Promoting Mental Health at work: Outlook of next ENWHP initiative

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POLICY CONTEXT

► 2005 relaunch of the Lisbon Strategy on Growth and Jobs

- ▪ 'invest in people and modernise labour markets'
- ▪ improving the skills, employability and adaptability of the workforce

► *Community Strategy on Health and Safety at Work* for 2007–2012

- ▪ work-related stress and poor mental health leading to absenteeism and occupational disability
- ▪ making the promotion of mental health at the workplace a priority

POLICY CONTEXT

► The Commission White Paper "*Together for Health: A strategic approach for the EU 2008-2013*"

- ▪ emphasises the economic costs of mental disorders
- ▪ Community actions in the field of mental health and measures to promote the health of the workforce were announced in this document

► Framework Directive 89/391/EEC has led to Framework Agreements on "the prevention of stress at work" and "harassment and violence at work"

► 2008 Mental health pact

The Mental Health Pact

► Background briefing paper on the settings

► Mental health pact

► Conferences and events

What is mental health and how does it relate to the workplace?

Elements of mental health and wellbeing and mental illness

ENWHP

► Mental wellbeing

► Disturbed mood

► Non-psychotic disorders

► Psychotic disorders

What is mental health and how does it relate to the workplace?

► Workplace elements

  - Promoting wellbeing
  - Preventing mental disturbance/illness
  - Role in treatment/job retention
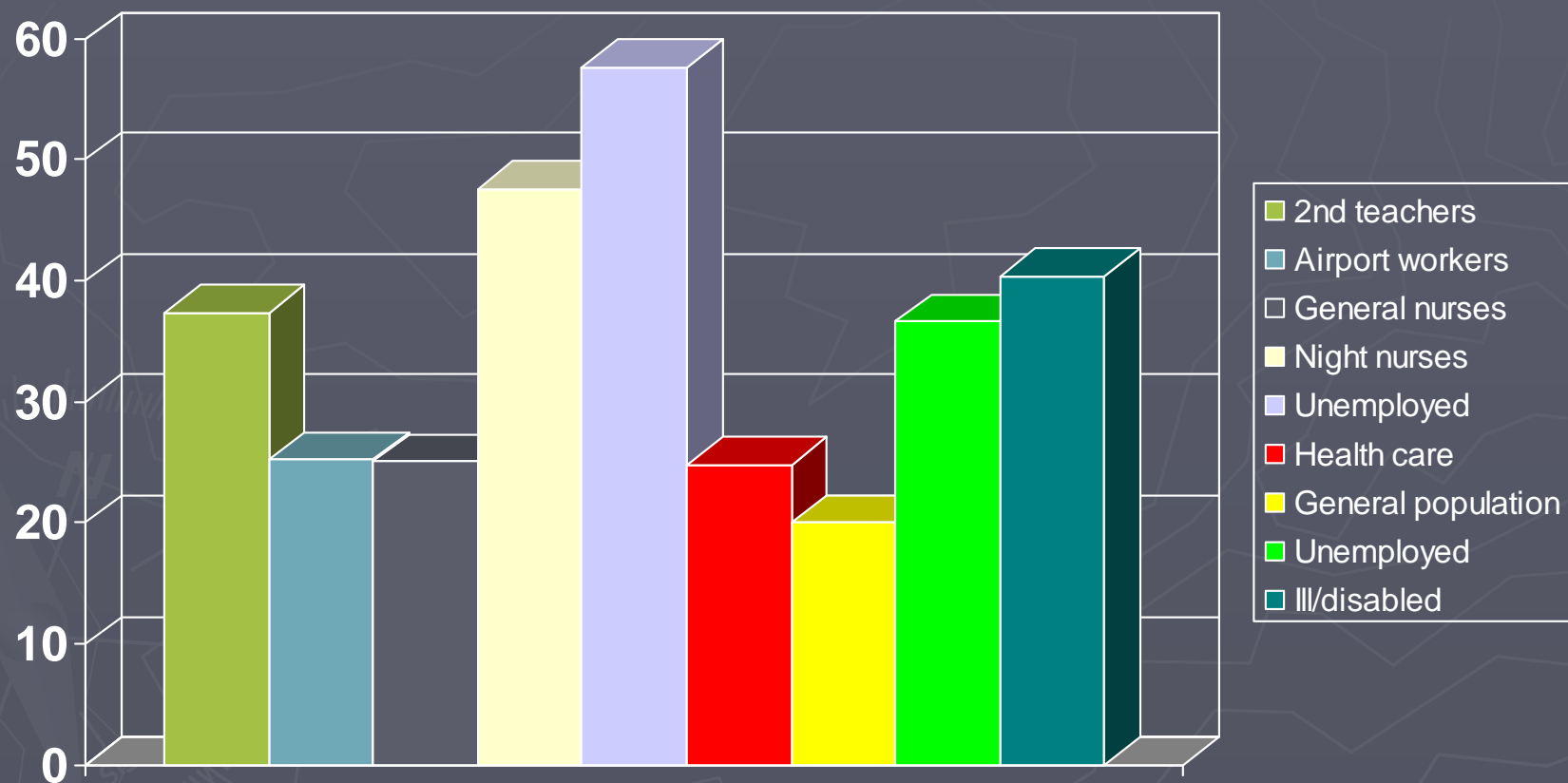 - Role in return to work

