Mental Health in the South African Workforce

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Mental Health in Workplace

• COVID-19 forced us to consider a "new normal" regarding work and the work environment.

• It has challenged the way things were done in terms of working hours, location etc.

• The nature of work is changing, and it has become critical for employers to attend to employee wellbeing and mental.

• As every individual has unique concerns to address, every employer must shape culture in its own workforce, and that culture should include creating ecosystems wherein employees can thrive physically and mentally.

Are employers ready to talk about mental illness .... At work?

• Employees were suffering from mental health issues before covid-19.
• Many countries realized that looking after employees’ mental health at work saves money and increases productivity.
• Covid-19 has made it a priority to look after employees’ mental health.
• Advocating for the conversation about mental illness at work for more than 20 years.
• Advocating that “Work is good for you” and that it can be a protective factor against mental ill health.
• If medical incapacity is not the answer, what is?
The answer

• Employers that take the mental health of their employees seriously
• Promotion of positive mental health and wellbeing programs at work
• Training managers and frontline employees
• Appointing mental health champions at work and breaking the stigma
• Creating psychological safe spaces
• Policies on for example:
  • Support for employees with common mental health disorders
  • Reasonable accommodation (in absence of disability definition)
  • Return-to-work after being off-sick for mental illness related issues.
'Staggering' Increase in COVID-Linked Depression, Anxiety

- We continue to see staggering numbers that indicate increased rates in depression and anxiety because of COVID-19 (Paul Gionfriddo, CEO of Mental Health America)
- Individuals completing voluntary online mental health screen.
- Number of anxiety and depression screenings that were completed per day, compared to January 2020
  - May 406% higher
  - June 457% higher

Workplace responses to COVID-19 associated with mental health and work performance of employees in Japan

• The study examined the relationship between the implementation of workplace measures and employees' fear and worry about COVID-19, psychological distress, and self-rated work performance in an early stage of the pandemic in Japan.

• The number of workplace measures decreased employees' psychological distress and improved performance.
Psychological safe spaces

• Creating and maintaining a mentally healthy work environment means having a culture conducive to conversations.

• In dealing with COVID-19, it’s important to formalize the fact that we are all experiencing some level of anxiety, loneliness and isolation.

• Normalizing these feelings helps people feel comfortable in sharing their feelings.

• If top leadership is open, it helps create a culture that can address mental health issues.
Mental illness at work

People in the working population affected by anxiety and depression every year

- 1 in 6
- 2 out of 3 won’t disclose

Why?
- 46% fear of discrimination
- 25% because there wasn’t any support or guidance for doing so

Mental Health Foundation, UK. 2018
Learning to Talk About It

• If ignored, chronic mental illness may be the result.

• **Companies should specifically address this issue with employees and not merely include information on this topic as part of an overall communication on dealing with the physical aspects of protection from COVID-19.**

• The reason for separating the messages is that the hesitation to talk about discussing mental health issues is still strong.
Deloitte Insights 2019

The ROI in workplace mental health programs: Good for people, good for business - A blueprint for workplace mental health programs

WHO:

• Poor mental health costs the global economy US$1 trillion annually in lost productivity.
Canada

- Direct cost: CA$ 50 billion per year
- Indirect cost: CA$ 6.3 billion

**Figure 2**

**Mental health issues lead to both direct and indirect economic costs**

<table>
<thead>
<tr>
<th>Direct costs</th>
<th>Indirect costs</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Health care costs, including psychological care benefits and drug costs</td>
<td>- Absenteeism</td>
</tr>
<tr>
<td>- Income support, including short- and long-term disability claims</td>
<td>- Presenteeism (i.e., attending work while unwell but with reduced productivity)</td>
</tr>
<tr>
<td></td>
<td>- Employee turnover</td>
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</tbody>
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A case for investing in workplace mental health: Bell Canada (2018)

ROI on workplace mental health programs

\[ \text{CAD } 4.10 \text{ for every CAD } 1 \text{ invested} \]

Key element of cost saving?

Better support during short-term disability leave and return to work leads to a reduction in long-term disability claims.
Canada

Companies that achieved greater returns invested in activities that support employees along the entire mental health continuum

• promoting mental health and well-being among employees regardless of the current state of their mental health
• not just intervening when people are unwell.

• Leadership training and return-to-work programs critical to creating a positive ROI.
United Kingdom

**Thriving at work:**

*The Stevenson / Farmer review of mental health and employers (2017)*

- UK Government initiative
- Independent review
- how employers can better support the mental health of all people currently in employment
- including those with mental health problems or poor well-being to remain in and thrive through work.

