# Taking the Lead (to Fortify)

### Supporting Workplace Stress & Anxiety Through Uncertain Times & Beyond

Fortify Conference – November 15<sup>th</sup>, 2023

#### **Presenters:**

Valerie Lister, Workplace PH&S Coach, go2HR Terry Bertram, OHS Consultant, WorkSafe BC

Photo credit DBC & Dave Heath







**Canadian Mental Health Association** British Columbia Mental health for all





# Land Acknowledgement

Photo Credit to DBC and Hubert Kang



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# **GROUP GUIDELINES**

- Use person-first language
- Respect Confidentiality
- Phones on silent
- Leave to take a call
- Stand/move around if needed
- Casual speak up if you have questions







### Agenda

- 1. Workplace psychological safety
- 2. Let's talk about stigma
- 3. The mental health continuum
- 4. Healthy coping strategies
- 5. The evolving regulatory landscape

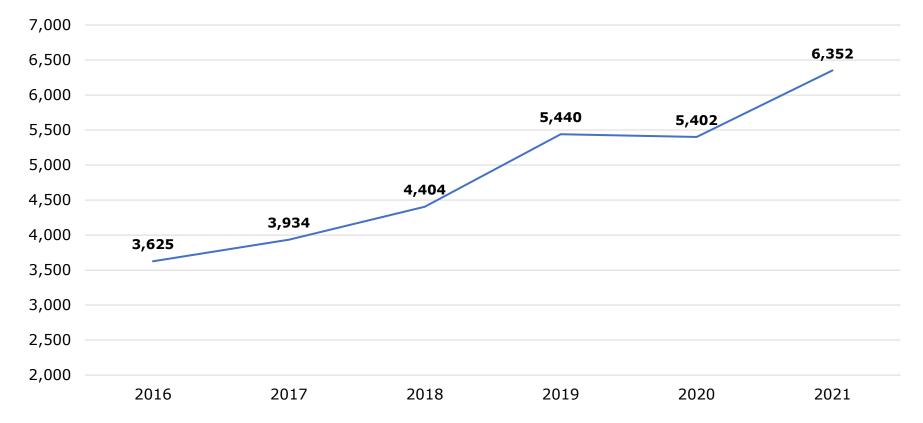
# **Psychological Safety Definition**

- **Psychological safety:** The situation where hazards and risks to psychological well-being are assessed and steps taken to eliminate, where possible, and minimize where elimination is not possible, the impacts of those risks.
- The CSA defines:
- A psychologically healthy and safe workplace as one in which:
- Psychological health and well-being are protected and promoted.
- No harm to worker mental health is allowed to occur in negligent, reckless, or intentional ways.



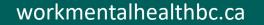


# Psychological Health by the Numbers



**Mental disorder claims reported** to WorkSafeBC include claims where the psychological injury is the primary injury on the claim and claims where the psychological injury develops as a consequence of a physical injury.







### Psychological Health by the Numbers

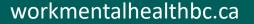
The impact of Psychological Health by numbers in Canada:

1 in 5 Canadians will experience a mental health issue or illness. Economic cost in Canada is estimated at **\$51 Billion** per year. **47%** of workers consider work to be the most stressful part of daily life.

Approximately **25%** of Canada's working population is affected by psychological health issues.

Only **23%** of workers feel comfortable talking to their employer.











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ТҮРЕ	Impact on Individual	Workplace Impact
Self-Stigma	<ul> <li>They believe the negative judgements.</li> <li>Negativity is internalized which leads to decrease in self-esteem.</li> <li>Fear of disclosing at work.</li> </ul>	<ul> <li>Employees who:         <ul> <li>Do not seek help</li> <li>Do not seek promotion</li> <li>Do not seek recognition</li> </ul> </li> </ul>
Peer / Public	<ul> <li>You notice how others with similar challenges / disabilities are treated</li> <li>You are believed to be lazy or even violent (the opposite is true)</li> </ul>	<ul> <li>Difficulty building relationships with peers or leadership</li> <li>Will not be offered opportunities to not "put pressure on them"</li> </ul>
Structural	<ul> <li>Not enough funding for research</li> <li>Fewer mental health services compared to other health care sectors.</li> </ul>	<ul> <li>Outdated policies /practices and programs that limit opportunities</li> <li>High cost of disability claims</li> <li>Recruitment challenges</li> <li>Retention challenges</li> </ul>





#### Strategies to combat stigma in the workplace:



- Have an open door policy
- Share your story with mental health challenges
- Be aware of your attitudes / behaviours.
- Educate yourself / your teams about mental health issues
- Use person-first language





### Strategies to combat stigma in the workplace:

# Use **STOP** to recognize mental health stigma.

#### Does the attitude or action:

Stereotype people with mental health conditions? Trivialize people with mental health conditions and/or the condition itself?

