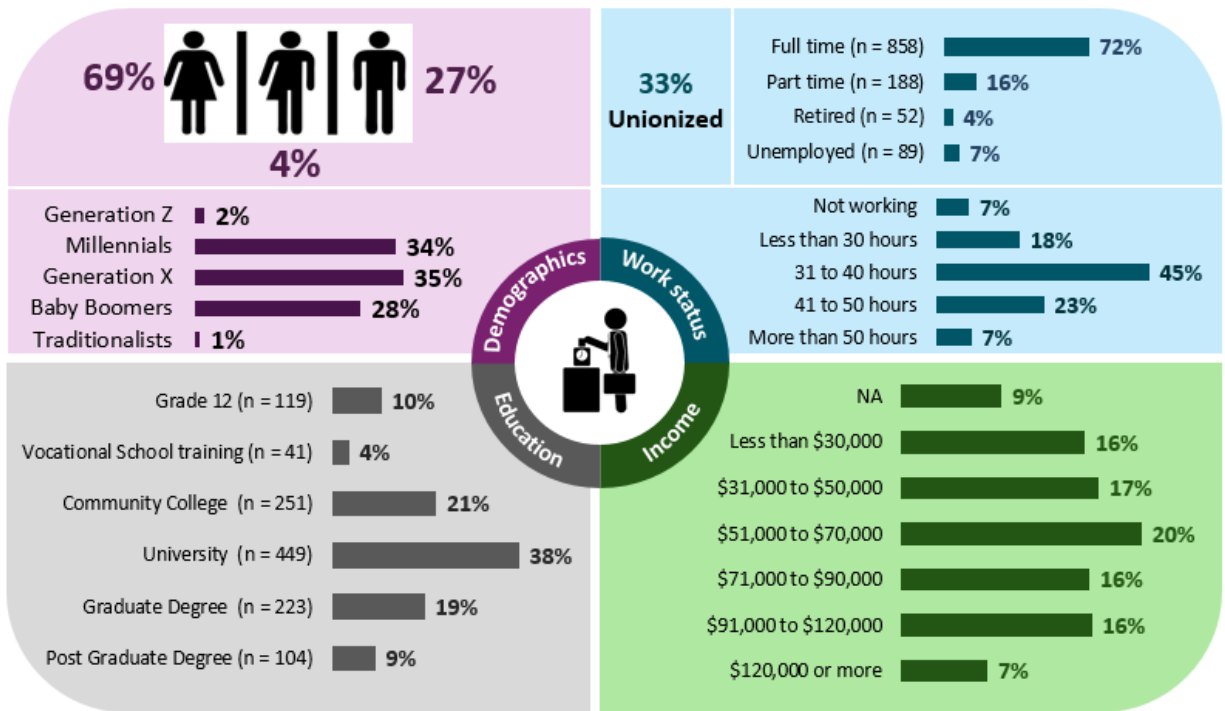
Through this study, we wanted to gain insights and inform employers about what they can do to help employees with mental health problems and illnesses thrive in the workplace¹².

This study was conducted in Canada and was run over a six-month period from early 2017 to August. Globe and Mail readers were invited to respond to the survey through articles by Dr. Bill Howatt and guest co-authors such as Louise Bradley, who in March 2017 wrote, “Why everyone needs to take care of their mental health”¹³. Each article invited employees who have experienced or were currently experiencing a mental health problem or illness, to complete the survey. The survey collected 1575 responses.

Of the sample population who participated in this study, 34% identified as Millennials (20 to 35), 35% as Generation X (36-50), and 28% as Baby Boomers (51-65). The remaining identified as Generation Z (15-19; 2%) and Traditionalists (66 plus; 1%). This coincides with the expected distribution of workers, with those of Generation Z, being generally below working age, Traditionalists generally beyond working age, and Baby Boomers, beginning to retire from the workforce (see below).

¹² Howatt, W. (2017). The mental health experience in Canada’s workplaces: What is your experience? <https://www.theglobeandmail.com/report-on-business/careers/workplace-award/exploring-employees-experience-with-mental-health-issues/article34237902/>

¹³ Howatt, B and Bradley, L. (2017). Why everyone needs to take care of their mental health. <https://www.theglobeandmail.com/report-on-business/careers/workplace-award/why-everyone-needs-to-take-care-of-their-mental-health/article34249717/>



The socioeconomic status of respondents was also examined. Survey participant salaries ranged evenly between less than \$30,000 and \$120,000 annually, with the salary range of \$51,000 to \$70,000 being the most prevalent, with 20 per cent of participants falling in this range.

The survey found that 33 per cent of employees reported two or more mental health concerns, with stress and trauma reported as the top two causes in the workplace¹⁴. The authors further reported that the mental illness reported by employees under 35 was anxiety whereas depression was more commonly reported by employees over 35. The National Institute of Mental Health defines depression as a serious mood disorder that causes severe symptoms affecting how an individual feels, thinks and handles day-to-day activities such as sleeping, eating and working¹⁵. Further, the American Psychological Association defines anxiety as a state characterized by feelings of tension and worry, with the addition of physical changes such as increased blood pressure¹⁶.

¹⁴ Howatt, B. and Adams, J. (2017). Survey finds employees wary to tell work about a mental health issue <https://www.theglobeandmail.com/report-on-business/careers/workplace-award/mental-health-piece-1/article35861106/>

¹⁵ NIH. (2016). Depression. *National institute of mental health*. Retrieved from <https://www.nimh.nih.gov/health/topics/depression/index.shtml>.

