



For better  
mental health

# Stress and mental health in the workplace

Mind week report, May 2005



## Contents

|  |           |
|--|-----------|
| Report summary.....  | 4         |
| Background and Introduction.....   | 6         |
| <b>1. Setting the context .....</b>  | <b>8</b>  |
| Existing research on workplace stress .....  | 10        |
| The stress response .....  | 12        |
| Sources of stress at work.....   | 13        |
| Stress and mental health in the workplace.....   | 15        |
| <b>2. Workplace stress in the public and private sectors .....</b>                           | <b>20</b> |
| Stress prevention and management .....   | 22        |
| Case studies in stress prevention and management.....  | 25        |
| Case studies of mental health service users'<br>experiences of stress in the workplace ..... | 32        |
| <b>3. Summary and conclusion.....</b>  | <b>37</b> |
| Further information and resources.....   | 39        |
| References .....   | 41        |

## Report summary

### Mind's key recommendations

- Employees should be provided with genuine control over their work and an appropriate degree of self-management of workload.
- Roles should be clearly demarcated with defined responsibilities and expectations.
- Employees should have a say in planning and decision making.
- The physical workplace environment should be of a high standard, including natural light where possible, good ventilation, good health and safety practices.
- Employees should be actively discouraged from working excessively long hours.
- A supportive working environment should be provided for people with mental health problems.
- Flexible hours schemes should be introduced to take account of regular hospital check-ups.
- There should be a gradual return to work for those who have had to take time out after illness.
- Positions should be kept open during sickness absence.
- There should be on-the-job support and mentoring schemes.
- There should be ways of tackling employment discrimination and providing support during periods of ill health.
- There should be government support for proactive recruitment of people with mental health problems.
- There should be better legislation to protect people with mental health problems from discrimination, including provision for those who experience episodes of depression of less than 12 months.

- There should be improved mental health assessment for people applying for the two new benefits replacing Incapacity Benefit.

### Stress in the workplace: some facts

- In a Health and Safety Executive (HSE) report on work related stress, 20 per cent of respondents suffered from stress at levels described as "very" or "extremely stressful".
- Workplace stress is estimated to be the biggest occupational health problem in the UK after musculoskeletal disorders.
- The most common stress related complaints presented to GPs are depression and anxiety and are reported to affect 20 per cent of the UK working population.
- Mental health problems, such as depression and anxiety, now account for more Incapacity Benefit (IB) claims than back pain.
- It has been estimated that nearly 10 per cent of the UK's gross national product (GNP) is lost each year due to job generated stress.
- Stress is the highest cause of absence among non-manual employees, with an estimated 12.8 million working days lost in Britain in 2003/04 due to stress, and depression or anxiety ascribed to work related stress.
- Nearly three in every ten employees will have a mental health problem in any one year, the great majority of which will be anxiety and depressive disorders.
- The Confederation of British Industry (CBI) estimates that 30 times as many working days are lost due to mental ill health as from industrial disputes.

- Mental health problems account for the loss of over 91 million working days each year.
- Half of all days lost through mental ill health are due to anxiety and stress conditions.
- In a CBI survey of over 800 companies, 98 per cent of respondents said mental health should be a company concern, with 81 per cent of those saying that the mental health of employees should be a company priority.
- But fewer than one in ten of the companies surveyed had an official policy on mental health.

### Summary of key messages

#### For employers

There are a number of key actions that employers can take in order to encourage a mentally healthy workplace:

- Demonstrate and encourage awareness, understanding and openness in relation to the issues of stress and mental health in the workplace.
- Adopt and adhere to formal policies on stress and mental health in the workplace and commit to addressing both issues.
- Allow employees to make reasonable adjustments, for example, flexi-time, working from home or quiet rooms to help them to manage mental health problems and work related stress issues.
- Offer resources or procedures to help manage stress at work and generally improve mental wellbeing, for example, stress awareness training, access to counselling or stress busting initiatives.

### For employees with mental health problems

- Searching for and applying for jobs can be stressful experiences in themselves, so it is important to recognise and prepare for this.
- Relationships with colleagues are a crucial factor in the experience of stress at work for employees with mental health problems. Therefore, it is important to develop supportive relationships and friendships at work.
- Workplace stress can create mental health problems, or act as a trigger for existing mental health problems which may otherwise have been successfully managed. This highlights the importance of recognising and guarding against factors in the workplace that may cause stress, or of negotiating adjustments to your working practices, in reference to the Disability Discrimination Act 1995 (DDA) if necessary.
- You can play a key role in preventing personal stress by developing awareness of the causes and symptoms of your stress and developing personal coping skills.

## Background

In January 2005, Mind commissioned Robertson Cooper, leading consultants specialising in occupational stress, to produce research on the extent of the problem of stress in the workplace in England and Wales and what can and should be done about it.

The report looks at the issue from a generic public interest perspective (employers and employees, in particular), as well as from the perspective of mental health service users. It looks at workplace stress as a trigger for mental ill health and covers issues of concern to service users such as Disability Discrimination.

## Introduction

Talking about stress has become part of normal everyday conversation. We might talk about being stressed by our partners, our children, our financial worries and, of course, our jobs. Most of us recognise the symptoms of stress as feeling anxious, worrying more than usual, not being able to concentrate, and not sleeping well. But we don't always take our feelings of stress that seriously, assuming either that it's part and parcel of life or that it will pass.

But when our jobs are the cause of our stress, we can feel powerless to do anything about it, which of course raises our stress levels even higher. We may feel we can't admit to feeling stressed to anyone at work, because it's somehow a sign of weakness or of mental distress. Many of us work in environments where mental distress is still very much stigmatised.

But, owned up to or not, the situation is stark: work related stress is estimated to be the biggest occupational health problem in the UK after musculoskeletal disorders. What's more, common mental health problems like depression and anxiety now account for more Incapacity Benefit claims than back pain. The effects, therefore, of work related stress, both on individuals and organisations, are profound.

In some people with no previous history of mental health problems, stress at work can also trigger serious mental health issues that have been previously undiagnosed or latent. And where employees already have existing mental health problems, increased stress at work can lead to relapse and breakdown.

Mind believes that stress at work is now one of the most common forms of mental distress. That is why this report is not targeted exclusively at the mental health sector, but also at employees and employers, which means most of us.

The report comprehensively pulls together existing research into stress, looks at what stress is and what its effect on people can be when they experience stress in the workplace. It sets out how employers can take easily introduced steps to reduce stress levels in the work environment and, in doing so, make sure they meet their legal duties to individual employees.

The report also tells the stories of employees who have experienced workplace stress up to breaking point but have also found ways to manage that stress and return to work. The case studies contained in the report are inspiring. They show what can be done to reduce stress in any organisation, large or small.

The message for employers is a positive one: stress is manageable and it is economically viable to make adjustments and changes to the workplace environment in general and specific adjustments when you have employees who are suffering from work related stress.

This report is not specifically targeted at the mental health sector - the issues it raises go far wider than that - but it makes clear that to deny mental health service users a supportive work environment or an adequate safety net is an infringement of their rights and has a negative impact on the economy. It also leaves many talented people out of work and unable to contribute.

All of us, in any work environment, at whatever level, may experience stress either directly because of issues taking place in our work environment or because home issues, such as financial problems, physical illness or relationships, are affecting our work.

Mind strongly urges employers and employees to work together to find the sources of stress and tackle them. This report gives guidance on how this can be achieved. Through numerous case studies, the report demonstrates that these steps, when introduced by employers and taken on by employees, really do make a difference to the workplace and, therefore, to people's lives.



## 1. Setting the context

### Cost to the economy

There are many statistics associated with the prevalence of workplace stress. The Health and Safety Executive (HSE) has published a report into the incidence of workplace stress: the large scale research study of over 17,000<sup>1</sup> people showed that 20 per cent of respondents suffered from stress at levels described as “very” or “extremely” stressful.

Work related stress is estimated to be the biggest occupational health problem in the UK after musculoskeletal disorders.<sup>2</sup> Furthermore, common mental health problems like depression and anxiety now account for more Incapacity Benefit (IB) claims than back pain.<sup>3</sup> The effects, therefore, of work related stress both on individuals and organisations are extensive. Depression and anxiety are the most common stress related complaints presented to general practitioners, and are reported to affect 20 per cent of the working population in the United Kingdom.<sup>4</sup>

As well as causing considerable pain and suffering for individuals, there is a substantial burden on the community and significant effects on absenteeism and productivity within organisations. Stress at work is costing industry a great deal of money and is cited as one of the most important reasons for sickness absence from work.<sup>5</sup> It has been estimated that nearly 10 per cent of the UK's gross national product (GNP) is lost each year due to job generated stress in the form of sickness absence, high labour turnover, lost productive value, increased recruitment and selection, and medical costs.<sup>6</sup>

Surveys of employers in the UK show that stress is the highest cause of absence among non-manual employees.<sup>5</sup> The HSE estimates that 12.8 million working days were lost in Britain in 2003/04 due to stress, depression or anxiety ascribed to work related stress.<sup>2</sup>

### Health and Safety Executive (HSE) guidelines

As part of their overall strategy to reduce work related ill health, the HSE developed some guidance on stress management standards. The *Management standards for work related stress*<sup>7</sup> launched in November 2004, encourage organisations to take preventative measures in relation to stress at work through a risk assessment.

The suggested stages of the risk assessment are as follows:

1. Identify the hazards.
2. Decide who might be harmed and how.
3. Evaluate the risk and take action.
4. Record findings.
5. Monitor and review.

The Management Standards that underpin the risk assessment look at six key aspects of work that, if properly managed, can help to reduce work related stress:

- 1. Demands:** includes issues such as workload, work patterns and the work environment.
- 2. Control:** how much say employees have over the way they do their work.
- 3. Support:** includes the encouragement, sponsorship and resources provided by the organisation, line management and colleagues.
- 4. Role:** whether people understand their role within the organisation and whether the organisation ensures that the person does not have conflicting roles.
- 5. Relationships:** includes promoting positive working to avoid conflict and dealing with unacceptable behaviour.
- 6. Change:** how organisational change (large or small) is managed and communicated in the organisation.

