Public Health Association of Australia:
Policy-at-a-glance – Work and Mental Health Policy

Key message: PHAA will –
1. Promote the benefits of safe and inclusive work for good mental health.
2. Advocate for policy and legislation that reflects the significance of good mental health in the workplace.
3. Advocate for continued research into evidence-based strategies for creating and sustaining mentally healthy workplaces.

Summary: Work is a key social determinant of health. Ensuring that working environments are safe and minimise risks to psychological health is critical. This is the responsibility of the workplace management workers themselves and governments.

Audience: Federal, State and Territory Governments, employer and industry organisations, policy makers and program managers.

Responsibility: PHAA’s Mental Health Special Interest Group (SIG).

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Work and Mental Health Policy Statement

The Public Health Association of Australia notes that:

1. Work is a key social determinant of health. It influences the health and wellbeing of all working populations\(^1,2\) and can provide access to income in addition to social networks, structure, identity, collective effort and personal growth opportunities.\(^3\)

2. Mental health at work is a product of working conditions, the team environment, the nature of the work, the extent to which work impacts upon home life (work-home balance) and the individual (and life events).\(^4\)

3. Workplace interventions to promote mental health and reduce the impact of workplace stress should include primary, secondary and tertiary interventions. Primary interventions are aimed at preventing mental health problems in healthy individuals, while secondary interventions target individuals and responses to stressors. Tertiary interventions react to stress related mental health problems that have arisen.\(^5\)

4. ‘Quality of work’ is meaningful and safe (physically and psychosocially) and is protective against poor mental health.\(^6\) It is a key part of social inclusion and recovery from mental illness.

5. Work characterised by low control, low rewards, high effort and high demands may be more detrimental to mental health than remaining unemployed\(^7\) and can increase risk for mental health problems such as depression and anxiety.\(^4,8,9\)

6. Less skilled occupations and blue collar workers may be more often subject to working conditions not conducive to mental health, such as high demand, excessive overtime, business readjustment and changes in working hours and conditions.\(^4\)

7. Organisations and managers have an important role to play in developing a supportive team environment in the workplace. Team environment (workplace relationships, cooperation, interpersonal conflict, support at work)\(^4\) can be risk factors for depression, whilst socio-economic status and gender may mediate the impact of interpersonal conflict in the workplace.\(^10\)

8. Bullying and harassment in the workplace can contribute to poor mental health.\(^11,12\) Certain groups, such as women,\(^5,13,14\) ethnic minorities,\(^13\) young people\(^5\) and lesbian, gay, bisexual, trans/transgender and intersex people (LGBTI),\(^15,16\) may be more likely to be bullied or discriminated against at work, and thus vulnerable to associated negative health and well-being consequences. Women are also more vulnerable to depression when witnessing the bullying of others in the workplace.\(^12\)
9. Psychological stress in the workplace can contribute to both “absenteeism”\(^{17}\) and “presenteeism”\(^{18}\) in the workplace. There is an association between mental health and drug and alcohol problems, which in turn are associated with both absenteeism and presenteeism in the workplace.

10. Of all the chronic health conditions, mental disorders such as anxiety, major depression and panic disorder are associated with the highest loss of work days.\(^{4,19}\)

11. Lost productivity associated with common conditions like depression and anxiety is estimated at around $2-3 billion per year in Australia.\(^{20,21}\)

12. Returning to and remaining in quality work when experiencing mental illness offers benefits from having purposeful activity and social support, in addition to monetary benefits.\(^{22}\)

13. Employers and health professionals need to work together to allow workers experiencing mental health issues to remain in the workplace where possible and to prevent unnecessary sickness absence and the negative consequences of long term work absence and unemployment.

14. While acknowledging the importance of work for good mental health and recovery, working while ill (Presenteeism”) is associated with lost productivity\(^{23}\) and both the pros and cons of working while ill need to be considered.\(^{24}\)

15. Mental health conditions also have negative economic impacts due to increased job turnover and reduced job retention,\(^{20,25}\) stress claims,\(^{26}\) increased risk of workplace accidents or injuries,\(^{27}\) and a greater number of health services accessed.