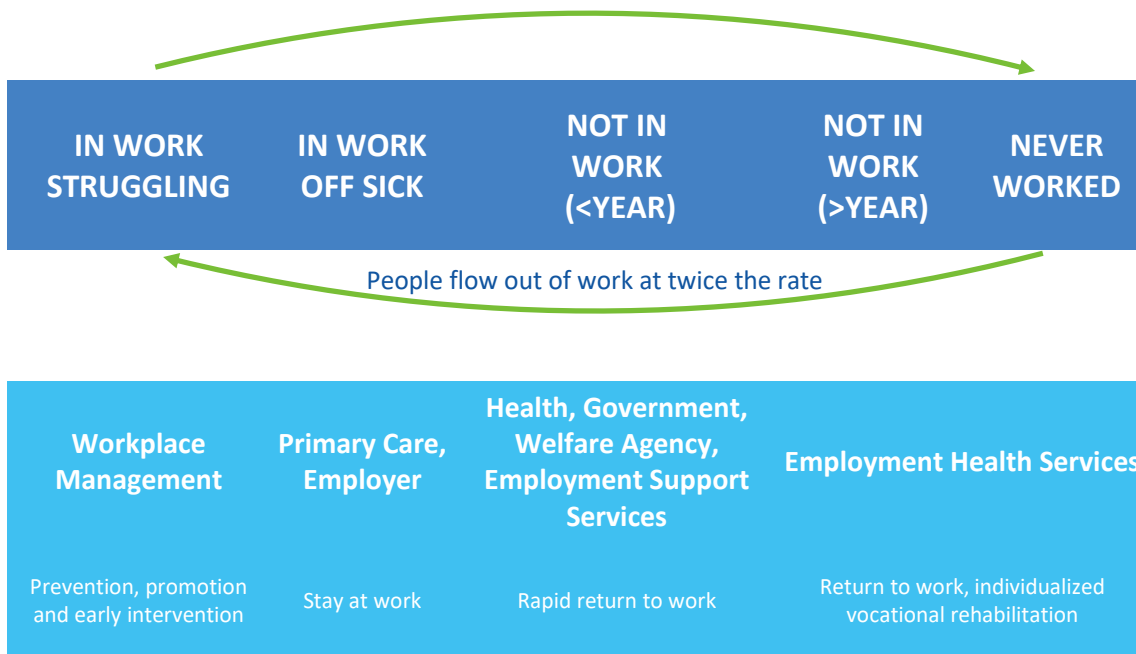
¹⁶ APA. (2017). Anxiety. *American Psychological Association*. Retrieved from <http://www.apa.org/topics/anxiety/>

Mental health problems and illnesses can impact anybody at any time. Therefore, focusing on the five in five is of overall benefit to organizations.

Mental Health in the Workplace

Mental health problems and illnesses in the workplace are among the top concerns for organizations of all sizes in Canada. Throughout their lifecycle employees move back and forth along the spectrum of mental health in the workplace. This spectrum ranges through seven categories:

- *Healthy in work*
- *In work struggling*
- *In work off sick*
- *Not in work (less than a year)*
- *Not in work (more than a year)*
- *Never worked.*

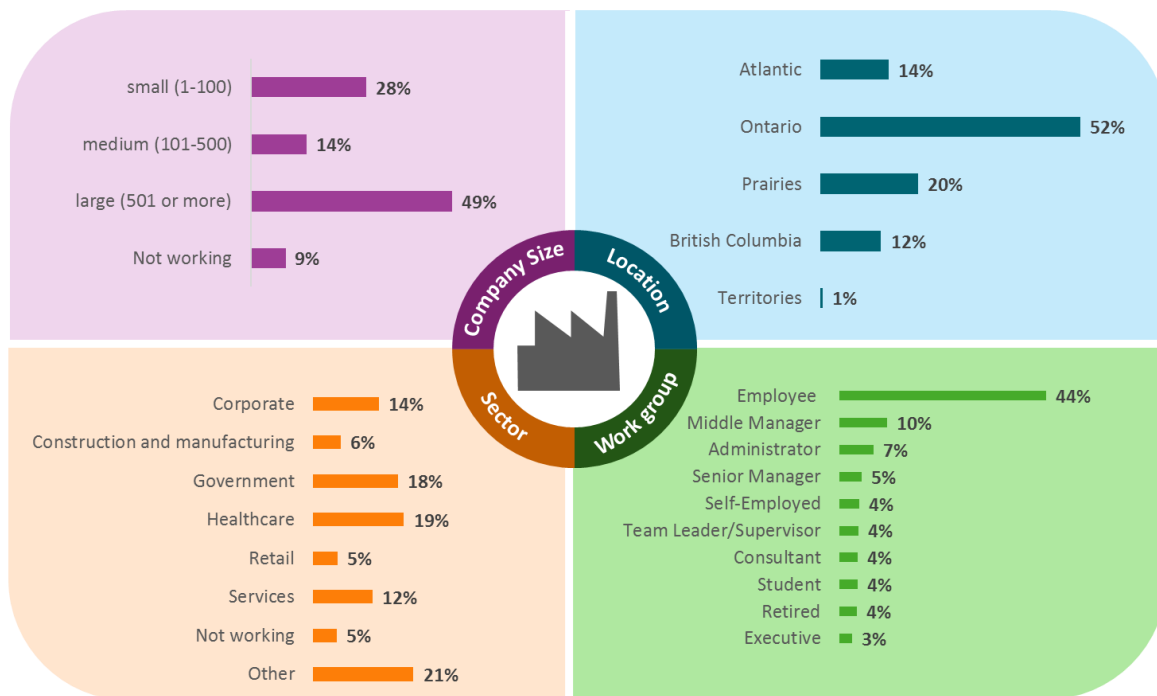


Understanding these stages enables employers to consider the mental health of the entire workforce and to develop a strategy that considers all types of mental health programming: *Preventative* (keeping

healthy employees healthy and at work), *Early intervention* (helping employees through mental health challenges while at work), and *Supportive* (bringing those off work back to work in a safe manner).

Employees in this study came from the following kinds of organizations: 49% identified as working for a large employer (501 or more employees), 14% for a medium employer (between 101 and 500 employees) and 28% for a small employer (1 to 100 employees); 9% reported they were not currently working. Additionally, most respondents (44%) self-identified as belonging to the employee workgroup (see diagram X). The most sector most predominate among respondents was healthcare (19%) and most employees resided in Ontario (52%).