Each standard is accompanied by a list of “states to be achieved” within an organisation. Although the standards are voluntary, the HSE has indicated that they will be used as evidence against employers that continue to ignore their responsibilities in managing stress under the Health and Safety at Work Act 1974. In 2003, the HSE issued its first ever improvement notice under the Health and Safety at Work Act against an employer (West Dorset Hospitals NHS Trust) for failing to take steps to identify and manage stress, following a complaint by an employee.

### Trades Unions and Confederation of British Industry positions

#### Trades Unions' position

The Trades Union Congress (TUC) and its affiliated unions have devoted increasing attention to raising awareness of stress as a major source of work related health problems, which affect the mental and physical wellbeing of workers. A study of 4,521 safety representatives carried out by the TUC in 2004<sup>8</sup> reported that the number of workers experiencing stress had increased by 2 per cent since 2002, taking the level up to 58 per cent of workers complaining of being stressed at work.

When the HSE Management Standards were launched, Britain's largest trade union, UNISON, responded by stating they did not believe that the standards were going far enough and that regulations and rules that employers must obey, as opposed to guidelines, were required. UNISON recognised that the HSE guidelines were a major step forward in addressing workplace stress, but want organisations to be held to account if they fail to meet them.<sup>9</sup>

In terms of sickness absence, the TUC believes that unions have a great deal to offer, especially by promoting health and safety at work. The TUC believes that unions can help organisations manage sickness effectively: in promoting rehabilitation, return-to-work planning, monitoring progress and in discussions about adjustments to, or changes of, job responsibilities.

The TUC considers that a great deal more could be done to remove workplace causes of ill health and absence and it supports a preventative approach, enhancing rehabilitation and other services that help people who experience mental or physical ill health (or whose condition deteriorates) to remain in their jobs.<sup>10</sup>

#### Confederation of British Industry's (CBI) position

The CBI represents small and large companies from every sector of UK business. Its direct corporate membership employs over four million people and it has a trade association membership representing over six million. The CBI clearly takes workplace stress seriously and works jointly with government agencies and the TUC to tackle stress related problems in the workplace. The CBI has participated in sponsoring a mental health conference with the Department of Health and has also produced guidelines on stress management.<sup>11</sup>

## 1. Setting the context

### Existing research on workplace stress

#### What is stress?

The word stress is derived from the Latin word *stringere*, meaning to draw tight. However, like other abstract, subjective issues, stress is difficult to define and difficult to measure. One of the pioneers of the medical understanding of stress, Hans Selye,<sup>12</sup> described it as follows:

“The word stress, like success, failure, or happiness, means different things to different people and no-one has really tried to define it, although it has become part of our daily vocabulary.”

The HSE defines stress as “the adverse reaction people have to excessive pressures or other types of demand placed on them”.

Work related stress is caused when there is a mismatch between job requirements and the individual's capabilities, resources or needs.<sup>13</sup> This description emphasises the interaction between a person and his or her environment. By considering stress as a result of a misfit between an individual and his or her particular environment, it helps in understanding why one person seems to flourish in a certain setting while another suffers. It is important to appreciate the fundamental differences between pressure and stress.

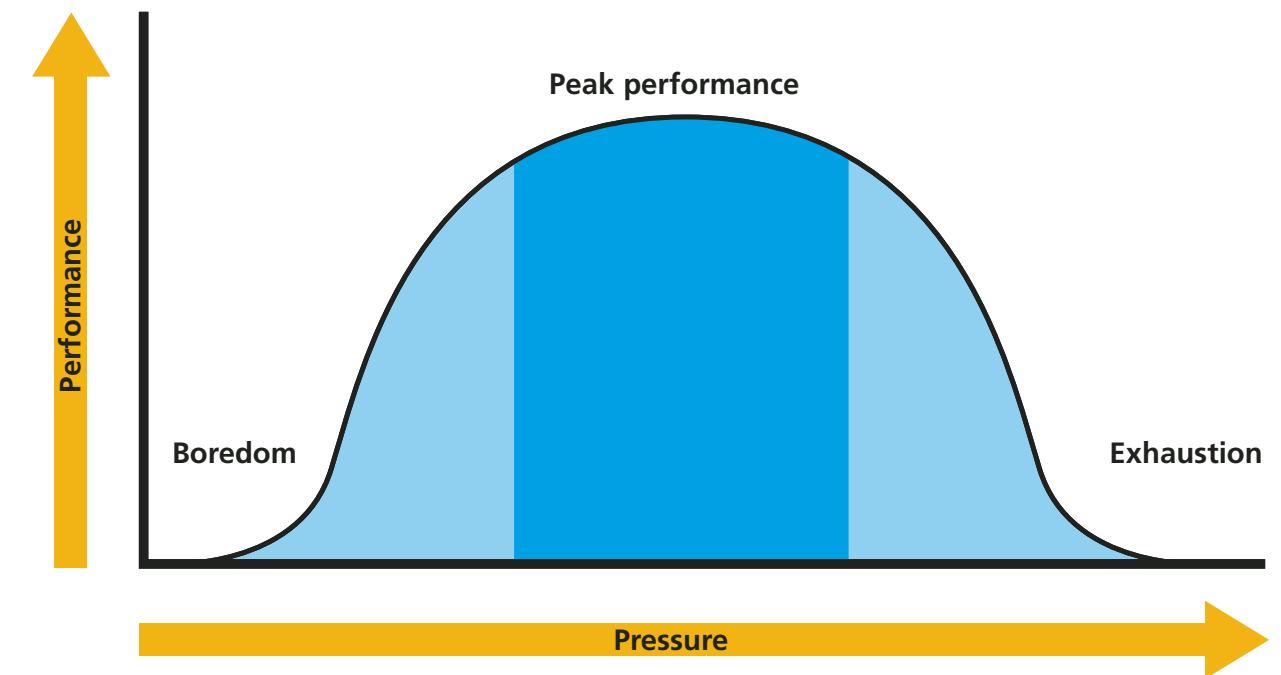
#### The difference between pressure and stress<sup>14</sup>

Pressure can have a positive effect in stimulating motivation and alertness, providing the incentive needed to overcome challenging situations. However, extreme, persistent and unrelieved pressure can lead to stress and feelings of anger, fear and frustration, and cause a variety of short term and long term illnesses with damaging effects on individual mental and physical wellbeing.<sup>15</sup>

Pressure and stress are related but different phenomena, and the terms are often confused. So, what is pressure?

- Pressure is a subjective feeling. It is the tension or arousal that results from a potentially stressful situation.
- Pressure is what most people mean when they say they are feeling stressed. That is, when faced with a potentially stressful situation, we experience some tension or arousal. In most cases, we are feeling pressure and not damaging stress.
- Pressure is positive. It is often called positive stress or eustress. This is because it gives us the motivation and drive that we need to perform. When we feel too little pressure, we are not likely to feel motivated or inclined to strive towards our goals. As the level of pressure rises, we become more motivated and will perform better. For example, athletes often report that they do better when they are competing or when they are being watched. This is because they are under pressure to perform well. However, when pressure exceeds an individual's ability to cope, stress results.
- Pressure is positive and desirable (up to a certain level). When the pressure becomes too great, that is when we can experience stress and burn out.

#### The Pressure/Performance Curve<sup>14</sup>



#### Stress is in the eye of the beholder<sup>16</sup>

It is often the case that managers confronted with a stressed member of their team can't figure out why others in their team are not also suffering from stress. The stress response is dependent upon what is described as 'cognitive appraisal'. The reaction of an individual depends on how a person interprets or appraises (consciously or unconsciously) the significance of a harmful, threatening or challenging event and whether they have the resources to cope with it. A whole range of different factors, including past experiences and personality, can influence the appraisal.

The reason cognitive appraisal is important in understanding the causes of stress is because it means that stress is in the eye of the beholder. Evaluating stress, therefore, needs to take into account what the individual believes to be a threat and

whether he or she believes they can cope with the situation. It is for this reason that subjective evaluations of stress, such as those found in standardised stress indicators, are more accurate in identifying stress than gross data, such as absence rates, accident rates, or attrition rates. Measurement of stressors must be a measure of the perception of a threat by the individual.

# 1. Setting the context

## The stress response

### The biology of the stress response<sup>4</sup>

The stress response is a normal biological response to stressful or traumatic events, environmental stressors and interpersonal conflicts that we experience. Stress poses a risk to health when it occurs frequently or is intense, prolonged or mismanaged. The stress response has four combined effects:

- Blood flow is redirected from the skin, intestines and other vegetative organs to the muscles and brain.
- Glucose and fatty acids are mobilised from storage sites into the bloodstream to provide readily available energy.
- Alertness is increased through a sharpening of sensory processes, such as vision and hearing.
- Functioning of the immune system, restorative processes and routine maintenance functioning, such as digestion, is reduced.

In all cases, the biological response is preparing the body for the 'fight or flight' response. This is an evolutionary response and has been part of our normal and everyday biological make up for millions of years. All advanced animals react in this way to the perception of threat.

The suppression of the immune system under chronic or severe stress leads to the 'general adaptation syndrome' (a term coined by Hans Selye) leading to a generalised rather than a specific health risk. A person may experience a range of medical, psychological and/or behavioural disorders, depending on their vulnerabilities, as a result of this generalised response.

The outcomes or effects of workplace stress at an individual level are well documented and include physical and mental ill health, decreases in organisational commitment and in job satisfaction, which can in turn have knock on effects on motivation and performance, productivity, sickness absence and staff turnover. Below are details of some of the early warning signs of stress in the workplace:

#### Physical early warning signs:

- insomnia and sleep disturbances
- fatigue
- muscle tension and pain
- heart palpitations
- stomach upset and gastrointestinal problems
- breathlessness without exertion
- headaches.