Some data on prevalence

Some data on prevalence

► 25% of citizens will have a mental heath problem during their lifetime

- In any one year:

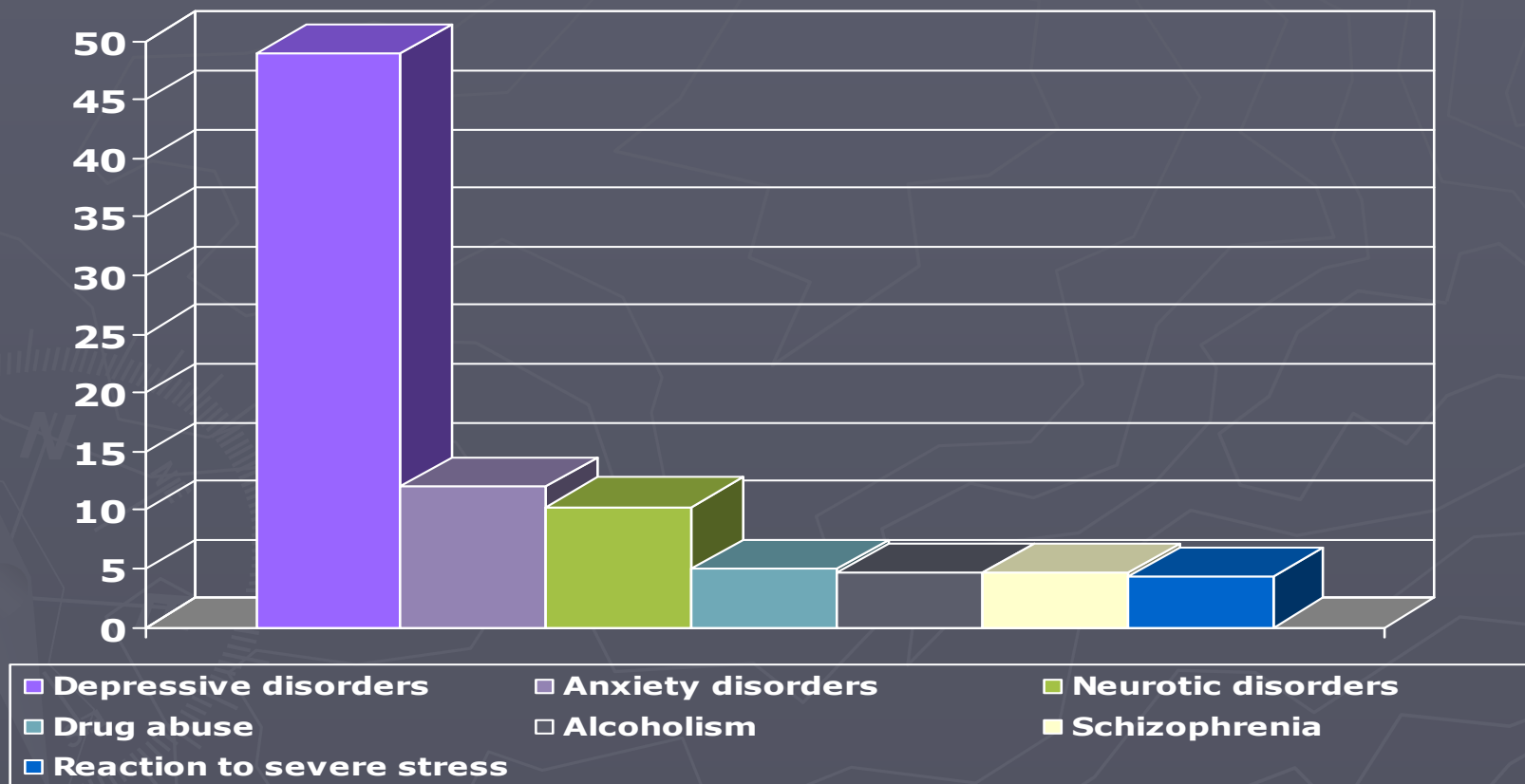 ► 9%experience depression

  ► 2.6% experience a psychotic disorder

Some data on prevalence

► Work factors may cause, influence or create vulnerability to mental heath problems

