

The ABC's of psychological safety in the workplace

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Many Canadians will experience a mental illness in their lifetime and many more will be directly impacted by mental illness of a family member, friend, or co-worker. The associated cost of mental illness to employers is far reaching and extends beyond the costs associated with absenteeism or extended absence from work.

These costs include reduced productivity and innovative or creative capacity, poor interpersonal relationships, as well as increased incidence of errors and accidents.

As a result, the notion of psychological safety has become a concept embraced by employers who are looking for ways to decrease the incidence of mental illness and associated costs to their workplaces.

PSYCHOLOGICAL SAFETY

Psychological health refers to a person's ability to think, feel, and behave in a healthy way at work and away from work. Just as physical hazards can pose a risk to physical safety, psychological hazards are risk factors which can have an impact on psychological health. The first step in working toward a goal of obtaining a Psychologically Safe workplace is to identify and reduce psychological hazards.

Common psychological hazards include:

- Perceived high workload
- Lack of control or autonomy in how work is done
- Lack of support
- Perceived lack of respect
- Unclear, conflicting or changing expectations

BURNOUT

Prolonged exposure to psychological hazards such as these can have a cumulative effect on psychological health and can precipitate burnout and in some instances, mental illness. Job burnout may coexist with more severe mental illness and disability, and it can increase the risk for musculoskeletal or cardiovascular illnesses. It is estimated that between three per cent to seven per cent of the working population may experience severe burnout. The signs of burnout are similar to the signs of depression but may be less severe or shorter lasting.

Common signs of burnout and depression include:

- Fatigue
- Change in appetite
- Change in sleep patterns
- Loss of motivation
- Feeling of detachment
- Feeling helpless or hopeless
- Decreased satisfaction or sense of accomplishment

PSYCHOLOGICAL HAZARDS OR STRESSORS CAN IMPACT THE WAY WE BEHAVE

Changes in behaviour at work may also be a sign of burnout or mental illness. A change in behaviour or work performance may be an indication that a person is having difficulty coping at work and may need help.

Early identification of the signs of burnout or mental illness can provide an opportunity to identify psychological hazards and reduce their impact and an opportunity to suggest early intervention such as counseling through an Employee Assistance Program (EAP). Early identification strategies that help identify symptoms and facilitate appropriate treatment have been successful in significantly improving employee productivity.

Changes in behaviour which may indicate burnout or depression include:

- Withdrawing from responsibilities
- Procrastinating, taking longer to get things done
- Using food, drugs, or alcohol to cope
- Taking frustrations out on others
- Arriving late or leaving early
- Making more errors in work tasks
- Isolating from others, or depending more on others

THE INTERACTION OF PSYCHOLOGICAL HAZARDS AND BEHAVIOUR CHANGE

Psychological hazards are often not easy to identify and the impact of psychological hazards can have a cumulative effect, with changes in behaviour or work performance occurring slowly over time.

We can all think of someone who has been short-tempered at work. This behaviour may be attributed to their personality, or 'just who they are'. But behaviour is often influenced by factors in the environment such as stress. If this behaviour is a change from a previous

behaviour pattern, it may be a sign of burnout or difficulty coping in a demanding environment. Changes in behaviour may also have a negative impact on social relationships at work. A common example is an employee who, at one time, had positive relationships at work and met expectations in their role, but over time, their behaviour may have changed so that deadlines were missed and trust was lost between co-workers. Eventually, social interaction between co-workers is reduced so that the employee becomes somewhat isolated at work. Later, they might be perceived as anti-social by their co-workers, or aloof, and their failure to manage their workload or the necessity of others to help with their workload may foster feelings of resentment. These factors contribute to the psychological hazards for this individual and may further negatively influence their ability to cope.

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Changes in behaviour such as these may indicate a need for professional help to assess mental illness and provide appropriate treatment. If there is an ensuing absence from work, the employee will again be faced with these

stressful situations and fractured relationships upon returning to work. These factors will likely increase anxiety or apprehension about returning to work and will need to be addressed in order to ensure a successful and sustained return to work program.

BREAKING THE CYCLE

Creating and maintaining a work environment which fosters psychological safety can help to break this cycle. This can be accomplished by recognizing and acknowledging changes in behaviour, maintaining open communication about stress, burnout, and mental illness, and working with employees to reduce psychological hazards. The following guideline may help to reduce the impact of psychological hazards on work performance. They may also help reduce the incidence of absence from work due to mental illness, and may be applied to assist in promoting long-lasting return to work programs.