#### Psychological early warning signs:

- inability to focus and concentrate
- loss of sense of humour
- high levels of anxiety and worry
- constant irritability towards others
- withdrawal from social contact.

These can all be signs that stress has built to such an extent that an individual may be in danger of developing more severe anxiety or depression.

#### Indicators of group level stress:

- disputes and disaffection
- increased staff turnover
- increased grievances and complaints.

# Stress and mental health in the workplace

## Sources of stress at work

As well as recognising the effects and outcomes of stress, it is also important to understand what factors in the workplace can actually act as sources of stress, or stressors. Researchers have identified seven major categories of work stress.<sup>17</sup> Common to all jobs, these factors vary in the degree to which they are found to be causally linked to stress in each job. The seven categories are detailed below:

### 1. Factors intrinsic to the job

This includes factors such as poor working conditions (for example, noise, lighting, smells), shift work, long hours, travel, risk and danger, new technology, work overload and work underload.

Example: David is exposed to constant noise at work. Jane's work is done entirely by computer, allowing little room for flexibility, self-initiative or rest.

### 2. Role in the organisation

When an employee's role in an organisation is clearly defined and understood and when expectations placed upon the individual are also clear and non conflicting, stress can be kept to a minimum. This is not the case however in many workplaces and three critical factors - role ambiguity, role conflict and the degree of responsibility for others - can act as major sources of stress.

Example: Jane is often caught in a difficult situation trying to satisfy both the customer's needs and the company's expectations.

## 3. Personality and coping strategy

Personality can have one or more of the following roles in the stress process:

- A direct effect on stress outcomes: for example, anxious people may be more tense across all kinds of situations, which can lead to psychological and/or physical health problems.
- A moderating effect in the stress or strain relationship: for example, extrovert people may find a socially isolated job more stressful than introverts.
- A direct perceptual effect: for example, personality may have some impact on a person's perceptions of what his or her job is like.

The coping strategies a person uses to cope with stress and how effectively he or she uses them can also impact on the experience of stress.

Example: David is a naturally anxious person and tends to turn small issues into larger, insurmountable issues on a day-to-day basis.

## 4. Relationships at work

Other people and our encounters with them can be major sources of both stress and support.<sup>18</sup> Poor relationships can be defined as those which include low trust, low supportiveness and low interest in listening and trying to deal with problems that confront individuals.<sup>19</sup> The three critical relationships at work are relationships with superiors, relationships with subordinates and relationships with colleagues or co-workers.

Example: David's physical isolation reduces his opportunities to interact with other colleagues or receive help from them.



# 1. Setting the context

## 5. Career development

Lack of job security, fear of redundancy, obsolescence or retirement and numerous performance appraisals can cause pressure and strain. Research suggests<sup>20</sup> that individuals suffering from 'career stress' often show high job dissatisfaction, job mobility, burnout, poor work performance or less effective interpersonal relationships at work.

Example: Since the re-organisation at David's plant, everyone is worried about their future with the company and what will happen next.

## 6. Organisational structure and climate

Just being part of an organisation can present threats to an individual's sense of freedom and autonomy. Lack of a sense of belonging, lack of adequate opportunities to participate, feelings of undue restrictions on behaviour and exclusion from office communications and consultations can all be sources of stress at work.

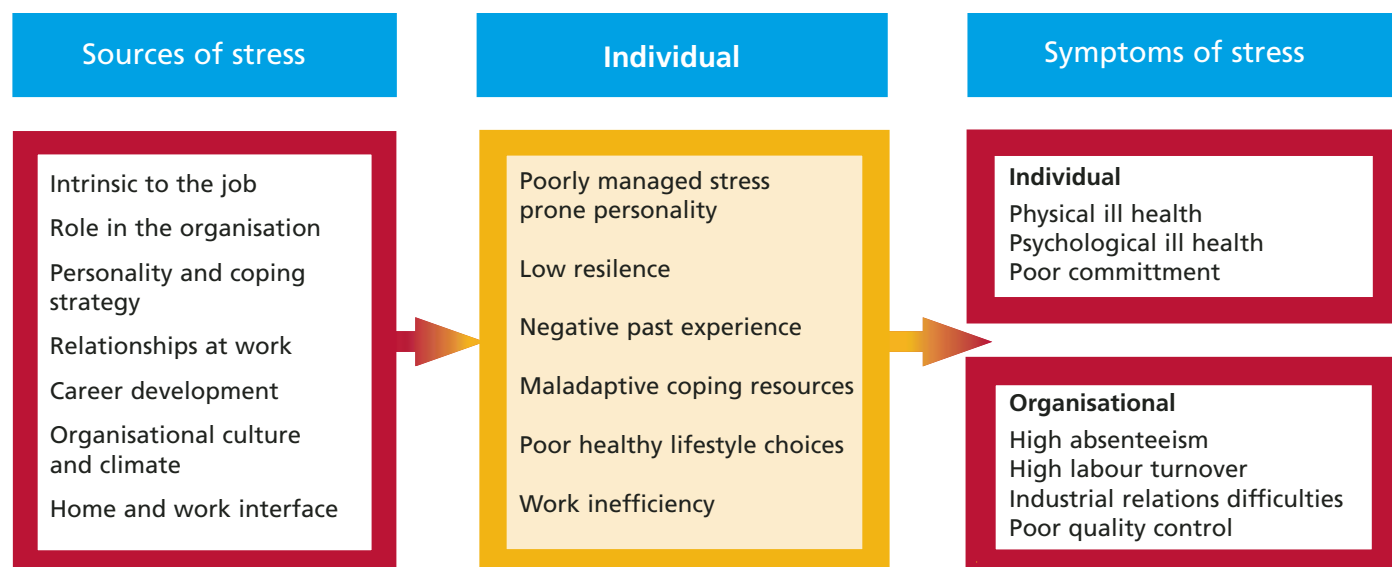
Example: Jane needs to get her boss's approval for everything and she feels excluded from the informal communications within her team.

## 7. Home and work interface

Increasingly, the demands on the individual in the workplace reach out into the homes and social lives of employees. Long, uncertain or unsocial hours, working away from home, taking work home, high levels of responsibility, job insecurity and job relocation may all adversely affect family responsibilities and leisure activities. This is likely to undermine a good and relaxing quality of life outside work, which is an important buffer against the stress caused by work. In addition, domestic pressures, such as childcare responsibilities, financial worries, bereavement and housing problems may affect a person at work. Therefore, potential exists for a vicious cycle in which the stress caused in either area of one's life, work or home, spills over and makes coping with the other more difficult.

Example: Jane's boss is not sensitive to her childcare commitments and she is not given the flexibility to work from home if necessary. She is also frequently required to work away from home at short notice.

The diagram below, based on the Cooper Marshall Model of Stress,<sup>21</sup> demonstrates how individual characteristics such as resilience, personality, past experience and coping mechanisms can impact on the relationships between sources of workplace stress and the experience of symptoms of stress.



# Stress and mental health in the workplace

and The Boots Company, have developed policies that successfully address the issue of mental health in the workplace.

## Workplace stress as a trigger to mental health problems

The relationship between work related stress and mental health has been examined by several researchers.<sup>24 25</sup> One such study set out to clarify the causal relationship between the two factors.<sup>26</sup> The researchers found that certain aspects of perceived job stress had significant hazardous effects on mental health. These aspects were:

- A perception of a "poor relationship with superior".
- A perception of "too much trouble at work".

This emphasises the need for good working relationships and the need for interventions to promote a mentally healthy workforce.

A further study, which investigated job stress and mental health in junior house officers in Norway,<sup>27</sup> also found that job stress was related to reporting mental health problems in need of treatment, even when the effects of previous mental health problems, personality traits and other possible predictors were removed.

It was also found that it was the perceived job stress that proved to be of significance in explaining deterioration of mental health, rather than the objective work stressors (for example, working hours or on-call hours). This re-enforces the fact that 'stress is in the eye of the beholder' and that whether a factor is perceived as a stressor or not is very much dependent on the individual's appraisal of the situation.

## Stress and mental health in the workplace

Workplace stress and mental ill health often go hand in hand, so it's important to look at the nature of the relationship between the two, in particular how workplace stress can act as a trigger to mental health problems.

### Some facts<sup>22</sup>

- Nearly three in every ten employees will have a mental health problem in any one year, the great majority of which will be anxiety and depressive disorders.
- Mental health problems account for the loss of over 91 million working days each year.
- Half of all days lost through mental ill health are due to anxiety and stress conditions.
- The Confederation of British Industry (CBI) estimates that 30 times as many days are lost from mental ill health as from industrial disputes.

Over 25 million people in the UK spend a large part of their lives at work. It stands to reason that a psychologically healthy workforce and a supportive work environment will benefit staff and employers alike. In a CBI survey of over 800 companies, 98 per cent of respondents said they thought the mental health of employees should be a company concern. In addition, the vast majority (81 per cent) considered that the mental health of staff should be part of company policy. However, the reality of the matter was that less than one in ten of the companies surveyed had an official policy on mental health.<sup>23</sup>

The HSE recommends that mental health policy should be an integral part of any organisation's health and safety policy. Some large companies, such as Marks and Spencer



## 1. Setting the context

Previous mental health problems and vulnerable personalities were also found to be strong predictors of repeated mental health problems in this study. These findings underscore the importance of providing adequate support, as well as training in coping with forthcoming occupational stressors, to those with previous mental health problems and the personality trait of vulnerability.

Research has also found that there is a higher risk of the employee suffering a psychiatric disorder where employees are stressed because they:

- have no say on how work is done
- need to do work that involves a fast pace and a need to resolve conflicting priorities
- have a lack of recognition, understanding and support from their managers.<sup>28</sup>

### Mental health in the workplace: the law

Despite the widespread prevalence of mental health problems, there remains a great deal of stigma attached to mental ill health in the workplace. A survey carried out by the Social Exclusion Unit<sup>29</sup> revealed that fewer than four in ten employers say that they would consider employing someone with a history of mental health problems, compared to more than six in ten for someone with a physical disability.