► Workplace Risk factors for mental health problems

  ▪ 'Traditional' sources of stress

  ▪ Emergent sources of stress

  ▪ Workplace toxins

► The excess risk of common mental health problems in workers with high job strain or poor effort-reward balance may be 80%
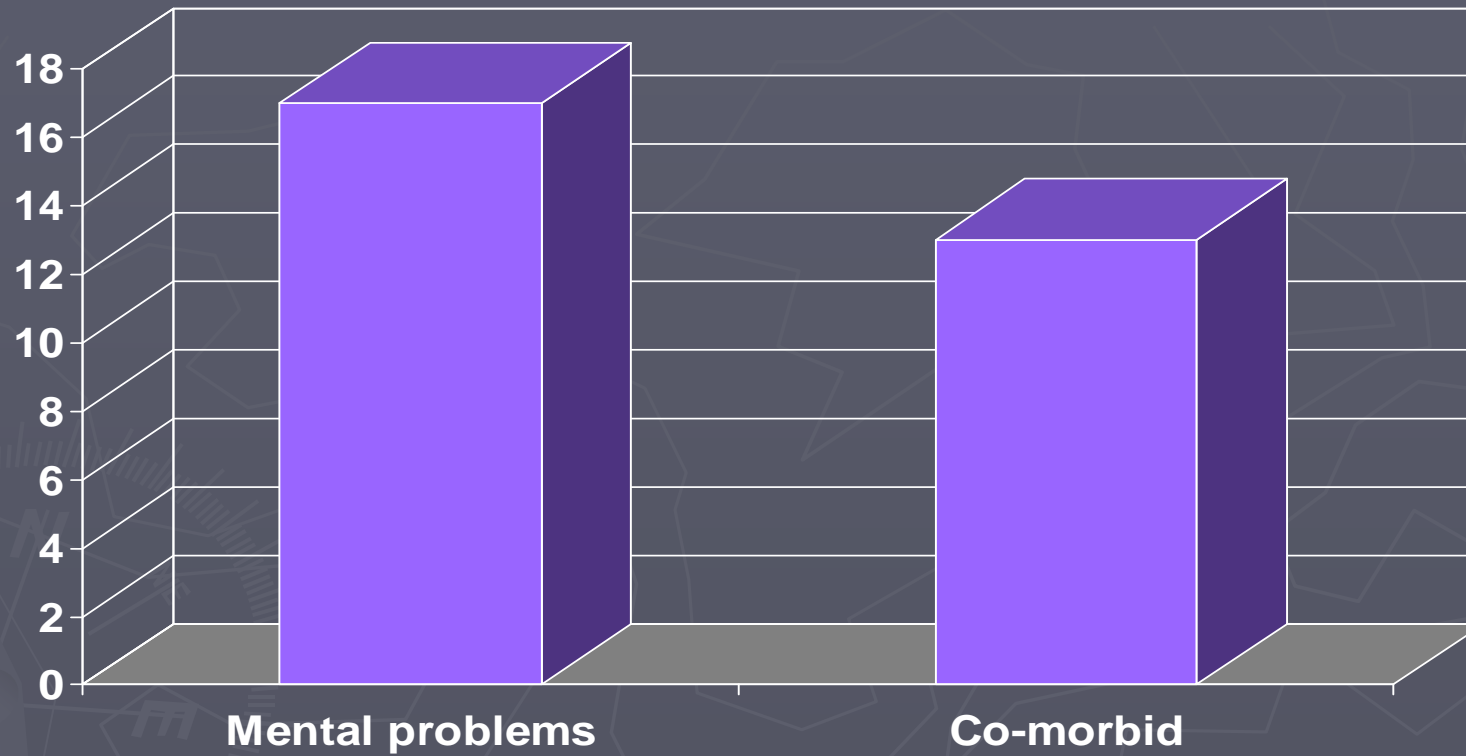
Psychological wellbeing in Irish populations