However, the survey did collect a wide range of information from multiple sectors (25), employee workgroups (14), and work locations (all territories and provinces had representation). This suggests that the data fairly represents most workforces and organizations across Canada. See below for a breakdown of the key groups.



Prevalence and impact of mental health issues in the workplace

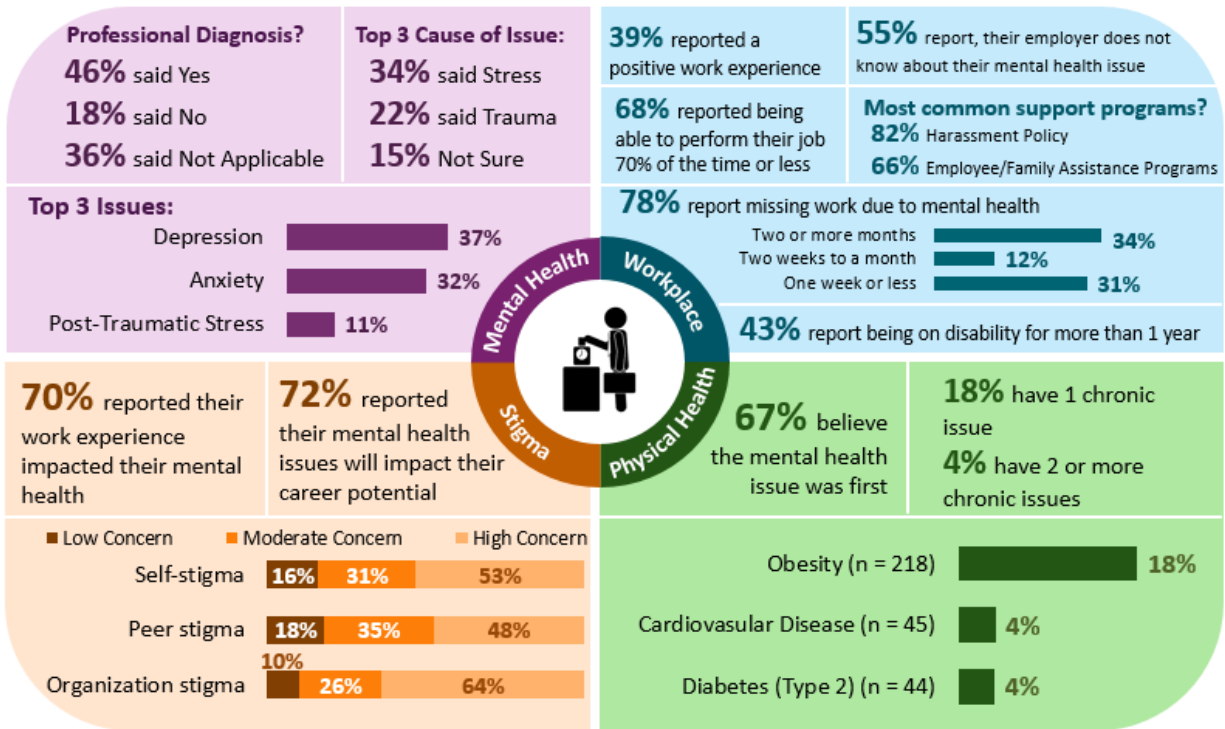
Memish et al. (2017) noted that 5% of working populations in high income countries experience severe mental health issues, and an additional 15% experience moderate mental illness. Less than ideal psychological working conditions or job stressors increase the risk of developing mental illnesses such as depression and anxiety. They also contribute to the development of workplace-specific instances of mental illness, such as anxiety and burnout¹⁷. These factors can often result in an increase in mental health-related disability claims.

The Mental Health Commission of Canada reports that 30% to 70% of all disability claims are attributed to mental illness¹⁸. [The Mental Health Experience in Canada's Workplaces](#) survey results mirror those found by Memish et al. (2017). The survey found the primary cause of mental health concerns in the workplace was workplace stress, with 34% of participants reporting this as the cause of their mental health problem or illness. Similarly, depression and anxiety were self-reported as the top two mental health issues in the workplace, encompassing 69% of the mental health problems and illnesses identified (with 37% attributed to depression, and 32% attributed to anxiety).

These figures establish a key trend that is evident in Canadian workplace populations; many Canadians with a mental health problem or mental illness feel it will impact their career. The survey found that 72% of employees surveyed reported their mental health problems and illnesses negatively impacted their careers.

¹⁷ Memish, K., Martin, A., Bartlett, L., Dawkins, S., & Sanderson, K. (2017). Workplace mental health: An international review of guidelines. *Preventative Medicine*, 100, 213-222.

¹⁸ Mental Health Commission of Canada. Case study research project – final report. <https://www.mentalhealthcommission.ca/English/csrp-backgrounder>



One key finding from Dr. Carolyn Dewa’s research on mental health is that people with a mental health disability were seven times more likely to take disability leave compared to those who had not taken time off¹⁹. The incidences of mental health concerns identified in this study suggest that the prevalence of mental health issues result in workplace-related issues such as lost productivity and increased costs such as sick leave and short-term disability. Sixty-eight percent of employees noted that they were only able to maintain their optimal work performance for less than 70% of the time because of their mental health issue²⁰; 70% reported that their workplace experience impacted their mental health; 78% reported missing work due to mental health concerns, and of those, 34% reported missing work for two or more months. Additionally, of employees missing more than two months, 25% reported going on disability and 43% reported missing over a year of work²¹. These outcomes can affect an organization in ways beyond absenteeism or disability costs.