The main areas of legislation that relate to mental wellbeing in the workplace are:

- The Health and Safety at Work Act (1974).
- Disability Discrimination Act 1995 (DDA).
- Human Rights Act (1998).
- Management of Health and Safety at Work Regulations (1999).

Disability is defined by the Disability Discrimination Act (DDA) as a “physical or mental impairment which has a substantial and long term adverse effect on a person's ability to carry out normal day-to-day activities”. Employers have a duty not to discriminate directly against disabled applicants and staff, or treat them less favourably, because of their disability, and also have a duty to make reasonable adjustments.

On 2 February 2005, the Government announced that Incapacity Benefit (IB) would be replaced by:

- A new Disability and Sickness allowance (worth more than current incapacity rates) for people with a “severe condition”.
- Flat rate Rehabilitation Support Allowance for those with “potentially more manageable conditions”.

## Stress and mental health in the workplace

### The experience of stress in the workplace: an example case study

John arrives at work to find numerous new emails, his in-tray overflowing from the previous day, his printer displaying an error message and an urgent meeting request for 9.30am.

John attempts to make his way to the coffee machine, but is interrupted twice on the way there by his manager demanding to know where particular projects are up to. John is unable to answer his manager's queries successfully, but is not given a chance to explain. He begins to feel anxious about the day ahead already.

After sitting down at his computer, John feels overwhelmed by the amount of work he has to do and is unable to focus enough to make a useful list of tasks for that day. John's call to IT support for help with his printer is put in a queue and he is told it may not be dealt with today.

John rushes, unprepared, into the emergency meeting and emerges with numerous actions to add to his 'to do' list. Looking to his manager for clarification on the day's priorities, John is met with the response that “everything should be a priority”.

John is yet again unable to take a lunch break and has some chocolate and crisps at his desk, washed down with large amounts of coffee. As he gets up with the intention of stepping outside for ten minutes to get some air, John soon decides against this as he could finish something off in those ten minutes instead.

During the afternoon, John ploughs through his priorities with little support from his manager. He works into the evening to get things finished as he is so worried about not meeting his deadlines. He generally gets little recognition for doing this as it's just seen as the norm. Before he knows it, John has cancelled the trip to the gym he promised himself and yet again is unable to get home in time for dinner with his family.

By the time John gets home, his children have gone to bed and he has been unable to spend any time with them. He is also too exhausted to have a proper conversation with his wife, let alone deal with the plans for relatives coming to stay at the weekend.

John has ongoing muscular pains from sitting at his desk all day, as well as headaches from the computer screen and constant tiredness. He experiences an underlying feeling of anxiety and being unable to cope and is often irritable and withdrawn when he gets home at the end of the day. To an outsider, John looks like a hard working man who gets the monetary rewards to go with this. However, many aspects of John's working life are leading to physical and psychological ill health.

### The experience of stress in the workplace for an employee with existing mental health problems

#### Support, understanding and relationships

Following discussions with various mental health service users who have had first hand experience of stress in the workplace, a number of key points about what stress in the workplace means for someone with mental health issues were identified:

- The process of looking for and applying for a job can be a significant source of stress in itself due to the potential for discrimination. In addition, having to make the decision about whether to disclose a mental health problem or not can also be a stressful experience.
- Simply being a mental health service user can also be a source of stress in the workplace. For instance, if colleagues are aware that someone has a mental health issue, this person may be discriminated against, made fun of, excluded from decision making processes, day-to-day discussions in the office and social activities. This can lead to feelings of isolation and loneliness, fuelled by a lack of understanding of mental health problems from colleagues.
- This issue works both ways in that supportive colleagues can make a big difference in terms of buffering against stress in the workplace for someone with mental health problems. It is by no means always the case that work colleagues will exclude and isolate someone with mental health problems. This point emphasises the need for organisations to promote a kind of culture which encourages diversity and understanding, and the need to apply equal opportunity policies to all employees fairly. It is also crucial for employees to be willing to embrace this kind of culture and work towards demonstrating understanding and supportiveness in relation to all the people they work with regardless, for instance, of their disability, ethnicity, physical appearance or other issues of identity.
- In terms of the major sources of workplace stress already discussed, the above points generally relate to relationships at work. It appears to be the case that relationships at work have great potential to be a source of stress or a source of support (depending on the nature of relationships) for employees with mental health issues.

### Stress at work as a trigger for mental health problems

- One of the key relationships between workplace stress and mental health is the potential for stress to trigger an **existing** mental health problem, which may otherwise have been successfully managed and not impacted negatively on work performance.
- A crucial difference in the experience of workplace stress for someone with existing mental health issues, compared to someone without, is the potential for stress to trigger or exacerbate an existing mental health problem.
- If workplace stress reaches a point where it has triggered or exacerbated an existing mental health problem, it then becomes hard to separate one issue from the other as they are interrelated. If not addressed, workplace stress and mental health problems can then trigger each other and a vicious cycle can develop.

### Managing mental health issues and stress

- In order to minimise the potential for the combined effects of mental health issues and workplace stress to spiral out of control, employees with existing mental health problems generally benefit from a workplace that allows them to make reasonable adjustments in order to manage their mental health issues. For example, flexi-time, a dedicated area to take time out or flexibility in work planning.
- With the opportunity to manage and take control of their own mental health issues within the workplace, employees are less likely to experience the spiralling out of control effect brought on by the combination of mental health issues and workplace stress.

### 2. Workplace stress in the public and private sectors

#### Extent of the problem

The prevalence of work related stress across the public and private sectors differs to a certain degree. Despite the common perception that public sector employees enjoy shorter hours and a less ruthless culture compared to their private sector colleagues, a recent survey of TUC safety representatives revealed that 64 per cent of public sector employees reported concern about overwork or stress at work, compared to 48 per cent of private sector employees.<sup>8</sup> However, stress was the top ranked concern in both sectors.

In line with these findings, a survey conducted by the CIPD<sup>30</sup> into employee attitudes in 2002 revealed the following:

- Public sector employees felt significantly more stressed and undervalued than people who work for private companies.
- Twenty one per cent of those employed in the private sector reported being “very or extremely stressed”.
- Twenty eight per cent of respondents employed in central government (ranging from civil services chiefs working in Whitehall to staff working at employment advice centres), 30 per cent of respondents in local government (including teachers) and 38 per cent of respondents in the National Health Service (NHS) reported being “very or extremely stressed”.
- Twenty one per cent of respondents in private sector companies thought their organisations cared about their opinions, but this fell to 16 per cent for the NHS and local government and 7 per cent for central government.

- Only 12 per cent of central government respondents “strongly agreed” that their organisation cared about their wellbeing, compared to 21 per cent of public sector employees.
- NHS respondents averaged 6.9 out of 10 for job satisfaction, the same as private sector employees.

In terms of sickness absence, the CIPD Employee Absence Survey of 2004<sup>5</sup> revealed the highest levels of sickness absence in public services: 4.7 per cent of working time lost per year on average or 10.7 days lost per employee per year on average. This equates to £706 per public sector employee. The lowest rates (3.4 per cent or 7.8 days lost per employee per year) were found in private services and equate to a cost of £588 per year. The overall survey average was 4 per cent or 9.1 days lost per employee per year.

So, what is driving these differences in reported stress levels and sickness absence rates? While there is no conclusive evidence on this, it is likely to be due to a number of factors. Firstly, there could be a reporting issue, in that employees in the public services may be more inclined to admit experiencing stress because it is seen as acceptable. The difference in sickness absence rates could also be due, to some extent, to the fact that the culture within the public sector is more accepting of higher sickness absence rates relative to the private sector. For example, Tesco made headlines after announcing their trial initiative to cut short term sickness absence by withholding sickness pay for the first three days of absence. Such extreme schemes are unlikely to be adopted by heavily unionised public sector organisations.

These issues aside, it may also be the case that nowadays, public sector employees are facing greater stressors in their working lives than their private sector counterparts. A health and safety expert from the TUC believes that stress has risen in the public sector as a result of Labour's return to government in 1997. He says, “It has become a much tougher place to work, because the current government wants to do so much more but until recently has not provided the extra resources needed.”<sup>31</sup>

#### Typical causes and contributory factors

The issues faced by employees of public and private sector organisations differ to a certain extent. In the public sector, there is constant change driven by the government, with an emphasis on improving efficiency and effectiveness. It may be argued that for public sector employees, demands for enhanced quality of service, value for money and accountability have assumed new meanings, creating additional job pressures. The uncertainty which is characteristic of organisational change is also likely to take its toll in terms of stress levels in the public sector.<sup>32</sup>

The threat of privatisation increased stress levels among public service workers during the 1990s and it is believed that public sector workers have become less satisfied at work over the past decade, a period in which they have faced extra bureaucracy, pressure to meet targets, as well as the introduction of working practices from the private sector.

Many researchers have sought to identify specific occupational groups at increased risk of experiencing high stress levels.

Recent research has identified seven occupations where worse physical health and psychological wellbeing than average were reported.<sup>33</sup> These were the ambulance service, teachers, social services, customer services and call centres, prison officers, clerical and administration, and the police. These occupations were generally rated as high in “emotional labour”; that is, they require a significant amount of face-to-face or voice-to-voice interaction with clients, where emotions are displayed and intended to influence other people's attitudes and behaviours. The majority of the high risk organisations were public services and this explanation of high emotional labour therefore goes some way to explaining the differing stress levels in the public and private sectors.

Private sector employees may face slightly different stressors at work, since the emphasis in private companies is generally more on sustaining a competitive advantage and putting in the time and effort required to achieve this. Typical stressors in the private sector may be related to volatile stock markets, unpredictable sales patterns or redundancies triggered by restructuring.