Legend:
- 2nd teachers
- Airport workers
- General nurses
- Night nurses
- Unemployed
- Health care
- General population
- Unemployed
- Ill/disabled

Mental Health Disorders and absence

Legend:
- Depressive disorders
- Anxiety disorders
- Neurotic disorders
- Drug abuse
- Alcoholism
- Schizophrenia
- Reaction to severe stress

Reason for absence

Background

► In UK: currently 9.6 % of the working population (i.e. 2.7 m) are claiming IB.

► 35 % of these (i.e. 945,000) are diagnosed with 'mental & behavioural disorders'. (DWP, 2002).

► Statistics indicate that about 25 % of employees have some kind of mental health problem in any year (DoH, 2001).

STRESS IMPACT

Disability diagnosis (NL)
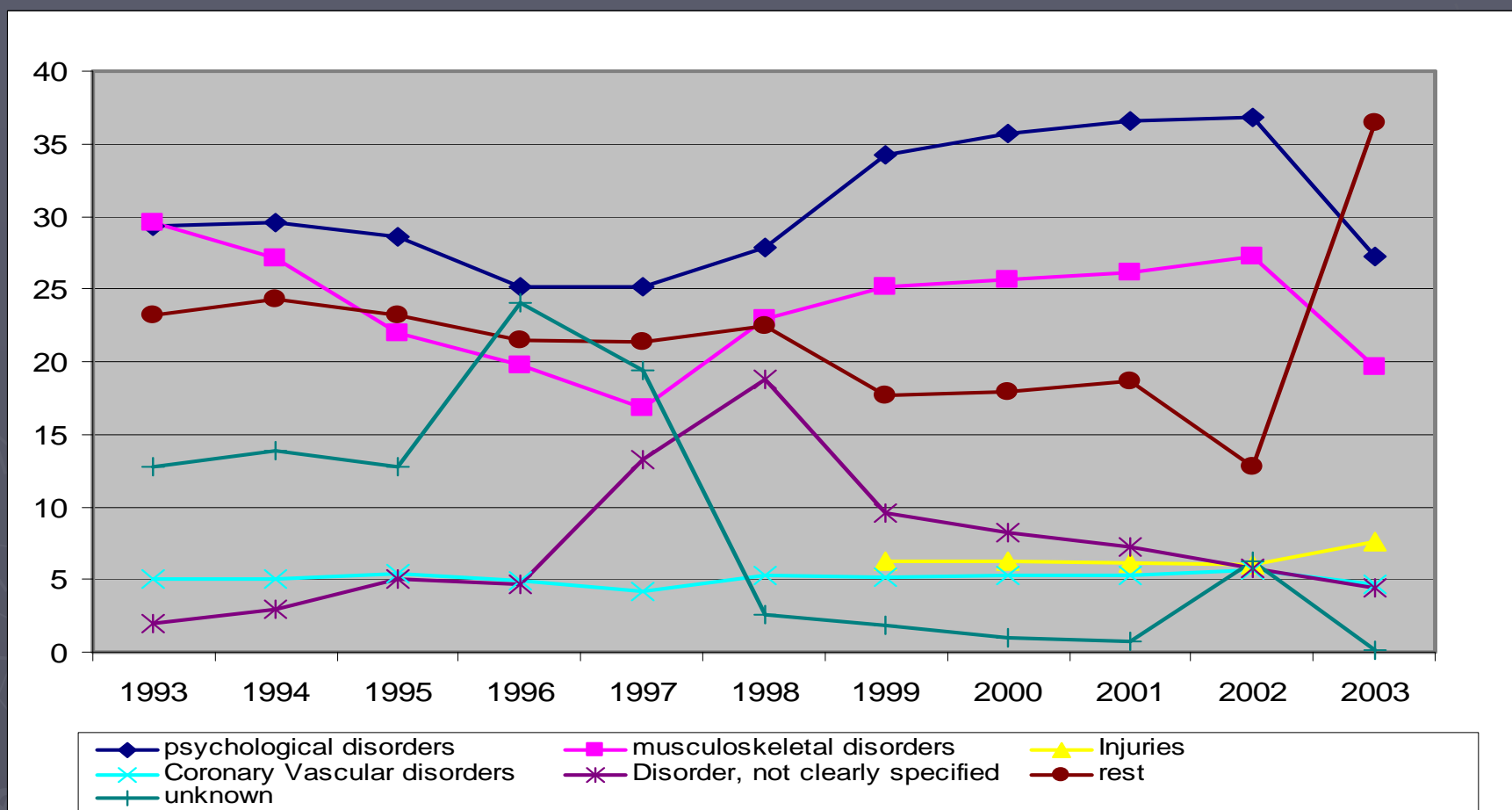
Reason for early retirement in Germany
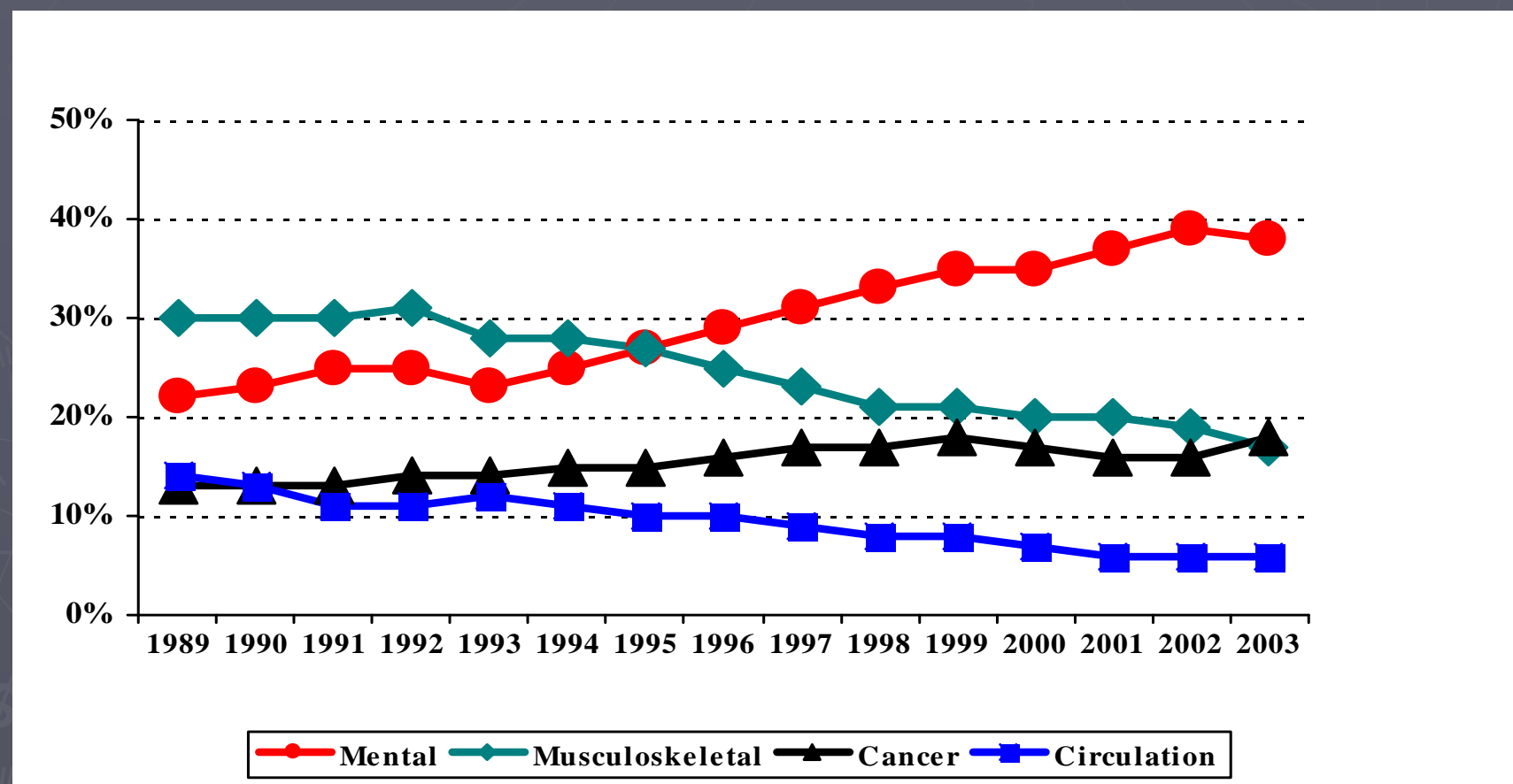
Costs of mental health problems

► Total **productivity** costs of mental health disorders in the EU-25 (plus Norway, Iceland and Switzerland) are estimated to be €136.3 billion (2007 prices)

► €99.3 billion were linked to depression and anxiety related disorders

► The productivity losses for cardiovascular disease are €36.1 billion in the EU-25

► **Presenteeism** may increase business costs by between 50% and 500%.

