

STOP PRETENDING

**WORKPLACE MENTAL HEALTH
WAS GOOD BEFORE COVID-19**



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Stop Pretending That Workplace Mental Health Was Good Before COVID-19

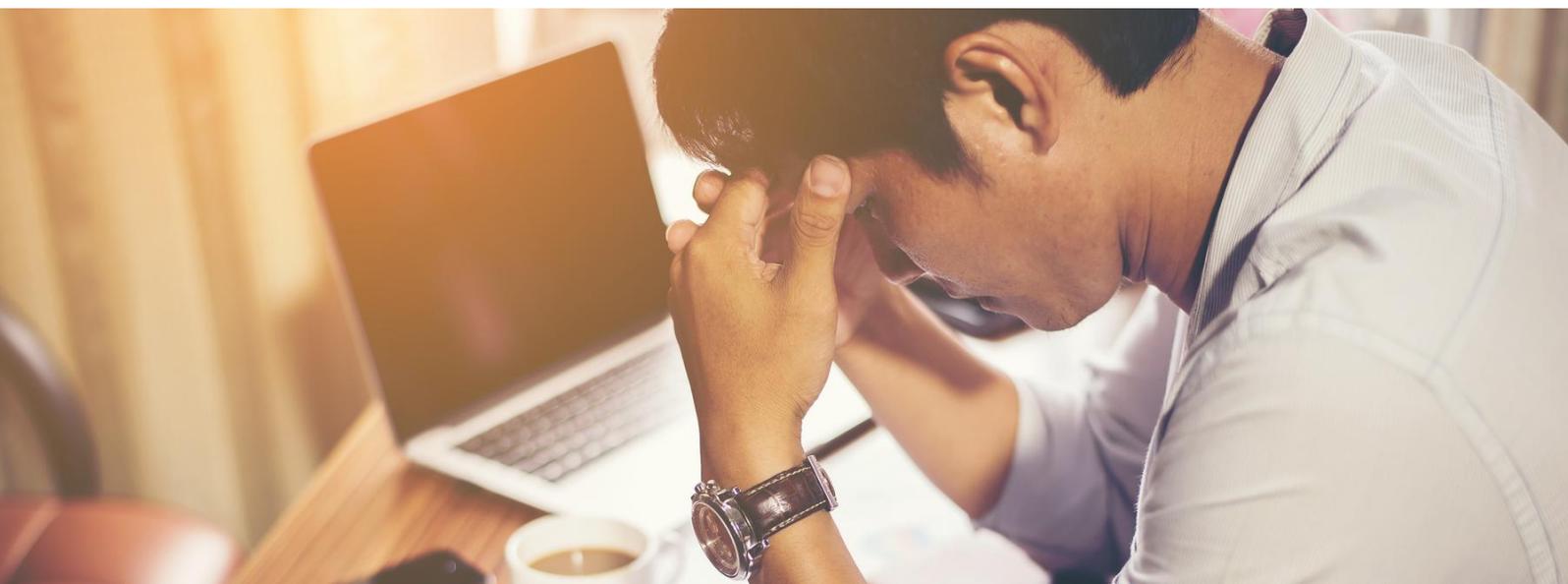
A brief look back in history demonstrates a simple realisation – with all the money spent on stress awareness and management nothing really has changed.

2000 – The Health and Safety Commission [HSC] together with the Department of the Environment, Transport and the Regions [DETR] launched the Revitalising Health and Safety initiative, the aim of which was to reduce accidents, injuries and ill-health in the workplace by 2010. Identifying stress as one of its eight priority programmes in this initiative, the Health and Safety Executive [HSE] was set the following targets:

- A reduction of 20% in the incidence of work-related stress by 2010
- A reduction of 30% in the number of working days lost from work-related stress by 2010

2017/18 – HSE reported that 15.4 million working days were lost to work-related stress, depression or anxiety in 2017/18 (Labour Force Survey) with an average of 25.8 days lost per case. In total, 57 per cent of all working days lost to ill health were due to stress and anxiety.. Additionally, over 500,000 people in the UK feel ill as a result of their level of work-related stress.

The number of people in the UK experiencing mental ill health has increased significantly over the past 18 years.



The S word (stress) has always been a problem

Why have we not reduced the “S” number as effectively as the “R” number?
What can we learn from COVID-19?

With COVID-19 we focused on supporting the ones who displayed symptoms

We didn't initially look at the sources of infection. As a result, infection continued to rise. In managing stress we have placed too much emphasis on helping those with symptoms. We are not disputing the value of CBT, counselling or EAP's. You cannot clean a fish, place it back in a dirty pond and expect it to stay clean.

COVID-19 introduced track and trace to reduce cross infection

In stress management this is the equivalent of stress risk profiling. Businesses need to track the sources of pressure and build a strategy around managing risk.

COVID-19 had a strategy

The 2m rule. About 40% of all businesses have a wellbeing related strategy. Businesses need a clear Stress Management Strategy consisting of a Primary, Secondary and Tertiary level of intervention.

COVID-19 maximised guidance from experts and focused highly on collaboration.

In managing stress, businesses need to learn from experts and ensure managers, HR, OH and EAPs collaborate.

COVID-19 focuses now on prevention

Face masks as an example. We also know that those at higher risk are those who have underlying issues. In managing stress, we need to focus on building stress resilience and challenging people to make health improvements.

How should workplace mental health change post COVID-19?

Follow the COVID-19 examples.

A good friend and expert wrote a book on this subject in 1994 before sadly passing away. It is a must read for anyone serious about work related stress – Managing Pressure for PeakPerformance: The Positive Approach to Stress Paperback – 30 July 1994 -by Stephen Williams

Five questions to consider:

1. How do you know if employee's mental health is an issue?
2. How confident are you that managers are equipped to manage stress related issues moving forwards?
3. What impact will work related stress have on your business – can you bounce back pulling a huge weight?
4. How will you measure if the interventions you deploy are having an effect? What is the potential impact of doing nothing?

Our next article: Lifestyle matters – Wellbeing programmes for people not patients.

Go to: www.wellbeingchallenges.com for more info

Wellbeing4businessLtd can provide strategic advice and help businesses with all aspects of stress management from Primary Prevention, to Secondary Targeted Intervention and Tertiary Support.

Our resilience challenge is a great way to encourage people to develop resilient habits, team work and morale.