[Diagram showing the three phases people experience at work: Thriving in work, Struggling in work, and possibly off work.]
United Kingdom

Figure 3: Poor mental health costs employers between £33 billion and £42 billion a year\(^2\). This is made up of:

- **Absenteeism cost:** £8bn
- **Presenteeism cost:** £17bn to £26bn
- **Staff turnover:** £8bn

Total cost: £33bn to £42bn

This amounts to a cost per employee of between £1,205 and £1,560 per year. This cost is for all employees, not just those who are ill.
What happens if a person stops working?

• Someone else carries the cost....

Costs to Government
Figure 5: Cost of poor mental health to UK Government
Poor mental health at work costs Government between £24 billion and £27 billion per year²².
United Kingdom

- 50% of employees would not discuss mental health with their line manager
- 4 in 10 organizations have **policies or systems** in place to support employees with common mental health disorders
- 8 in 10 employers report **no cases** of employees disclosing a mental health condition
- Only 24% of managers have received some form of training on mental health at work.
Mental health core standards

All employers can and should:

1. Produce, implement and communicate a mental health at work plan
2. Develop mental health awareness among employees
3. Encourage open conversations about mental health and the support available when employees are struggling
4. Provide employees with good working conditions
5. Promote effective people management
6. Routinely monitor employee mental health and wellbeing.
Canada

• Canada provides a structured framework for workplace mental health.

• Their framework, called ‘the Standard’ provides a comprehensive framework to help organizations of all types improve their workplace mental health offer to provide the best return on investment.
‘The Standard’

Launched in 2013, the National Standard of Canada for Psychological Health and Safety in the Workplace (the Standard):

- comprehensive set of guidelines,
- tools and resources to help organizations promote mental health and
- prevent psychological harm at work.

Its framework covers:

- Identifying and eliminating workplace hazards that could psychologically harm an employee
- Implementing structures and practices and fostering a culture that promotes psychological health and safety in the workplace.
Success stories

• Anglian Water Group, Winner of BITC’S BUPA Health And Wellbeing 2019 Responsible Business Award

• Our mental health strategy was developed with three key elements:
  • Increasing awareness of mental health and breaking the stigma
  • Providing a range of resources and tools to support employees’ mental health
  • Completing mental health training.
• 80% decline in work-related stress absences in 2018
• Created a one-day, off-site education course for managers
  • *Your Mind Matters for Line Managers*
• The course focused on three topics
  • the importance of creating a positive psychological environment,
  • how to catch someone before they fall and
  • helping them return to work.
United Kingdom

Mental Health at Work 2019 Report: Time to take ownership

• 30% of the UK workforce have been formally diagnosed with a mental health condition at some point in their lifetime

• Only 13% of managers have attended specific training that focused on mental health.
• Managers must receive training e.g. simple guidance on how to talk (and listen) to those with mental health problems and training on the management of wellbeing

• Recommendations for leaders:
  • Owning responsible leadership
  • Understanding the impact of work
  • Equipping managers
  • Providing tailored support
Mental illness in South Africa

- 1 in 3 → common mental illness
- 1 in 10 → depression
- 75% will not get treatment

Herman et al, 2009
Petersen & Lundt, 2011
Mental illness at work in South Africa

• 1 in 4 has depression
• 80% will continue working despite depression
• Presenteeism costs SA R200 billion per year
“The person you report to at work may be more important to your health than your family doctor”.

Jeffrey Pfeffer: Dying for a paycheck
Greater ROI with support along the entire mental health continuum

• Mindful Revolution active in wellbeing space
• **i-act** training for positive mental health and wellbeing
  • Accredited with The Royal College of Psychiatrists in UK
  • Course for managers
  • Course for frontline employees and non-managers
Our future workforce?

- Bantjes, J., Lochner, C., Saal, W. et al.

- A study amongst first-year university students at the University of Cape Town and University of Stellenbosch

- BMC Public Health 19, 922 (2019)
Bantjes, J., Lochner, C., Saal, W. *et al.*

First year students at US and UCT:
• Lifetime prevalence of common mental disorders - 38.5%
• 12-month prevalence - 31.5%.

The lifetime prevalence for
• Major depressive disorder - 24.7%
• GAD - 22.6%.

The 12-month prevalence for
• GAD - 20.8%
• Major depressive disorder - 13.6%
Wellness, well-being and mental illness wellness
Conceptualising disability: Health and legal perspectives related to psychosocial disability and work

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Let’s start talking about mental illness at work!
Next Up: Prof Ina Rothman (Afriforte)

Proposed Business Strategies to Protect Mental Health in the Workplace