¹⁹ Dewa, C. Innovative research to improve mental health in the workplace. <http://www.cihr-irsc.gc.ca/e/documents/Dewa-en.pdf>

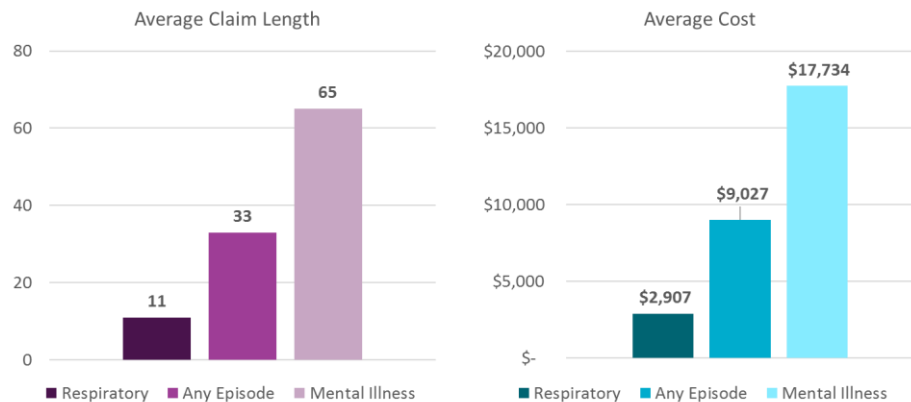
²⁰ Dewa C, Chau N, Dermer S. Examining the Comparative Incidence and Costs of Physical and Mental Health-Related Disabilities in an Employed Population. JCEM. Volume 52. Number 7. July 2010

Dr. Dewa found that mental illness-related claims were approximately two times longer in duration and more costly than the average of all other claim types.²² There may also be increased risk of

presenteeism, turnover, and poor team dynamics.

The results from our survey further support the notion that employee mental health is affected by workplace factors (i.e., external factors) and that

mental health can have a direct impact on the workplace experience of employees and their productivity.



How do employees cope?

Given the high prevalence of mental illness in the workplace, employee coping means were considered. Of those who participated in [The Mental Health Experience in Canada's Workplaces](#) survey, 59% were found to have a neutral outlook on mental health, while the remainder noted a positive (26%) or negative outlook (15%). This trend was mirrored by the coping strategies reported by employees. The observed results were evenly distributed, with 46% of respondents reporting low/moderate coping skills and 54% using high/optimal coping skills.

The level of coping skills was determined by asking employees what coping strategies they used to manage their mental illness. Negative coping methods included drinking, smoking and suicidal ideation. Positive coping mechanisms included seeking professional support and family supports. Each positive strategy employed and each negative strategy not employed scored one point. Each negative strategy employed and each positive strategy not employed scored one point. Total scores were used to determine if the respondent had low (0-2 points), moderate (2.1-3 points), high (3.1-4 points) or optimal (4.1-5 points) coping skills.

Of those who identified as having experienced mental illness, 29% of were using or had used alcohol to cope whereas 17% noted tobacco use²³.

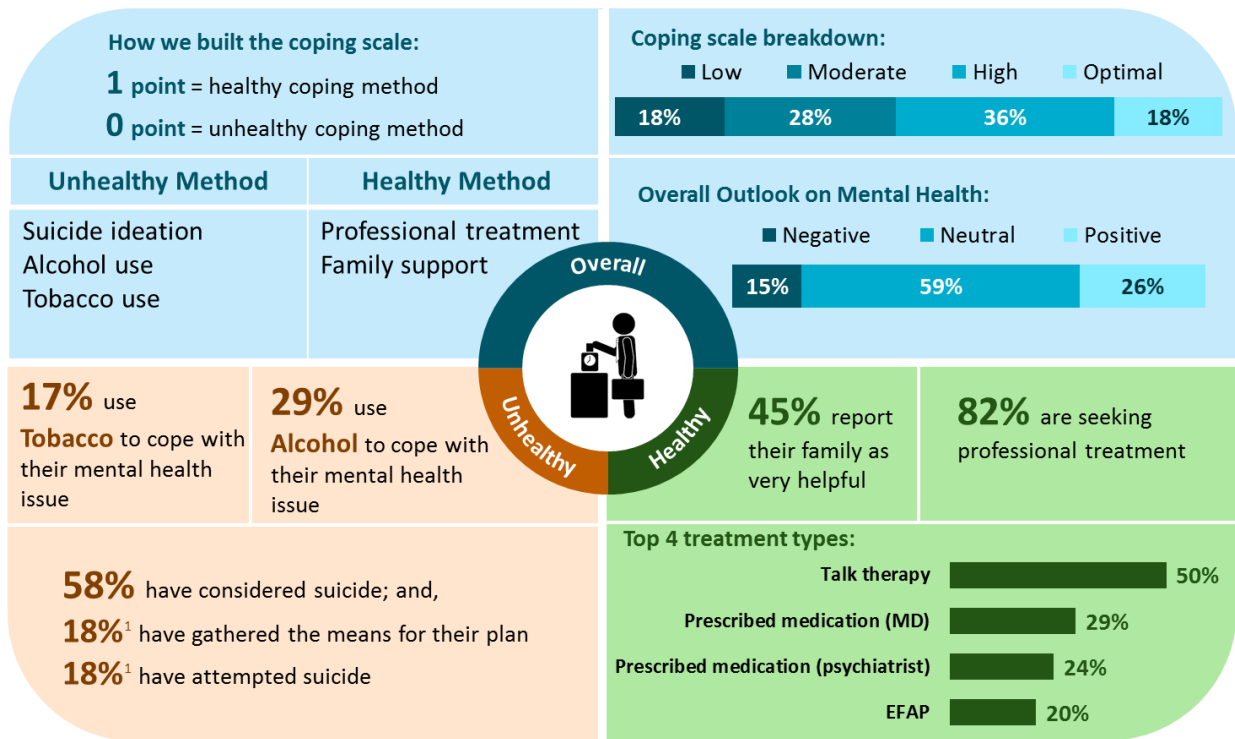
Notably, 58% of respondents reported they had considered suicide as an option for coping with their mental illness, of which 18% had gathered the means for carrying out their suicidal intention, and 18% had attempted²⁴.