## 2. Workplace stress in the public and private sectors

### Stress prevention and management

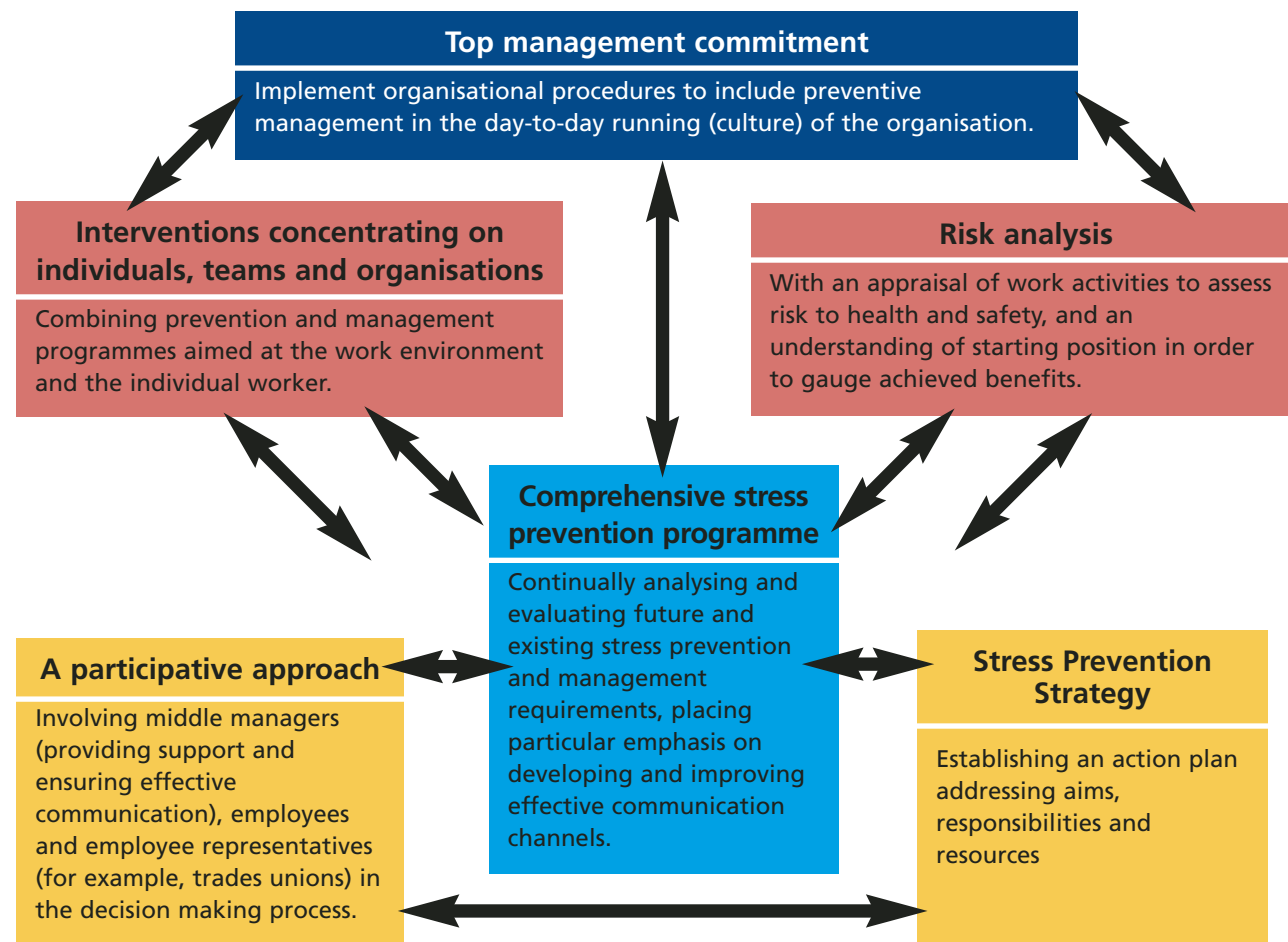
#### The Beacon of Excellence Model<sup>34</sup>

In 2003, the HSE published the Beacon of Excellence Model for stress prevention (see below). This model captured the essence of a comprehensive approach towards dealing with workplace stress. It was based on best practice data from a range of leading organisations throughout the UK and was designed and developed by psychologists at Robertson Cooper Ltd.

The Beacon of Excellence Model may be viewed as an all-encompassing organisational approach that recognises that individual and organisational health are interdependent, and the responsibility of stress prevention and management should lie with everyone in the business.

An effective stress prevention strategy is helped by the presence of a culture in which staff and managers are all involved in the process and are willing to continually communicate, analyse and revise their plans in a positive atmosphere of communication, participation and negotiation.

#### Good practice model in stress prevention



Beacon Model of Excellence in stress prevention<sup>34</sup>

## Stress and mental health in the workplace

#### Top management commitment

Top management is more likely to support interventions if issues such as expected outcomes, resources, costs and cost effectiveness can be clearly identified. For this purpose, a business case needs to be made to persuade key decision makers and budget holders to invest the necessary resources required to deal with stress issues.

What is important is that top management commitment can be demonstrated not only by ensuring stress prevention and employee health and wellbeing initiatives are well funded, but also by giving personal commitments and shouldering personal responsibility for stress prevention.

#### Risk assessment

Risk assessment is a key feature of the Beacon Model of Excellence in stress prevention. An understanding of situational factors needs to be developed if workplace stress is to be identified and reduced. As already highlighted, the HSE advocates risk assessment for stress (some people call this psychosocial risk assessment, others call it stress auditing) and expects organisations to carry out a suitable and sufficient risk assessment for stress and to take action to tackle any problems identified.

With an appraisal of work activities to assess danger to health and safety, risk assessment enables an organisation to recognise any inherent or perceived hazards prior to developing an intervention to deal with the risk.

#### Stress prevention strategy

The development of a stress prevention strategy needs to address intervention aims, the roles and responsibilities of staff and the resources of the business. At the very least, an organisation should have a stress policy. This will lay down the way the organisation will deal with stress issues.

Some businesses incorporate their approach towards workplace stress into other policies, such as those on dignity at work, bullying and harassment, or into more general health and safety policies.

#### What should a policy include?

1. Why the policy is important and why the business needs the policy.
2. Who is responsible for what:
  - a. corporate responsibilities
  - b. managerial responsibilities
  - c. all staff responsibilities.
3. A definition of stress, best taken from reputable sources.
4. An indication of what the business strategy is for dealing with stress, in particular, the general activities the business will be undertaking as a matter of course (for example, introducing counselling service, introducing resilience training or undertaking risk assessments).
5. Full consultation with staff to include signatures of staff representatives.

## 2. Workplace stress in the public and private sectors

### Stress interventions

There are three levels of intervention when it comes to dealing with workplace stress:

- **Primary interventions** aimed at eliminating or modifying environmental stressors to reduce their negative impact on individuals, for example, job redesign, culture change, flexible working or work life balance policies.
- **Secondary interventions** focus on increasing the awareness, resilience and coping skills of the individual, for example, stress management training, health promotion activities and skills training more generally (without trying to eliminate or modify the stressors).
- **Tertiary interventions** concerned with the treatment and rehabilitation of distressed individuals, for example, counselling or return to work policies.

### Primary interventions

Primary level interventions are critical to addressing work stress at source by looking at underlying causes. However, interventions can take a long time to organise and can be expensive in terms of resource requirements and people's time. It is also difficult to measure their effectiveness.

### Secondary interventions

Although many stressors can be dealt with, there are some stressors that are particularly harmful and which managers may not be able to deal with. Such stressors as job insecurity, economic contraction, competitor behaviour and customer behaviour may not be within the control of the manager. Helping people to cope with these types of stressors, or indeed just helping people to cope with daily hassles, is a key element of improving the sense of wellbeing of staff.

There are a variety of secondary interventions that are possible. Stress awareness training is the intervention referred to most frequently. Other interventions include:

- **Healthy lifestyle programmes:** exercise provision, such as facilities, sporting clubs or concessions for club membership. Relaxation provision, such as quiet rooms, prayer rooms, maternity rooms, massage or meditation training.
- **Stress coaching:** for example, one-to-one and team based stress coaching.
- **Social support groups:** a change management group, for example, or clubs and societies.
- **Training and education programmes:** a range of management training, for example, time management or project management.
- **Informational support:** literature or websites about stress, health and wellbeing.

Stress management is a partnership between employee and employer. In many respects, one of the most valuable contributions that employees can make towards stress management is in understanding and managing their own personal stress through secondary interventions.

### Tertiary interventions

Tertiary interventions are concerned mainly with rehabilitation. Most classifications of interventions would place the following services under tertiary provision:

- in-house and external counselling services
- employee assistance programmes
- rehabilitation programmes (for example, to address alcohol or drug problems)
- critical incident management
- complementary therapies
- life coaching.

## Stress and mental health in the workplace

### Case studies in stress prevention and management

The Beacons of Excellence in stress prevention research<sup>34</sup> also identified organisations within the UK where best practice was evident. A number of case studies were produced from this research, demonstrating different examples of stress prevention practices in the public and private sectors.

#### Primary level intervention: London Borough of Hounslow

One excellent example of a locally managed primary intervention at the London Borough of Hounslow was found in the Neighbourhood Enforcement Unit. This unit is made up of people who have to perform an inherently stressful job. In the words of the manager of this unit:

“My officers have to get people to do things they don't necessarily want to do, or stop doing something they would prefer to continue, or spend money they don't want to spend.”

One of the teams within this unit has a particularly difficult task: patrolling the Hounslow district over the weekend and dealing with noise complaints from neighbours. The job has been made more stressful since the local police withdrew from supporting these activities unless in response to a 999 call for support.

The manager undertook a localised risk assessment and a local staff survey, as well as running one-to-one meetings and team meetings on a regular basis with the staff in this unit. One of the key outcomes of this approach was changing the way in which the officers worked. As well as being a good example of using a participative approach towards tackling stressors, it has provided a number of solutions that were introduced.