THE ABC'S OF MENTAL HEALTH IN THE WORKPLACE

Acknowledge or recognize the signs of burnout or mental illness. This is the first step toward taking action to reduce psychological hazards in the workplace. When changes in behaviour or signs of burnout are noticed, they should be acknowledged and the solutions to help reduce stress can then be explored. Developing and applying workplace policies and procedures about a

psychologically healthy workplace can guide employers and employees in how to best acknowledge signs of mental illness and take appropriate action.

Being Available means more than keeping the office door open. Being available refers to actively engaging employees in discussions about perceived stressors and psychological hazards on an ongoing basis. It is also important that all workplace stakeholders communicate with each other and engage in coordinated action to help address psychological hazards effectively. This is how an employer can help their employees achieve maximum working potential.


Questions beginning with “I” and framed as asking for assistance are most likely to convey availability and desire to help. This act of soliciting help and input also provides an opportunity for the employee to voice their concerns. This act shows respect and consideration which in turn can help to promote confidence and ultimately protect against psychological hazards.

Collaborative Solutions highlight the idea that the best source of information in each situation is the person most impacted. Psychological hazards are generally perceived conditions such as high or insufficient workload, absence of support, or lack of autonomy or control in work function. Therefore, the person who will most likely be able to accurately identify relevant stressors is the one who is affected. Oftentimes, collaborative solutions come in simple and creative accommodations that can help an employee who is struggling stay at work and maintain the positive aspects of workplace participation.

Sources of stress which can trigger symptoms of burnout or, in more extreme instances, mental illness, will differ between individuals. For example, a person who finds a busy or noisy workplace stressful may benefit from a quiet workspace while another may feel isolated in a quiet environment and may benefit more from social support from the people around them. There is only one person who will know what is required to optimize working conditions: the employee. As such, it is essential to engage them in dialogue about what is needed in order to minimize psychological hazards. Being informed about the nature of mental illnesses and the power of the workplace in safeguarding psychological health is a good tool for making the right choices at work and providing guidance to an employee who is struggling and is in need for additional resources to maintain health and productivity.

A NOTE ABOUT CONFIDENTIALITY

Open communication can be achieved without breaching confidentiality by focusing on workplace behaviours and expectations. Asking questions about how a person is feeling and what you can do to help them shows consideration, however, questions about any treatment or therapy that they have received is not information that should be requested, nor be required for that conversation.

For additional tools and resources to help you build a psychologically safe workplace, visit Manulife's Workplace Solutions for Mental Health website at manulife.ca/mentalhealth.

SOURCES

- Ahola, K., Vaananen, A., Koskinen, A., Kouvonen, A., and Shirom, A. (2010). Burnout as a predictor of all-cause mortality among industrial employees: A 10-year prospective register-linkage study. *Journal of Psychosomatic Research*, 69, 51-57.
- Antidepressant Skills at Work. (2009). Consortium for Organizational Mental Healthcare (COMH). comh.ca/antidepressant-skills/work
- Pomaki, G., et al., (2010). Best Practices for Return-to-Work/Stay-at-Work Intervention for Workers with Mental Health Conditions. Occupational Health and Safety Agency for Healthcare in BC.
- Biron, C., Ivers, H., Brun, J.P., and Cooper, C.L. (2006). Risk Assessment of Occupational Stress: Extensions of the Clarke and Cooper Approach. *Health, Risk & Society*, 8(4): 417-429.
- Centre for Addiction and Mental Health. (2010). Workers with mental illness: New study indicates the need for increased workplace prevention and support. Toronto, ON.
- Chair in Occupational Health and Safety Management. (2005). *Mental Health at Work: From Defining to Solving the Problem*. Quebec City, QB. Available from <http://cgsst.fsa.ulaval.ca>.
- Cowan, A.P., & MacBride-King, J.L. (2005) What you need to know about mental health: A manager's toolkit. Ottawa: The Conference Board of Canada.
- Harger, G.H., & Scott, L.R. (2005) *Comprehensive Disability Management*.
- Human Solutions Report. (2010). *Able-Minded: Return to Work and Accommodation for Workers on Disability Leave for Mental Disorders*. Available from: humansolutions.ca.
- Job Burnout: Understand Symptoms and take Action. (2010). www.mayoclinic.com
- Preventing Burnout: Signs, Symptoms, Causes, and Coping Strategies. (2008). helpinguide.org
- iapa.ca
- Wang, P.S., et al. (2007). Telephone screening, outreach, and care management for depressed workers and impact on clinical and work productivity outcomes. *JAMA*, 298(12), 1401-1411



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