From the perspective of healthy coping skills, 45% of participants who identified as having experienced mental illness made use of family resources and 82% made use of professional treatment²⁵. Of those accessing professional treatment, 50% made use of talk therapy, 53% used or had used prescription medication (29% prescribed by a physician and 24% by a psychiatrist), and 20% made use of an Employee and Family Assistance Program (EFAP) through their employer²⁶.

There were also generational differences noted in the participants of [The Mental Health Experience in Canada's Workplaces](#) survey. For those participants under the age of 35, 47% did not seek support, did not know how to access it, or did not realize it was available.

In contrast, 65% displayed high to optimal coping skills²⁷. Of those participants over the age of 35, 51% noted a high concern for self-stigma surrounding their mental illness, and 22% noted that they did not seek any form of support due to distrust²⁸. Further to this, 53% of participants over the age of 35 displayed high to optimal coping skills²⁹.

²³, ²¹, ^{23,24}, ²⁵ Howatt, W., & Adams, J. (2017). Survey finds employees wary to tell work about a mental health issue. <https://www.theglobeandmail.com/report-on-business/careers/workplace-award/mental-health-piece-1/article35861106/>



What measures can be taken against mental health problems and mental illnesses in the workplace?

The mental health strategy and programs used, or lack of, can predict how effectively an organization prevents and curbs mental health problems in the workplace. For example, organizations that adopt the National Standard of Canada for Psychological Health and Safety in the Workplace³⁰ provide a framework to mitigate mental health risk, as well as a management system that is focused on self-correction and improvement.

In 2017, Stevenson and Farmer conducted a comprehensive study of workplace mental health in the United Kingdom. They worked with over 200 public and private sector employers including regulators, professional bodies, health providers and trade unions, to capture their information and provide insight. Stevenson and Farmer found that only 40% of employers have policies or systems for mental health support and only 24% of managers have received mental health training. Additionally, only 11% of employees discussed recent mental health concerns with their direct supervisors, 50% of employees

³⁰ National Standard. Mental Health Commission of Canada. <https://www.mentalhealthcommission.ca/English/national-standard>

noted that they would not be willing to discuss their concerns, and only 20% of employers reported cases of employee disclosure of mental health concerns.

This data highlights a potential barrier to positive mental health in the workplace. There appears to be some unwillingness or uncertainty among employees with regards to accessing available resources. Employees are not confident that resources to support workplace mental health are in place nor that their employer offers sufficient mental health training to supervisory staff (i.e., direct managers) to support employee mental health.

These findings concur with the results of [The Mental Health Experience in Canada's Workplaces](#) survey—employees reported that while employers are offering some support for mental health problems and illnesses, there is room for improvement. Sixty-six percent of study participants reported that their employers did not have any policies or programs aimed at reducing the stigma around mental health problems and illnesses. Additionally, 75% noted that, to their knowledge, their employer did not have an overall workplace mental health strategy in place, and 90% noted that there were no attendance policies to address mental health. As well, of those employees whose workplace did offer a workplace mental health strategy, only 17% reported that it had a moderate to high impact on employee mental health.

This suggests that many Canadian organizations may be unsure or not know how to build an effective mental health strategy or perhaps where to start. The same trend was seen among individuals whose workplace had an attendance policy that addressed mental health, with only 7% of those participating noting a moderate to high impact. Seventy-one per cent of employees surveyed noted that their workplace experience (including job stressors, work demand, and organizational culture) contributed significantly to their mental health problems.

It appears many employees perceive a gap in resources, both to prevent mental health problems and illnesses in the workplace and to support the workers who develop them.

An exhaustive review of mental health in Canadian workplaces from 2007 to 2017, conducted by Samra (2017) found that 65% of key informant respondents noted that employees with mental health problems have been treated better in the workplace since 2007. Her research also found that approximately 75% of respondents perceived that attitudes towards workplace mental health have also improved during this time period. Samra's research also found that this improvement is echoed from

the standpoint of policy and management. In the past 10 years, there has been a shift towards providing managers and supervisors with the resources necessary to promote and support mental health in the workplace³¹. Samra (2017) also indicated that 45% of surveyed employees noted managers and supervisors within their organization actively facilitate and support workplace mental health through programs and policies.

Ultimately, the effectiveness of policies and guidelines in the workplace is determined by how easily they are implemented and sustained over the long term. It is worth noting that one global meta-analysis of guidelines available to support employers, rated the National Standard of Canada for Psychological Health and Safety in the Workplace (the Standard), highest both in quality and comprehensiveness of content³². Many of the guidelines, including the Standard, are built upon a set of core concepts designed to both improve and sustain mental health in the workplace. By bringing psychological safety to the forefront for employers in Canada, this standard puts the H in occupational health and safety (OHS).

The key elements underpinning psychological health and safety in the workplace are outlined in the following section³³.

^{18,19} Samra, J. (2017). The evolution of workplace mental health in Canada: Research report (2007-2017). *Great West Life*, 5-84.

²⁰ Memish, K., Martin, A., Bartlett, L., Dawkins, S., & Sanderson, K. (2017). Workplace mental health: An international review of guidelines. *Preventative Medicine*, 100, 213-222.

Part 2 – Recruitment to Retirement: An Ongoing Journey

Effective talent management focuses on the entire lifecycle of the employee from hiring (e.g., onboarding training) to retirement or turnover (e.g., exit interviews). The same can be said about an employee's health, including mental health. To effectively reduce and manage the prevalence and impact of mental health problems and mental illnesses in the workplace, it is key to embed policies, processes and structures in every stage of employment; specifically, early identification and modification of workplace stressors are critical³⁴. Effective workplace strategies have a positive impact on employee mental health, both in terms of supporting those with problems and preventing the onset of new challenges³⁵. Employee mental health in the workplace is best supported using a solution built around continuous improvement and a joint responsibility model. This is imperative to the development of a sustainable and effective strategy that supports employee mental health in the workplace. The Standard promotes a plan – do – check – act (PDCA) continuous improvement model.