The following is a list of those things that were undertaken as a result of the local participation:

- The shift pattern changed. Previously, officers worked Thursday night, Friday night and Saturday night from 9.00pm to 6.00am, as well as normal day duties the rest of the week. In response to a demand analysis (analysing the number of cases of disturbances per night), Thursday night was dropped and the Friday night and Saturday night shifts now run from 10.00pm to 4.00am. In addition, there is now time off either side of the shift so an officer on night shift at the weekend gets Monday off to recover.
- Double staffing. Other councils ask their officers to do this job alone. Hounslow recognised the intensely stressful nature of the work and therefore resisted the temptation for lone working, instead having eight officers working in pairs.
- The provision of stab jackets. Although this is not necessarily a primary intervention, it is, nevertheless, an intervention designed to make the officers feel safer after learning from feedback that the threat of violent attack was nearly as stressful as an attack itself.
- Team meetings now include investigation of dangerous incidents and invitations to staff to recommend improvements to the service, both for themselves and for customers.

This case study of primary intervention deals with ways in which individuals can gain greater control over the stressful situation they have to deal with. The interventions are designed to make a very difficult job a little easier, by changing the working patterns to provide greater recovery time for duty officers, and by providing double staffing to ensure there is physical and social support for officers.

## 2. Workplace stress in the public and private sectors

It is also a good example of risk assessment and of employee participation in the way in which the manager gathered views of staff, measured attitudes using an attitude survey, and now has regular discussions in team meetings on how to continuously improve safety of staff.

The manager concerned invested a lot of time and energy persuading top management to spend more money in order to implement the recommended solutions. Double staffing and additional time off for recovery have a significant cost implication. Without top management commitment in the form of additional resources, it would not have been possible to implement these recommendations.

### Secondary level intervention: Stress Management short course for managers at Leicestershire Department of Planning and Transportation

Across all of the candidates for Beacon of Excellence awards, high quality stress awareness training was taking place. The course outlined below is delivered in-house at Leicestershire Department of Planning and Transportation. It is delivered by the central occupational services department staff who are qualified occupational welfare counsellors and who understand the key issues relating to the department.

#### Leicestershire Department of Planning and Transportation Stress Management short course outline

##### Session one

- Define stress.
- Identify the signs and symptoms of stress and its effects on the individual
- Outline of strategies for managing personal stress.
- Know what sources of support are available within the organisation and how to access them.
- Action plan for personal stress management.

##### Session two

- Setting the legal context.
- The manager's responsibility for the prevention and management of stress at work.
- Identifying causes of workplace stress.
- Strategies for the prevention and management of stress at work.

### Primary level interventions in the retail banking sector: Abbey

An example of a systematic approach to primary level intervention can be found in the initiatives put in place by Abbey. Many employees in the retail banking sector have to work with difficult customers or in a call centre environment. In order to tackle some of these particular difficulties at Abbey, the Great Place to Work initiative was introduced.

The Great Place to Work initiative contains a number of ideas that tackle issues relating to stress and other staff related problems. It is a good example of a 'wide targeting approach' towards employee health and wellbeing and, potentially at least, has the commercial benefit of improving the image of Abbey as a great place to work.

Below are details of interventions introduced to tackle stress related issues:

- **Respite room.** For colleagues working within a call centre environment, respite rooms or cyber cafés were developed to provide employees with an opportunity to leave their office environment and refresh themselves after tackling a particularly difficult call. These respite rooms are available to all staff in the call centres and are equipped with video games and other relaxation materials. Where the respite rooms operate as a cyber café, staff can access information on the intranet and on the internet during break times as well as before and after work. This is in addition to using the café as a 'break out' location to temporarily remove sources of pressure. The respite room is a dedicated space that is respected by all employees as a work free zone. Where staff use this

## Stress and mental health in the workplace

facility for a relaxation break following a particularly difficult call, the line manager is informed and will offer some support to the employee if needed.

- **Workstation changes.** As part of the restructuring of their work, employees had their information sources clarified and subsequently reduced. Employees no longer have to rely upon accessing two separate desktops to get to customer information. The new IT system allows easier access to this information and more physical space for employees to work in and has had the knock on effects of reducing stress from workload and technology.

The key to the Great Place to Work initiative is in recognising that there are benefits to staff in introducing primary level interventions. Call centres have a reputation for asking employees to work under intensive pressure. The call centre industry is a competitive one and turnover is normally higher than average, not only because of the intensive work pacing, but also due to loss of staff to other call centres. As such, for a call centre operator to retain staff, it is necessary to provide something special. The commercial benefits of this wide targeting approach are in establishing Abbey not only as an employer of choice, but also in terms of improvements in staff motivation and, theoretically, in staff performance by redesigning the work and the working environment.



## 2. Workplace stress in the public and private sectors

In Abbey call centres, several initiatives have been piloted that create higher levels of control and autonomy for staff over their work. Job control is one of the most important elements of job design. Low levels of worker control are related to high levels of stress related outcomes, such as anxiety, distress, irritability, psychosomatic health complaints and consumption of alcohol.<sup>35</sup>

The physical environment can also be a source of stress. The provision of respite rooms and workstation changes are a common way of dealing with physical environmental stressors.

### Tertiary level intervention: 'Round table' meetings at London Electricity

In cases where an employee's problems are work related, it is often common practice for a counsellor to establish a link back into the line manager and HR representative. At the discretion of the employee, a meeting between employee, counsellor, line manager, HR representative, and union official where relevant, is set up to discuss changes needed in behaviour, workflow and workload, and other threat inducing factors. Thereafter, the employee usually undertakes a phased return to work.

At London Electricity Group (now part of EDF Energy), this approach towards rehabilitation of those absent due to work related stress is a good example of a tertiary level intervention. The counselling aspect of the Employee Support Programme (ESP) is run by an external network of counsellors managed by a clinical psychologist in London. One of the key elements of the ESP is the incorporation of 'round table' meetings to form a standard part of the counselling service. Staff referred to the

counselling service are provided with three sessions with the clinical psychologist, with a further four more sessions if required and upon recommendation by the occupational physician. If the psychologist believes the problems are work related, a series of round table meetings are organised. These meetings are usually conducted with the employee, his or her manager, the counsellor and representatives from Occupational Health and the HR department. An agreed range of actions are published following each round table meeting.

Apart from aiding the rehabilitation of employees with stress problems and preventing or minimising sickness absence, these round table meetings have been found to be a very robust way of identifying shortfalls in management skills which can then be tackled in a sensitive but evidence based way.

## Stress and mental health in the workplace

### 3. Local Mind association case studies: Tertiary level intervention

#### East Berkshire Mind's STEP Forward project

East Berkshire Mind's STEP Forward employment project works with people who have experienced mental health problems. Its role is to support people in returning to work and training, and supports people currently in work and having problems. The project covers Slough, Bracknell, Windsor and Maidenhead and employs a team of people within the project.

One example of support offered is the mentor service. The mentors work with a range of clients who are at different stages in terms of whether they are ready to return to work, but, says senior mentor Karen Unrue, they all have something in common. She says, "By the time people come to see us, they feel unemployable, they have low self esteem and anxiety management is a real issue for them. Our role is to support and help them make choices about what they want to do in the future."

The one-to-one support from mentoring is all the more invaluable, says Karen, because the clients know their mentor has a mental health history too. She says, "When I tell clients that I had a breakdown

three and half years ago and was a client here myself, you can see people visibly relax. As soon as you say 'I've been where you are, you can get to where I am', you give people hope. Many of the people we see have been told what to do for a long time. The first thing we say to them is 'what would you like to do?'"

And more than hope, mentoring gets results. Karen describes one client who had fought in the first Gulf War, had been diagnosed with post traumatic stress disorder, had been in and out of hospital and saw no way back to work. After nine months mentoring, he is very much enjoying being back in full time employment.

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## 2. Workplace stress in the public and private sector

### Step-Up project at Hull and East Yorkshire Mind

The Step-Up project was launched by Hull and East Yorkshire Mind in 1998. It supports people recovering from mental health problems or emotional distress into education, training, voluntary work or paid employment. Step-Up also works with employers in areas such as mental health promotion and awareness and runs training workshops on managing stress in the workplace. Step-Up also has a partnership with Mires Beck, a semi-commercial nursery, which provides accredited training for people recovering from mental health problems.

Currently, Step-Up is focusing on employers and has applied for funding to employ two people to help employers find ways of providing sustained employment for people experiencing stress at work and to help employers make the "reasonable adjustments" required of them by the Disability Discrimination Act.

Greg Harman is Step-Up project lead. He explains that the idea is based on workshops he ran for the East Riding of Yorkshire County Council, which looked at ways of identifying and acknowledging stress in the workplace.

Greg says, "We've come up with a kind of stress management plan for individuals that covers all areas of stress in and out of work, such as physical ill health, financial worries, children, isolation, and family issues. The plan can be used to record problems at an early stage and as a check list for when problems need to be addressed." He adds, "As someone who has succumbed to stress myself in the past, and had to work my way through it, I know the pitfalls and obstacles to overcome. But, with the right support, it can be done."

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## Stress and mental health in the workplace

### Macclesfield Mind employment project

Macclesfield Mind has been helping service users get back into employment since 1992. Jayne Phillips has been employment project development worker since 1994. She explains, "We have different types of clients; some will never go back to work and we help them to find things to do during the day. Some are returning to work but have been unemployed for ages and need support to return. We also have some clients who are raring to go back to work and we help them with everything from job search and interview skills, to filling application forms."

Some clients have had long periods off sick but retained their jobs, so Jayne will talk to their employers about how they can adjust working practices to support newly returned employees.

She says, "The Disability Discrimination Act means employers have to make adjustments for returning employees. It is quite straightforward when someone has a physical disability, but harder to bring in mental health related adjustments."

Jayne advocates that employers make adaptations to avoid returning employees being over stressed. She says: "We suggest things like taking people off 'frontline'

duties, away from phones, for instance. We also ask them to consider the effect of medication on people."

Stress management is a crucial issue for returning employees who have had mental health problems, perhaps due to work stress in the first place. Jayne says, "We look at things we can do to relieve stress such as relaxation looking after yourself and not letting work pile up. We also concentrate on time management."