Offend people with mental health conditions?

Patronize people with mental health conditions by treating them as if they were not as good as other people?

Speak up against stigma. Stereotype people with mental health issues?

 ${\sf T}$ rivialize or belittle people with mental health

conditions or the condition itself?

Offend and insult people with mental health issues?

Patronize people with mental health issues by treating

them as if they are not as good as other people?





#### THE MENTAL HEALTH CONTINUUM

	Healthy	Reacting	Injured	III
	Normal Functioning	Reversible Distress	Significant Impairment	Clinical Disorder
Mood	Normal Mood Fluctuations Calmness Ability to take things in stride	Irritability Nervousness Sadness Overwhelm	Anger Anxiety Pervasive sadness or hopelessness	Angry outbursts High anxiety or panic Depression Suicidal thoughts
Attitude	Good sense of humour Good performance	Displaced sarcasm Procrastination Forgetfulness	Negative attitude Poor performance Poor concentration	Inability to perform duties, control behavior and concentrate
Sleep	Normal Sleep patterns Few sleep difficulties	Trouble sleeping Intrusive thoughts Nightmares	Restless or disturbed sleep Recurring nightmares	Inability to fall or stay asleep Sleeping too much / too little
Physical Health	Physically Well Good energy Levels	Muscle tension Headaches Low energy	Increased aches and pains Increased fatigue	Physical illness Constant fatigue
Activity	Being physically and socially active	Decreased activity or socializing	Avoidance Withdrawal	Not going out Not answering phone
Habits	Limited or no substance use or gambling	Regular but controlled substance use and gambling	Increased or hard to control substance use or gambling	Substance use disorder Gambling disorder

#### THE MENTAL HEALTH CONTINUUM

#### ACTIONS TO TAKE AT EACH PHASE OF THE CONTINUUM

SELF-CARE AND SOCIAL SUPPORT		PROFESSIONAL CARE	
Healthy	Reacting	Injured	III
Normal Functioning	<b>Reversible Distress</b>	Significant Impairment	Clinical Disorder
<ul> <li>Focus on task at hand</li> <li>Breaks problems into manageable tasks</li> <li>Identify and nurture support systems</li> <li>Maintain healthy lifestyle</li> </ul>	Recognize limits Identify & minimize stressors Engage in healthy coping mechanisms Get proper nutrition, sleep, rest and exercise	Seek professional help Identify and understand own signs of distress Seek social support and talk to someone rather than	Seek consultation as needed Follow healthcare provider recommendations Regain physical and mental health





### Healthy coping strategies

### **Deep Breathing**

- Inhale for 4 counts
- Hold for 4 counts
- Exhale for 4 counts
- Hold for 4 counts

#### Visualization

- Create vivid and positive images of desired outcomes in our minds.
- Prepare yourself for "What if" scenarios.

### **Thinking Traps**

- Overgeneralization
- Mind Reading
- Catastrophizing





**Typical workplace hazards:** 







# Examples of Psychological Hazards

Bullying & harassment	unwanted, offensive, intimidating behaviours (sexual or non-sexual ) about one or more specific characteristics of the targeted individual.	Job security	uncertainty regarding work availability, including work without set hours.
Career development	career stagnation and uncertainty, under- promotion or over-promotion, lack of opportunity to develop.	Leadership	lack of clear vision and objectives.
Civility & Respect	lack of trust, honesty, respect, civility and fairness.	Recognition and reward	efforts are not recognized in a fair and timely manner.
Harm	incidents involving an explicit or implicit challenge to health, safety or well-being.	Remote work	occupations where access to resources or communications is difficult (farmers, night shifts, offshore work, etc.).
Interpersonal Relationships	poor relationships between managers, supervisors, co-workers, and clients or others.	Roles & expectations	role ambiguity, role conflict, frequent changes to tasks.
Job Demands	unrealistic expectations of a worker's competence or responsibilities.	Workload	work overload or underload, high levels of time pressure.