Continual Improvement

There is no pre-packaged solution or one-off program when it comes to shaping a positive workplace experience for all employees. It requires paying attention to mental health, identifying opportunities within workplace resources and organizational culture and effective risk management. It is a dynamic process of continual improvement, adjustment, and evaluation, built to accommodate the evolving needs of an organization and its employees.

The concept of building an overarching strategy focused on continual improvement may seem difficult, but it can be as simple as adopting a total health framework³⁶ to uncover the problems and business case for mental health. The framework can help an organization establish a baseline on workplace metrics. The framework also helps organizations develop a strategy in line with an organization's

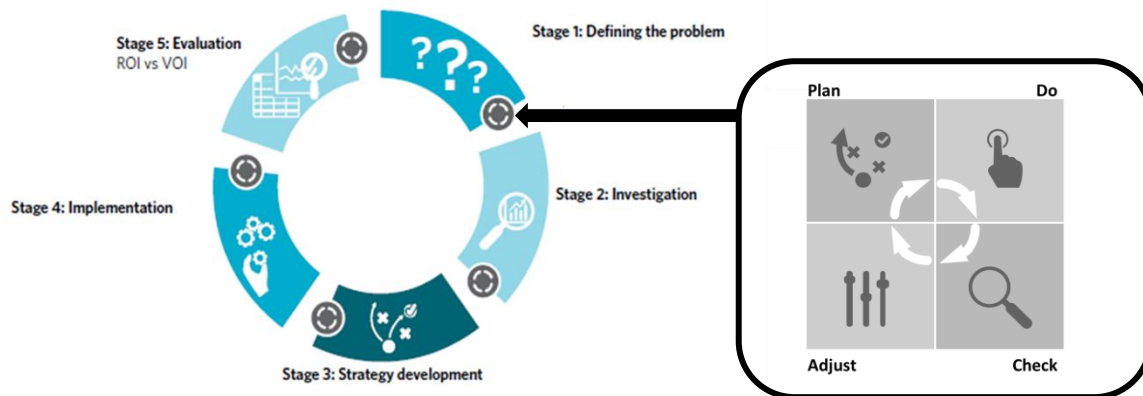
³⁴ Memish, K., Martin, A., Bartlett, L., Dawkins, S., & Sanderson, K. (2017). Workplace mental health: An international review of guidelines. *Preventative Medicine*, *100*, 213-222.

³⁵ Modini, M., Joyce, S., Mykletun, A., Christensen, H., Bryant, R., Mitchell, P., & Harvey, S. (2016). The mental health benefits of employment: Results of a systematic meta-review. *Australasian Psychiatry*, *24*(4), 331-336. doi:10.1177/1039856215618523

³⁶ Howatt, W. Total health framework (2016). <https://www.morneaushepell.com/ca-en/insights/total-health-framework-white-paper>

readiness, identify the programs, policies and procedures needed, and determine how to monitor progress, evaluate outcomes, and adjust the plan prior to reimplementation.

The total health framework uses PDCA cycles. It also provides organizations with a step-by-step framework to adapt or adopt best practices and principles from the Standard. It is intended to provide systematic guidelines for Canadian employers to enable them to develop and continuously improve work environments to make them psychologically safe and healthy for employees³⁷.



The PDCA continuous improvement framework helps decision makers identify conformity gaps in a given policy or program. By implementing strategies that are proactive (e.g., support pre-illness), supportive (e.g., support during illness), and reactive (e.g., support post-illness), organizations are better able to affect organizational culture and employee mental health throughout the mental health continuum³⁸.

Joint Responsibility

Further to the concept of continuous improvement, we encourage organizations to adopt a joint responsibility model. This means the onus for managing and maximizing employee mental health does not rest solely with the employer. No matter who you are or how you fit within the workplace structure—whether a union member, employee, board directors, human resources staff, OHS committee or executive team—you have a role in fostering a safe and supportive workplace. The development of a strong organizational culture and positive mental health outlook in the workplace is shared between employer and employee. Research suggests that the most effective means of

³⁷CAN/CSA-Z1003-13/BNQ 9700-803/2013, Psychological Health and Safety in the Workplace
<http://shop.csa.ca/en/canada/occupational-health-and-safety-management/canca-z1003-13bnq-9700-8032013/inv/z10032013>

³⁸ Samra, J. (2017). The evolution of workplace mental health in Canada: research report (2007-2017). *Great West Life*, 5-84.

prevention, management, and protection of employee mental health is through the implementation of programs that target both individual and organizational factors³⁹.

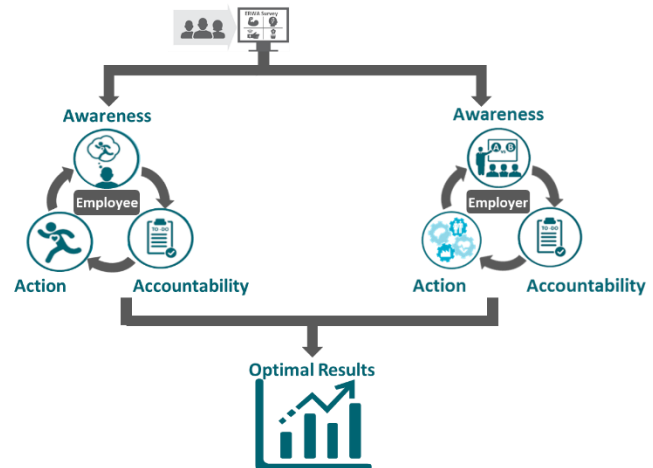
Three factors can help support this perspective and facilitate change for both employers and employees: *Awareness, Accountability, and Action*. These three factors of joint responsibility are also focused on continuous improvement cycles and evolve over time along with individuals and organizations.