Jayne believes that the current culture of working long hours is to blame for much of stress related illnesses. She says, "If you have a line manager who works all the hours God sends, there is huge pressure and expectation on you to do the same. To survive, people need to take proper breaks, proper lunch hours and get outside during the working day."

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## 2. Workplace stress in the public and private sectors

### Case studies of mental health service users' experiences of stress in the workplace

Following discussions with mental health service users regarding their personal experiences of stress in the workplace, a number of case studies have been identified. All names have been changed to ensure anonymity.

#### Private sector: case study one

Emma was working at a restaurant, while also completing a Master's degree, when she experienced workplace stress. At the time, Emma was not on anti-depressants, but believes she had been experiencing depression for years prior to this.

At the restaurant, Emma was under a great deal of pressure to do things quickly and efficiently and she was working really hard to get things done in the time available. There was no let up in the pressure and being short staffed (other employees frequently absent due to stress related illness) only exacerbated the problem and led to extra hours and extra duties. The pressure of having too much to do in a short space of time, with no way around it, began to make Emma feel extremely anxious, which started to affect her ability to perform her job. She believes the stress she was experiencing acted as a trigger to her depression.

The experiences of stress and depression fed off each other and started to spiral out of control. Eventually, Emma had to take four weeks off sick, in which time she was diagnosed with depression. Emma's organisation had nothing in place to support staff experiencing stress and did not seem willing to address the issue at all. Emma believes the way in which the organisation was run was not conducive to ensuring a mentally healthy workforce and that the organisation's underlying culture needed to change. For example, it should be seen as acceptable to have a proper lunch break or take time out.

Emma is now in a new job where she is offered the flexibility she needs to put in place and use personal coping mechanisms. These mechanisms help her to manage both workplace stress and depression and generally improve her mental wellbeing. Below are examples of the personal techniques that Emma has used or currently uses:

- work based counselling
- alternative methods, such as yoga
- diet (for example, 'happy foods').

Emma's current organisation also offers various resources and practices to help staff manage stress in the workplace:

- flexi-time
- relaxation in a quiet room
- the opportunity to listen to music through headphones at her desk
- the opportunity to work from home.

Emma believes that one of her most crucial coping strategies is the support and understanding she draws on from her line manager and colleagues. Without this support, Emma doesn't think she would be able to reach her potential and would be held back by her mental health problem, probably working in a lower level job. Emma feels that the following are key to not being held back by her mental health problem and reducing the risk of workplace stress acting as a trigger to her depression:

- A workplace that promotes a supportive and understanding culture in terms of stress and mental health problems.
- A workplace that allows employees the flexibility to make reasonable adjustments so they can use personal coping strategies.

## Stress and mental health in the workplace

#### Private sector: case study two

Hannah was working as an actuary for a pensions consultancy when she experienced stress burnout. Although she enjoyed the challenge of working for varied clients in the field of pensions, it was a highly pressurised environment with tight deadlines and a heavy workload. Hannah's company transferred her, without consultation, to a London office where she was given new clients and also had to retain her existing clients in another location. Hannah had to work frantically hard to get everything done and meet deadlines and she found that her days started to become a blur.

Hannah couldn't cope with the workload and the pressure she was under and she became anxious and depressed. She also had existing back pain which became worse during this time. Hannah spoke to a senior executive about her workload and the fact that she couldn't cope and she was told to get on with it and do the best she could. There was no assessment of her workload or offer of support. Hannah carried on in these conditions for about a year, believing that she would be able to keep going and get on top of things.

Eventually, Hannah reached breaking point when she set out for a client meeting one day and realised that she couldn't go on anymore. This was the point at which she fully realised she had burnt out.

Hannah went on sick leave and was admitted to a clinic to get some help. Initially following her breakdown, Hannah became a recluse and was terrified by people and any form of contact with them.

She experienced panic attacks and was extremely tearful and emotional.

Following a period in the clinic, Hannah returned to work at the same organisation. She had some of her workload removed and she found that people were generally supportive. Hannah carried on for another four years, but this period turned out to be a downhill spiral in terms of her health, as she hadn't realised how vulnerable she still was. Hannah went part time and this seemed to help for a while, but she then had to be taken off client work and put on background duty as she couldn't cope.

Hannah found that her managers and colleagues were supportive of her but did this through their own kindness rather than because of any formal stress policy or procedures in place. Hannah believes the company did not know what to do in relation to workplace stress or burnout and people could only act on an individual basis in the best way they knew how. She feels that people wanted to help, but the organisation as a whole just didn't have the knowledge or resources in place to facilitate this. Hannah's organisation did try to find roles suitable for her, but eventually she was too shaken up to do any job and had to leave the organisation.

As part of her recovery she saw a private counsellor who specialised in stress burnouts, helping her to slowly build up her coping skills and learn to be around people again. She also looked at her diet and exercise, as well as trying relaxation techniques. Hannah used antidepressants to aid her recovery and joined two support networks.



## 2. Workplace stress in the public and private sectors

Looking back, Hannah believes her organisation could have helped her in a number of ways:

- by addressing the macho culture that makes it unacceptable to admit failure and ask for help
- by listening to her when she first told them she couldn't cope and acting on the information
- helping her with rehabilitation

- teaching managers about stress burnout, what it is, what the signs are and how to deal with it.

Stress burnout affected Hannah long term and she is not yet back in work. She experiences low energy levels, cannot handle pressure and feels panicky a lot of the time. While she thinks it is unlikely that she will return to her old profession, Hannah is planning to retrain for a job she believes will be more suitable for her.

### Public sector: case study three

Kelly worked for a small organisation in the voluntary sector and had a very positive experience there due to the organisation's approach to stress and mental health in the workplace. The organisation had a comprehensive mental health policy and also offered flexible working to all employees.

Kelly has been a mental health service user for over 13 years and has had numerous diagnoses, the most accurate being manic depression. Kelly feels that she needs to be in a workplace that offers her the flexibility to manage her depression as well as workplace stress, and this is what she benefited from in the organisation she was working for.

The following is a summary of the resources and support offered by Kelly's organisation in relation to workplace stress and mental health:

- Stress busting fund: all employees could submit a form to pay for an activity that had busted stress that week, for example, swimming, the cinema or the theatre.
- Employees weren't singled out as being service users or not and everyone was entitled to the same benefits.
- Stress busting day: once or twice a year, all employees would go out for a day together to do a stress busting activity.
- 'Let's have coffee' project. The company would advertise where a group would be having coffee and mental health service users could turn up to have a coffee and a chat. Kelly sometimes attended this as a member of staff but was also able to use this as support if she wanted to.
- General culture of supportiveness and openness around mental health and workplace stress issues.

## Stress and mental health in the workplace

The opportunity to work flexible hours, the supportive culture of the organisation and the specific stress busting initiatives allowed Kelly to manage her depression and cope with workplace stress. She did have an inpatient admission during her time at this organisation, but the supportive and understanding attitudes of her colleagues were a great help in returning to work. Kelly believes that supportive colleagues went a long way to buffering against the effects of depression and stress.

In terms of the difference between the public and private sector, from personal experience, Kelly believes there is a lot of red tape and bureaucracy in the public sector that often prevents employers from being

supportive and helpful and making necessary adjustments for employees experiencing stress and mental health problems. There is also the issue about having policies and procedures down on paper, but not following them through in practice.

Kelly also thinks organisations are often too quick to go down the occupational health route and get human resources involved in the public sector, in order to be seen to be following procedure, when this might not be the most appropriate course of action. Kelly also emphasised the fact that it is often down to the individuals concerned in an organisation. Whether people are prepared to take risks for you and be open and honest about the situation can make a big difference.

### Public sector: case study four

Joanne has had severe depression since 1998 and was diagnosed with bi-polar depression in 2003. She worked in a small, not for profit organisation (approximately 35 employees) in a public relations role. When she first applied for the job, the decision about whether to disclose her depressive illness or not was a great source of anxiety. She did disclose it in the end as she didn't want to work for an organisation that was not open and understanding in relation to mental health issues.

The stress of her job began very soon after starting: she was not given a suitable induction into her role nor was she given any training. This left her particularly vulnerable in terms of not knowing what

was expected of her and she was very much thrown in at the deep end. Joanne experienced work overload in the qualitative sense: she just didn't know how to do the work she was being asked to do, as she lacked the experience. The organisation also made incorrect assumptions about Joanne's previous experience and skills. This built up for quite a while and Joanne was continually being put in situations that she wasn't comfortable with and felt that too much was expected of her, given her previous experience and lack of on-the-job training.

Joanne soon started to experience panic attacks, disturbed sleeping, weight gain and suicidal thoughts. It became clear to her that the stress she was experiencing at work had triggered her depression and a

## 2. Workplace stress in the public and private sectors

vicious cycle began, where the depression exacerbated the stress she felt and vice versa. The two issues became interrelated and it was a combination of both that sent her to breaking point. Six to eight weeks after she started the job, Joanne was fronting the organisation at an exhibition and it was this event that pushed her over the edge and her situation came out in the open.

Joanne believes that she probably would have been able to manage her depression had she not also experienced workplace stress. In hindsight, she thinks that the situation she was put in prevented her from managing her depression successfully and it spiralled out of control.

Joanne was off sick for four to five weeks and she didn't return to the organisation after this. She was actually given an ultimatum and asked to resign or told she would be sacked. Joanne felt unable to challenge the organisation on this as she was so mentally distressed already that she couldn't take on any more.

As far as Joanne knows, there was no stress policy within the organisation and she believes they weren't actually aware of workplace stress at all, let alone how to address it. The organisation did nothing to help her, even when she believes it was obvious she wasn't coping in her role. The

most important thing Joanne feels the organisation should have done was provide proper training to enable her to meet the demands of the job. She also feels that more clarity around her role and what was expected of her would have helped, along with access to counselling and support services to help her cope when she started to experience stress. Joanne also feels that when she became stressed at work, the onus was very much on her to deal with the problem and just get on with it rather than the organisation looking at what they could do to help.