The Public Health Association of Australia affirms the following principles:

16. Good mental health is an individual and a community asset.

17. Ensuring that working conditions, management behaviours and team environments are safe and minimise risks to psychological health is critical. This is the responsibility of workplace management, workplace teams, individual workers and governments.

18. Workers who experience mental health issues during their employment or who have sustained a psychological injury (development of a mental health condition as a result of their employment) should be able to:

   a. Have access to information about and support for their psychological injury.

   b. Return to work in a workplace environment that will not aggravate their condition.

   c. Be offered an opportunity to return to their full working potential.
19. Workers at different life stages or experiencing particular life events (26) may have additional or different work and mental health needs reflecting different experiences, roles and caring responsibilities across the life course. Safe and inclusive workplaces promote and support mental health.

20. Public mental health literacy should be improved through promotion of resources by employers, governments, unions, non-government organisations, and industry groups. Organisations such as BeyondBlue and Headsup provide useful resources for mental health.

21. Implementation of evidence-based and/or innovative measures to reduce the risks of psychological harm at work should be supported.

22. Comprehensive job stress and mental health promotion programs should be promoted in workplaces (13), which include strategies targeted at both the workplace and in support of individuals.

23. Workplaces should be supported to assess and manage risks to the psychological health of workers under their control. For resources go to (http://prevention.workplace-mentalhealth.net.au/ or http://www.prima-ef.org/).

24. Ensuring supportive management practices and team environments and addressing bullying and harassment in the workplace are important steps in the process of minimising the problem.

The Public Health Association of Australia believes that the following steps should be undertaken:

25. Federal and state policy and legislation should reflect the significance of good mental health in the workplace. Workplaces should have a good understanding of the working conditions which promote good mental health, and workplace risk factors that contribute to poor mental health.

26. Workplace mental health literacy and promotion is made a priority across all work settings.

27. Employers access existing resources and implement safe workplaces that incorporate good mental health within the structure of the workplace.

28. A greater evidence base for workplace mental health promotion interventions and good practice should be developed by the federal and state governments, employer groups, professional bodies and academics.

29. Employers should be encouraged to have their own anti-bullying/harassment policy which includes:
   a. Acknowledgement that bullying and harassment may be an issue in their organisation and that certain groups may be targeted or vulnerable to the effects of bullying;
b. A statement that bullying and harassment will not be tolerated and a commitment to ensuring it does not occur;

c. Outline of the steps that will be taken to prevent bullying and harassment;

d. A statement of the responsibilities of staff/supervisors and employees;

e. Transparent grievance, investigation and disciplinary procedures; and

f. Training for staff in recognising and dealing with instances of bullying and harassment.

The Public Health Association of Australia resolves to undertake the following actions:

30. The PHAA will promote the benefits of safe and inclusive workplaces for mental health.

31. Advocate for policy and legislation that reflects the significance of good mental health in the workplace, and reflects primary, secondary and tertiary prevention strategies.

32. Advocate for continued research into evidence-based strategies for creating and sustaining mentally healthy workplaces.

ADOPTED 2014, REVISED AND RE-ENDORSED IN 2014 and 2017

First adopted at the 2014 Annual General Meeting of the Public Health Association of Australia. The latest revision has been undertaken as part of the 2017 policy review process.
Definitions and terms:

**Workplace** means a place, whether or not in a building or structure, where employees or self-employed persons work.\(^\text{28}\)

A person is a **worker** if they carry out work in any capacity for a person conducting a business.\(^\text{28}\)

There are a range of employment options including full-time, part-time and casual work and those may be permanent or fixed term.

**Precarious employment** refers to “employment that is uncertain, unpredictable, and risky from the point of view of the worker”.\(^\text{29}\)

**Underemployment** concerns people that “are currently employed, but are willing and able to work more hours”.\(^\text{30}\)

**Mental health literacy** includes increasing awareness of mental illness, reducing stigma, encouraging help seeking and supporting others with mental health problems.

**Bullying** is defined as “repeated and enduring behaviours that are intended to be hostile and/or are perceived as hostile by the recipient”.\(^\text{31}\)

**Working conditions** include hours of work (e.g. overtime), pace of work, remuneration, job demands, decision-latitude, and physical work environment.

References