The *awareness* phase of this model focuses on gaining insights into unknown factors. For organizations this may include a better understanding of their organizational culture, an evaluation of current resources for employee mental health, or capturing employee feedback. For employees it can mean identifying potential gaps in their mental health skills (e.g., coping skills), other lifestyle factors (e.g., physical activity), and impacts on their own mental health.

Developing awareness can help both parties be accountable for what is in their control. Within the *accountability* phase, each party's can then identify what is their respective control, and how the potential gaps can assimilate with the employee's life or organization's culture.

Accountability also means facilitating a conversation around mental health throughout the workplace, clearly defining what mental health means for your organization. These steps can help normalize mental health and reduce stigma. By facilitating the mental health conversation, both parties can actively promote positive mental health practices in the workplace, increase clarity around what is meant by mental health versus mental illness,

as well as incorporate actions that promote mental health within your organization. Thus, the accountability of the employer and the employee is vital to progression to the next stage of the cycle, as it lays the ground rules and sets the foundation for understanding and adopting positive mental health at work.

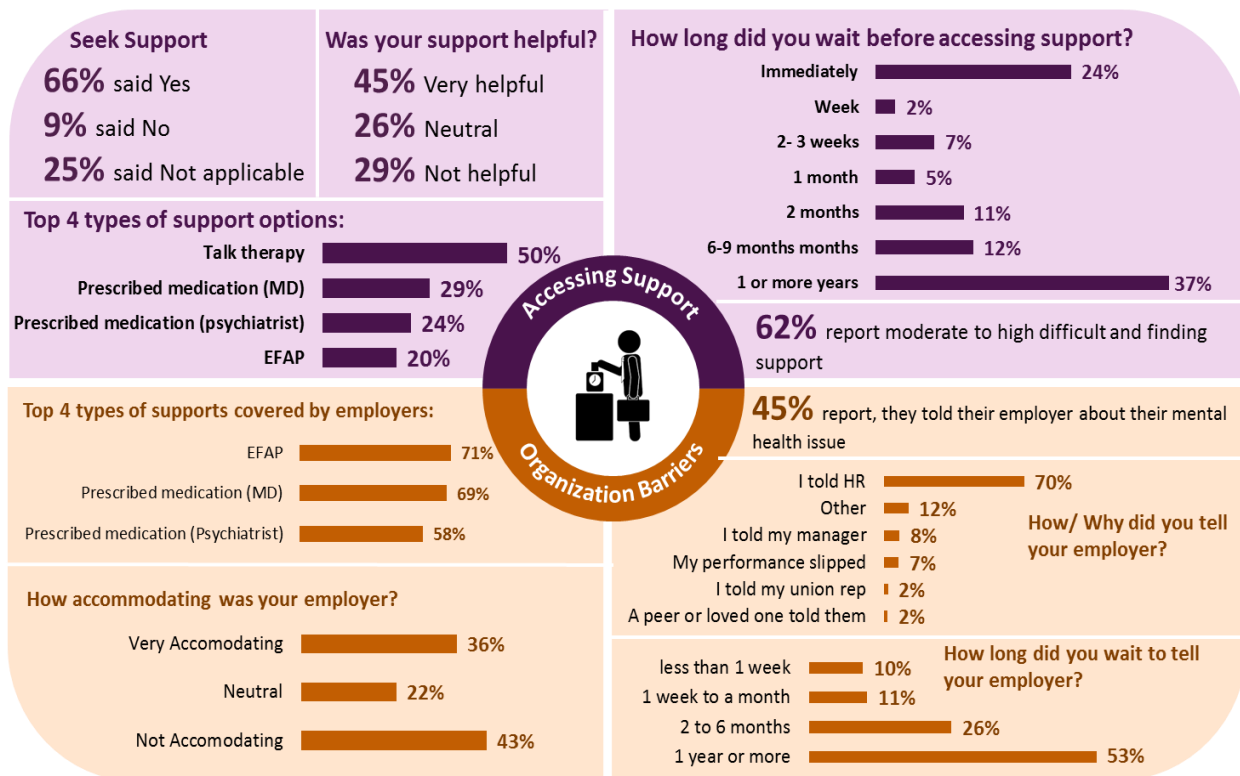


³⁹ Joyce, S., Modini, M., Christensen, H., Mykletun, A., Bryant, R., Mitchell, P., & Harvey, S. (2016). Workplace interventions for common mental disorders: A systematic meta-review. *Psychological Medicine*, 46(4), 683-697. doi:10.1017/S0033291715002408

The third phase in the cycle is *action*, the implementation of a plan or strategy by the organization and its individual employees (e.g., day-to-day behaviours, learning activities) that supports and improves mental health. The actions of both the employer and the employee drive organizational results in a complementary fashion.

[The Mental Health Experience in Canada's Workplaces](#) survey found that respondents who reported their organization had clearly-defined mental health policies and programs also reported positive mental health outcomes. For example, 50% of employees who reported their organization had a general workplace mental health strategy, reported it had a moderate to high impact on their mental health. A moderate to high impact on mental health was also reported by 62% of employees with employee-family assistance programs (EFAP), 63% of workers with harassment policies, and 70% of workers where attendance management addressed mental health.

In workplaces where employees reported their organization had policies and best practices regarding stigma, 93% of those workers reported these had had a moderate to high impact on their mental health.



Supporting employees with mental health concerns begins by understanding the key barriers. These can include a reluctance to ask employers for assistance due to a lack of openness and trust, whether an employee is ready to ask for help, challenges gaining access to the right supports, and gaps in mental health benefits coverage.

Bridging these gaps can help reduce the risk that an employee will develop a mental health problem or illness and allow them to better contribute to the workplace. Joint accountability provides an opportunity for both employees and employers to achieve maximum performance results. In turn, this can help each employee develop personal satisfaction, both within the workplace and in their daily life outside of work.