Joanne was affected long term by this experience and is now very cautious when going into new positions or jobs. It took her a long time to get the courage to apply for jobs again as she felt that the whole experience was her fault and that it must be something wrong with her. Joanne initially took on some voluntary work as she felt that this eased her back into working life because she didn't experience any guilt if she didn't feel up to the job some days, since she wasn't taking any money for it.

Joanne feels that she could never go back to a job where expectations are very high and long hours and pressure come as standard as she doesn't want to risk triggering her depression again.

## Stress and mental health in the workplace

### 3. Summary and conclusion

#### Key messages summary

##### For employers

There are a number of key actions that employers can take in order to encourage a mentally healthy workplace:

- Demonstrate and encourage awareness, understanding and openness in relation to the issues of stress and mental health in the workplace.
- Adopt and adhere to formal policies on stress and mental health in the workplace and commit to addressing both issues.
- Allow employees to make reasonable adjustments, for example, flexi-time, working from home or quiet rooms to help them to manage mental health problems and work related stress issues.
- Offer resources or procedures to help manage stress at work and generally improve mental wellbeing, for example, stress awareness training, access to counselling or stress busting initiatives.

##### For employees with mental health problems

- Searching for and applying for jobs can be stressful experiences in themselves, so it is important to recognise and prepare for this.
- Relationships with colleagues are a crucial factor in the experience of stress at work for employees with mental health problems. Therefore, it is important to develop supportive relationships and friendships at work.
- Workplace stress can create mental health problems, or act as a trigger for existing mental health problems which may otherwise have been successfully

managed. This highlights the importance of recognising and guarding against factors in the workplace that may cause stress, or of negotiating adjustments to your working practices, in reference to the DDA if necessary.

- You can play a key role in preventing personal stress by developing awareness of the causes and symptoms of your stress and developing personal coping skills.

#### Conclusion

It is clear from the findings of this comprehensive report that stress in the workplace is almost at epidemic proportions. Employers and employees alike must find ways to manage it, for the sake of employee wellbeing and also for the economic wellbeing of their organisations.

The report clearly presents a number of approaches to improve workplaces. It urges employers to take the necessary steps towards introducing a culture where a stress prevention plan exists, and where stress is acknowledged and managed as part of every day routine. Interventions range from a complete change in organisational culture to simple adaptations any workplace could make, such as ensuring employees get proper lunch breaks, have a manageable workload and so on.

The clear message coming from this report is that employers and employees need to work together to tackle the sources of stress in the workplace head on. At the organisational level, they need to analyse working practices, hours and workloads to develop systems and mechanisms to prevent stress arising in the first place and to support staff when it does.

### 3. Summary and conclusion

At the individual level, when an employee is suffering from stress, employers need to look at individual sets of circumstances and draw up stress management plans to help that particular employee.

But the overriding message from the report is that there needs to be a change of culture within the workplace. Employees need to be able to say to their line managers that they are feeling stressed, and it needs to be acceptable for them to do so. Particularly in the private sector, this is currently not the case.

We know that too much stress can lead to mental distress. For people already diagnosed with mental health problems, the effects can be much worse. It can exacerbate their symptoms or send them into relapse and eventual job loss when they may have already struggled hard to return to work in the first place. With an accepting organisational culture and the right stress management plans in place, this need not happen.

While workplace stress is a huge occupational health problem, it is manageable. What we need is for employers to take the issue seriously enough to take the necessary steps to introduce proper stress prevention and management policies. This report makes it clear that they cannot afford to ignore it any longer. It proves that it makes better economic sense for employers to support current employees than to have to recruit and train new ones, who, if the proper systems are not in place, will become stressed themselves.

Economic considerations aside, Mind's key recommendations are designed to help employers and employees to find the sources of stress at work, to tackle and manage it in the workplace together, in order to create a better, healthier and more productive working environment for everyone.

#### Managing for mental health: the Mind employers' resource pack

This fully revised edition is a must for all employers who want to ensure best practice in mental health promotion at work. It includes a complete guide to good practice and policies on employment and mental health, as well as essential background information on mental illness.

Order the pack from Mind publications at £14.99, plus 50p postage and packing. Call 0844 448 4448 or 020 8519 2122 ext 306 email [publications@mind.org.uk](mailto:publications@mind.org.uk) or visit Mind's online shop at [www.mind.org.uk/osb](http://www.mind.org.uk/osb)

## Stress and mental health in the workplace

### Further information and key resources

For details of your nearest local Mind association and of local services, contact Mind's helpline, **MindinfoLine** on 0845 7660 163, Monday to Friday 9.15am to 5.15pm. Speech impaired or deaf enquirers can contact us on the same number (if you are using BT Text direct, add the prefix 18001). For interpretation, **MindinfoLine** has access to 100 languages via Language Line.

#### Useful organisations

##### British Association for Counselling and Psychotherapy (BACP)

BACP House, 35-37 Albert Street  
Rugby CV21 2SG  
Tel: 0870 443 5252  
Web: [www.bacp.co.uk](http://www.bacp.co.uk)  
Contact for details of local practitioners.

##### British Autogenic Society (BAS)

The Royal London Homoeopathic Hospital  
Greenwell Street  
London W1W 5BP  
Tel/fax: 020 7383 5108  
Web: [www.autogenic-therapy.org.uk](http://www.autogenic-therapy.org.uk)  
For simple exercises in body awareness and relaxation.

##### The British Holistic Medical Association

59 Lansdowne Place, Hove  
East Sussex BN3 1FL  
Tel/fax: 01273 725 951  
Web: [www.bhma.org](http://www.bhma.org)  
Information about holistic approaches to health.

##### The British Wheel of Yoga

25 Jermyn Street, Sleaford  
Lincs NG34 7RU  
Tel: 01529 306 851  
Web: [www.bwy.org.uk](http://www.bwy.org.uk)  
For information about yoga and teachers.

##### First Steps to Freedom

1 Taylor Close, Kenilworth  
Warwickshire CV8 2LW  
Helpline: 0845 120 2916  
Tel/fax: 01926 864 473  
Web: [www.first-steps.org](http://www.first-steps.org)  
For people who suffer from anxiety.

##### The Institute for Complementary Medicine (ICM)

PO Box 194  
London SE16 7QZ  
Tel: 020 7237 5165  
Web: [www.i-c-m.org.uk](http://www.i-c-m.org.uk)  
Send a stamped addressed envelope for details of practitioners.

##### International Stress Management Association (ISMA)

PO Box 348  
Waltham Cross EN8 8ZL  
Tel: 07000 780 430  
Web: [www.isma.org.uk](http://www.isma.org.uk)  
A registered charity for the prevention and reduction of stress. Contact for advice and for details of practitioners.

##### No Panic

93 Brands Farm Way, Telford  
Shropshire TF3 2JQ  
Helpline: 0808 808 0545  
Tel: 01952 590 005  
Web: [www.nopanic.org.uk](http://www.nopanic.org.uk)  
Helpline for people experiencing anxiety. Also, details of local self-help groups.

##### United Kingdom Council for Psychotherapy (UKCP)

167-169 Great Portland Street  
London W1W 5PF  
Tel: 020 7436 3002  
Web: [www.psychotherapy.org.uk](http://www.psychotherapy.org.uk)  
A body of around 80 organisations offering psychotherapy.



## Useful websites

### Mind

www.mind.org.uk

### Advisory, Conciliation and Arbitration Service (ACAS)

www.acas.org.uk

### Confederation of British Industry (CBI)

www.cbi.org.uk

### Chartered Institute of Personnel and Development (CIPD)

www.cipd.co.uk/surveys

### Department of Health

www.dh.gov.uk

### International Stress Management Association (ISMA)

www.isma.org.uk

### Health and Safety Executive (HSE)

www.hse.gov.uk

### Mental Health Foundation (MHF)

www.mentalhealth.org.uk

### Trades Union Congress (TUC)

www.tuc.org.uk

### UNISON: the trade union for people delivering public services

www.unison.org.uk

## Further reading

*The assertiveness workbook*,  
R. J. Paterson (New Harbinger Press 2000)

*The BMA family doctor guide to stress*  
(Dorling Kindersley 1999)

*The complete guide to mental health*,  
E. Farrell (Mind/Vermilion 1997)

*How to assert yourself* (Mind 2003)

*How to cope with exam stress* (Mind 2004)

*How to cope with panic attacks* (Mind 2004)

*How to cope with sleep problems*  
(Mind 2003)

*How to cope with the stress of student life*  
(Mind 2003)

*How to increase your self-esteem*  
(Mind 2003)

*How to stop worrying* (Mind 2004)

*How to survive family life* (Mind 2004)

*Kitchen shrink: food and recipes for a  
healthy mind*, N. Savona (DBP 2003)

*Learn to balance your life*,  
M. and J. Hinz (DBP 2004)

*Learn to sleep well*, C. Idzikowski (DBP 2000)

*Manage your mind: the mental health  
fitness guide*, G. Butler, T. Hope  
(Oxford University Press 1995)

*Making sense of antidepressants*  
(Mind 2004)

*Making sense of cognitive behaviour  
therapy* (Mind 2004)

*Making sense of counselling* (Mind 2004)

*Making sense of psychotherapy and  
psychoanalysis* (Mind 2004)

*Mind troubleshooters: stress* (Mind 2004)

*Relaxation: exercises and inspirations for  
wellbeing*, Dr S. Brewer (DBP 2003)

*The Mind guide to food and mood*  
(Mind 2004)

*The Mind guide to physical activity*  
(Mind 2004)

*The Mind guide to relaxation* (Mind 2004)

*The Mind guide to surviving working life*  
(Mind 2003)

*Understanding anxiety* (Mind 2005)

*Understanding depression* (Mind 2005)

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Registered charity number 219830  
Registered in England number 424348  
ISBN 1-903567-62-9