**IUD** Mental Health

### **Regulatory requirements**

**Bullying and Harassment** 

Violence and Workplace Conduct

Working Alone

New/Young Worker Orientation

Monthly Meeting/JOHSC

First Aid Procedures

Fatigue and Impairment

Safe Work Procedures

**Reporting Unsafe Work Conditions** 

OHS Programs





### How to involve workers:

- Do no Harm to worker health
  - Ask workers about psychological health risks at the workplace.
- Tools that might better support them.
- Discussions in safety meetings and anonymous surveys.
- Designated workplace mental health champion/peer support

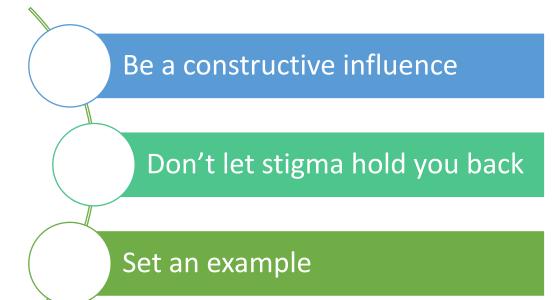


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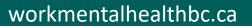
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### How to involve workers











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### **Workplace Mental Health - Tourism & Hospitality**

- go2HR partnership with the Canadian Mental Health Association BC Division (CMHA BC)
- Industry-specific mental health supports, resources and training for front line employees, supervisors, managers and senior leaders:
  - Workplace PH&S Coaches
  - Workplace CARE certificate courses
  - Online Resources BC's Hub for workplace mental health





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#### Workplace Psychological Health & Safety (PH&S) Coach

Do you need resources, have questions or require support to address specific employee mental health challenges?

Want to create a psychologically health & safe workplace but don't know where to start?

**Contact Valerie Lister** vlister@go2hr.ca 604-256-6175



Workplace **Mental Health** Training



Compassionate and Respectful Employer



Learn more & register



#### Featuring:

- Industry specific mental health and PH&S focused articles & resources
- Workplace CARE training
- 3-5 minute Safety Talk videos and more!

www.workmentalhealthbc.ca

### **BC's Hub for Workplace Mental Health**





**Canadian Mental Health Association British Columbia** Mental health for all





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### go2HR Health & Safety Support & Resources

#### **Support Services:**

- Safety Basics for employers
- Resource Library with tools and templates
- Sector-specific and topic-specific initiatives
- 1:1 employer advisory services
- Webinars, presentations, roundtables

#### **Online Learning:**

- Safer Spaces (sexual harassment training)
- OHS Program Fundamentals
- Foundations of Workplace Safety
- WHMIS

Contact: safety@go2hr.ca



# "Seek first to understand, then to be understood." - Stephen R. Covey

Terry Bertram <u>Terry.Bertram@worksafebc.com</u> 250.314.6090

Valerie Lister vlister@go2hr.ca 604 604-256-6175

Photo credit to DBC Kari Medig







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#### Sources:

Reducing the stigma of mental disorders at work: A review of current workplace anti-stigma intervention programs – <u>ScienceDirect</u> Three Types of Stigma: Public, Internalized, and Stigma-by-Association – Post-Secondary Peer Support Training <u>Curriculum (opentextbc.ca)</u> Psychiatry.org - Stigma, Prejudice and Discrimination Against People with Mental Illness <u>Stigma and Discrimination - CMHA Ontario</u> <u>RBC. September 2019. Canadian workers increasingly recognize mental illness</u> <u>http://health.nzdf.mil.nz/mind/about-mental-health/the-mental-health-continuum/</u> <u>https://bcfirstrespondersmentalhealth.com/wp-content/uploads/2017/06/MentalHealthContinuumModel.pdf</u> <u>https://www.canada.ca/en/government/publicservice/wellness-inclusion-diversity-public-service/health-wellness-</u> public sonvants/disability management/fundamentals omployers responsibilities html

public-servants/disability-management/fundamentals-employers-responsibilities.html

National Standard - Mental Health Commission of Canada