Shifting the Conversation

Given that 20% of the Canadian population experiences a mental illness in a given year⁴⁰, and the psychosocial in nature of many mental illnesses⁴¹, there are two major questions to explore. Who will be affected? And who is responsible for the solution?

The short answer to both questions is: everyone. Due to the number of external and internal factors that contribute to an individual's mental health, and the fact that mental health lies along a continuum, we all will likely experience a mental health challenge at some point. Effectively supporting mental health is not something that can be done through one program, or solely owned by an individual or an organization. Therefore, it is important for a strategy to be grounded in continuous improvement and joint responsibility.

A comprehensive strategy is something that takes time, effort and adequate resources to develop. If your organization is not yet ready, or in the early stages of its journey to optimal mental health, that is okay; there are some small steps you can take to start or continue to develop a more comprehensive approach. The following are examples of the kinds of actions that can help build the business case and/or start the mental health conversation in the workplace:

- ***Sustained, visible leadership***: Buy-in from senior leadership is one of the most integral aspects of developing a sustained and effective strategy. It is more than just signing the cheques or paying the bills. Senior leaders' commitment and agreement to be role models, communicate the priority of mental health within the organization, and regularly participate in initiatives are all elements that demonstrate senior leadership buy in and support. Employees evaluate action, not words.
- ***If you can't observe it, define it or measure it; you are guessing***: Mental health in the workplace is a behavioural issue. There are behaviours that can be implemented by both employer and employee to mitigate the negative impact of mental health problems or illnesses on employees and organizational results. Therefore, we recommend organizations start with

⁴⁰ Smetanin, P., Stiff, D., Briante, C., Adair, C., Ahmad, S. & Khan, M. (2011). *The life and economic impact of major mental illnesses in Canada: 2011 to 2041*. RiskAnalytica, on behalf of the Mental Health Commission of Canada.

capturing a baseline of where they are today. The Total Health Index (THI)⁴², developed by Dr. Bill Howatt, was created to measure employee perceptions (e.g., 13 psychological health and safety factors, respectful workplace, stress load) as well as the habits and skills that predict the average employee's total health. The benefit of this tool is both the employee and employer get a report they can action in support of a two-way accountability framework. We believe that both play a role in promoting and creating mental health in the workplace.

- **Embed vs. Silo:** A key part of developing a sustainable mental health strategy is incorporating it into the organization's human resource strategy. For optimal impact it is beneficial to focus on the whole individual or total health (i.e., physical, mental workplace, and life health) and not just mental health. This holistic approach can help foster joint responsibility and provide evidence for how health and the workplace are connected. As well, it can reduce stigma, as most employees can relate to physical (e.g., sleep) and financial health as a challenge, which if not optimal can result in stress that can negatively impact mental health. An employee's total health can impact their resiliency levels⁴³ and energy that can influence their overall perceived and experienced health, engagement and productivity, and in turn improve organizational effectiveness.
- **Create a caring culture:** To help employees feel comfortable accessing help early (i.e., before small issues turn into big ones), employees need to feel safe and develop trust in their employer. Culture is shaped by the collective beliefs and behaviours of an organization's workforce⁴⁴. Leaders create the tone for how committed the organization is to supporting people who experience a mental health challenge in the workplace. Creating a caring culture begins by encouraging open conversation on mental health, reducing stigma, and educating and informing employees and leaders about what mental health is and is not. It is our belief that mental health problems and illnesses are not a sign of weakness; but rather they can occur from a wide range of factors (e.g., stress buildup, life events). Mental health challenges however are often due to a potential gap in one's ability to cope with stress. Only through conversation and

⁴² Howatt, B. (2018). The 4 pillars of Total Health Index. <http://www.hrreporter.com/workplace-health-and-wellness/36015-the-4-pillars-of-the-total-health-index/>

⁴³ Howatt, B. (2018). Linking resiliency to health, engagement and productivity. <http://www.hrreporter.com/workplace-health-and-wellness/36536-linking-resiliency-to-health-engagement-and-product/>

⁴⁴ Howatt, B. (2017). How companies can shape workplace culture. <https://www.theglobeandmail.com/report-on-business/careers/leadership-lab/how-companies-can-shape-workplace-culture/article35282871/>

education can employees and leaders discover that non-visible issues like mental illness are real and begin to reduce stigma.

- **Support the employee-manager relationship:** There is no relationship at work more important than the employee-manager relationship. Most managers are chosen because of their technical, industry and operational skills. Training managers to understand and support employees with mental health problems and illnesses is both advantageous and proactive. When training managers, it can be helpful to provide insight on the difference between good stress, bad stress, mental health and mental illness, as well as the typical signs and symptoms of mental health problems and illnesses. Supporting managers in acquiring the knowledge and skills they need often begins by providing training that builds their competency in how to support employees experiencing stress or mental health problems, including addiction. This training can start by educating leaders on how to evaluate and improve their personal coping skills, how to influence employee coping skills, and defining the managers' role and what they can do to support employees who are struggling. The wrong time to prepare for a crisis is when in a crisis. Leaders who know what to do will be more confident to act to support employees, more likely understand their role with respect to duty to inquire, understand that their role is to manage performance, and have a keen awareness that building trusting relationships with employees is the foundation for being able to help them when they are in need.
- **Include mental health in your everyday conversations:** Normalize mental health throughout your workforce. Avoiding talking about mental health or the experience of those with a mental health problem or illness will only fuel stigma and the negative behaviours and attitudes towards those with mental illnesses. Most employees have a frame of reference of when it comes to physical health and feel comfortable talking about it. The same is not true for mental health. Open conversations through campaigns such as Not Myself Today⁴⁵, peer support programs, education, and internal Facebook chat pages to share stories and successes are things employers can do to crush stigma so people can feel safe chatting about their struggles. No employee needs to suffer alone; through conversations they can be empowered by knowing help is available.

⁴⁵ <http://www.notmyselftoday.ca/>

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