Mental health promotion interventions

Examples of workplace factors associated with poor mental health

- ► High demands
  - Physical
  - Emotional
  - Mental
- ► Low decision latitude
- ► Low rewards
- ► Low satisfaction
- ► Poor communications

- ► Bullying
- ► Harassment
- ► Violence
- ► Management style
- ► Levels of support at work
- ► Demands from the public
- ► Occupational roles
- ► Job future ambiguity
- ► Shiftwork

The 10 most important emerging psychosocial risks

1. Precarious contracts in an unstable labour market
2. Increased vulnerability in the context of globalisation
3. New forms of employment contracts
4. Feelings of job insecurity
5. Ageing workforce
6. Long working hours
7. Work intensification
8. Lean production and outsourcing
9. High emotional demands
10. Poor work life balance

Examples of workplace factors associated with good mental health

► Positive social support

► Control over work demands

► Opportunities to develop

► Adequate remuneration

► To be part of a meaningful process

► Interesting work

► Feedback on performance

► Opportunity to influence decisions

► Fair treatment

► Positive communications

► Teamworking

Dimensions of interventions

► Worker oriented interventions

  - Stress management courses, appraisal, relaxation, problem solving
  - Operational training

► Work oriented interventions

  - Modification of the work environment
  - Redesigning jobs, tasks and work
  - Changes in resources

Dimensions of interventions

► Primary prevention
  ▪ Eliminating/modifying sources of stress, e.g.
    ► Job design
      ▪ Job enrichment
      ▪ Task rotation
    ► Work organisation
      ▪ Managing demands
      ▪ Training and development
    ► Working conditions
      ▪ Managing schedules

▪ Promoting good work practices
  ► Management style
  ► Communications
  ► Social support

Dimensions of interventions

► Secondary/tertiary prevention

  ▪ Reduction or elimination of the effects of stress, e.g.

    ► Awareness raising
    ► Early identification of at risk groups
    ► Development of treatment/early response mechanisms
    ► Rehabilitation, job retention, return to work
    ► Individual placement and support
    ► Coping skills training
    ► Counselling

Project aims and structure

► Scope literature and current practice on mental health promotion and protection

► Produce a systematic knowledge management system with information, key references and web links.

► Produce three mental health toolkits for workplaces, schools and older peoples homes settings

► Organise pilot implementation projects to evaluate and review the knowledge base and toolkits

Current status

► Database of <400 mental health promotion tools

► Toolkits for each of the three settings

► Pilot projects in c. 80 sites

Promenpol field trials

► 3 types of field trials

- Type 1 – assessments of the toolkit
- Type 2 – implementation of tools from the toolkit
- Type 3 – reports from existing initiatives

What has been learnt so far:

- ► Prepare properly
- ► Ensure support
- ► Raise awareness of mental health problems and issues
- ► The issue has 'unspoken' credibility

- ► Still framed in terms of mental illness
- ► Mental wellbeing programmes end not to be labelled as such
- ► RTW is very difficult

ENWHP

ProMenPol

European Network for Workplace Health Promotion

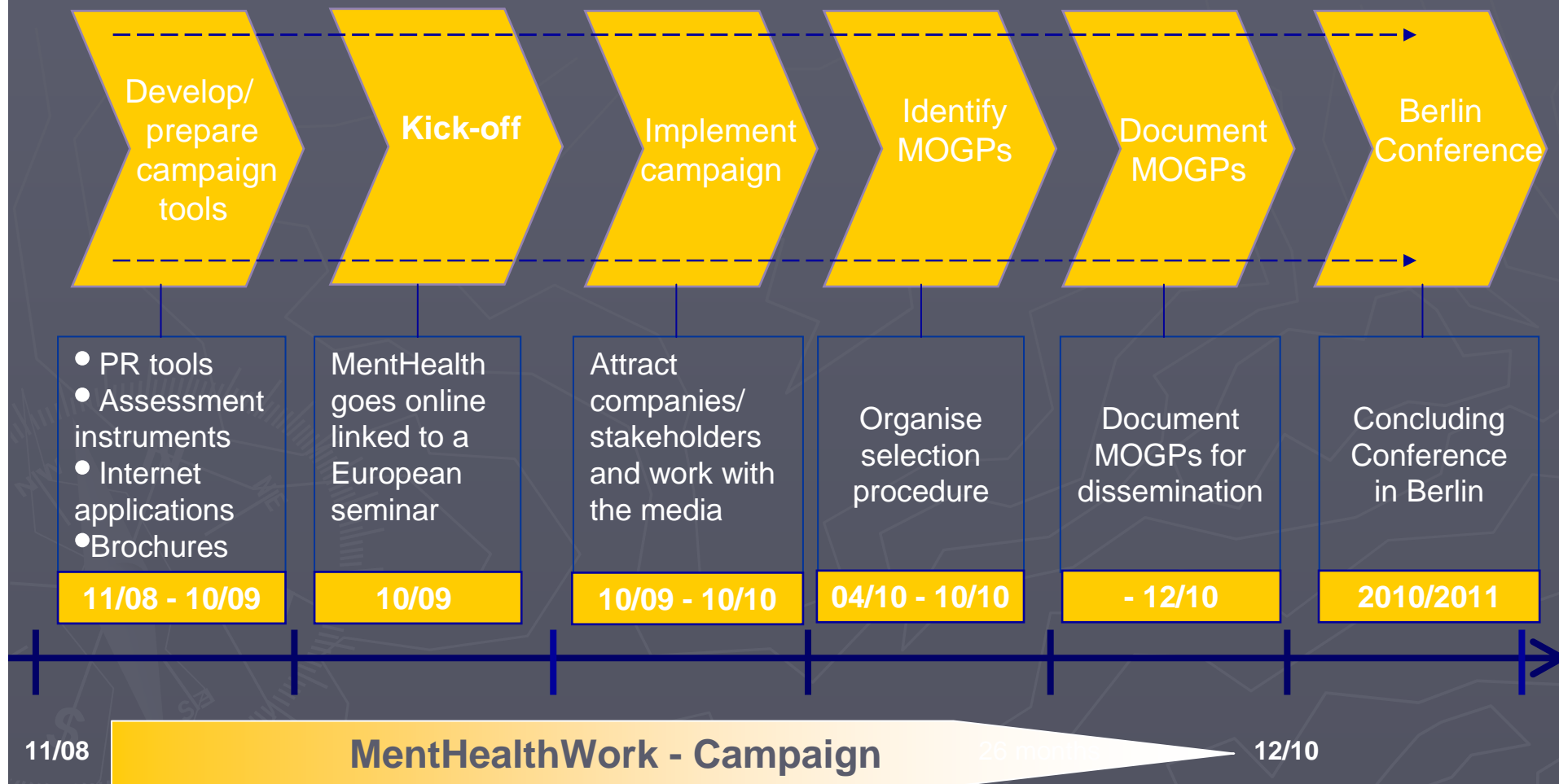## Mental Health at Work

7th Initiative

2008-2010

MentHealthWork

MentHealthWork

► Aims to:

- Develop a campaign to promote Mental Health Promotion at work (MHP)
- Develop an assessment questionnaire related to MHP practices
- Identify Models of Good Practice of MHP
- Publicise Models of Good Practice Europe wide

► Takes place in 18 European countries

► Preparatory work began in late 2008

MentHealthWork

Roadmap: Overview

Develop/ prepare campaign tools	Kick-off	Implement campaign	Identify MOGPs	Document MOGPs	Berlin Conference
• PR tools • Assessment instruments • Internet applications •Brochures	MentHealth goes online linked to a European seminar	Attract companies/ stakeholders and work with the media	Organise selection procedure	Document MOGPs for dissemination	Concluding Conference in Berlin
11/08 - 10/09	10/09	10/09 - 10/10	04/10 - 10/10	- 12/10	2010/2011

11/08 — MentHealthWork - Campaign — 12/10

ENWHP

MentHealthWork

► For more information:

http://www.enwhp.org/index.php?id=606

Conclusion

► Mental health problems are growing

► They affect the workplace

► The workplace can create mental wellbeing

► There are strategies and actions available to:
  - Promote mental wellbeing
  - Prevent mental ill health