

Workplace Not Darkplace

Employers should eliminate the stigma around discussing mental health at work

Jeffrey Pfeffer & M Muneer



Last year, an email sent by an employee to her colleagues went viral in social media. She just wrote she needed a break to focus on her mental health. The reason it went viral was her CEO's reply: "I just wanted to personally thank you for sending emails like this... You are an example to us all."

But such a response is all too often the exception. More frequently, depression and stress are ignored or stigmatised, not treated as the real illnesses – threats to physical and psychological health and productivity – that they are.

Mental health problems and associated costs are a worldwide issue. But a 2017 WHO report finds that 18% of global depression cases emanate from India. About 57 million people! A 2016 survey of 200,000 professionals in India found that 46% reported suffering extreme stress as a consequence of their work. An ASSOCHAM study shows 43% of private sector employees in India are afflicted with mental health issues at work. Adjusted for population size, India ranks first in the incidence of mental disorders, and low- and middle-income countries tend to have the highest incidence.

The cost burden of mental problems is enormous. Depression shows much comorbidity with other diseases, and research indicates that depression leads to other health problems including cardiovascular disease and diabetes. A systematic review of studies of work-related stress estimated costs to be as high as \$1 trillion per year, with the majority of the expense coming from lost productivity, not direct health costs. We believe that learning and talking about mental health issues at work is a necessary first step to improving mental health in the workplace, and by extension, curbing the enormous costs they create.

Typical symptoms of depression amongst working professionals include mood swings, anxiety, agitation and apathy; insomnia; difficulty in waking



up in the morning; lethargy and drowsiness; lack of interest in daily affairs; over-eating, or conversely loss of appetite; unexplained aches and pains in the body; and increased consumption of alcohol, tobacco.

As clinical depression has risen by around 50% in the last eight years, there has been an increase in other ailments including obesity, diabetes, hypertension and cardiac disorders. Major depression increases absenteeism, 'presenteeism' (reduced productivity) and has direct medical costs.

Employers should build cultures of physical and mental health in their workplaces through management practices that promote wellbeing. In order to get to a place where managers and employees understand the implications of mental health at work, enterprises should stop treating it as something distinct (and less important) than other forms of illness. They should provide comprehensive mental health coverage as part of their medical benefits, all while working to reduce the stigma.

Yet, in India, till a few months ago, mental illness has always been in the list of exclusions of health insurance policies.

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The Indian Mental Healthcare Act came into effect only in 2017, which prompted Irda to mandate insurers to offer this as part of the normal health policy in 2018. In contrast, the US had passed a mental health parity law mandating equal medical coverage for mental and physical illness way back in 2008, but big differences in coverage and access remain. One study found that behavioural care was between "4-6 times more likely to be out-of-network than medical or surgical care", and insurers paid primary care providers 20% more for the same types of care than they paid addiction or mental health specialists.

An important first step is reducing the stigma associated with admitting any sort of mental distress. One board member said

that he would vote out a CEO if he admitted to mental illness. An article about depression in the technology industry noted that admitting to depression could harm company perception and would put funding at risk. A second step entails recognising mental problems as "real" diseases like cancer or heart disease. Neuroimaging studies show changes in the physiology of the brain diagnosed with depression.

Ultimately, the best way companies can eliminate the stigma around mental health at work is to just start talking about it. EY, for example, launched a programme called We Care with the goal of educating employees about mental health issues and encouraging them to seek help. The programme is also centred on support for colleagues who may be struggling with it. Many companies are proactively tying up with an external partner to offer Employee Assistance Programmes. Some organisations are training managers regularly to spot symptoms and offer assistance early. And once the lines of communication are open, HR departments can (and should) consider offering benefits that provide more accessible mental healthcare.

Indian organisations can lead on this front by encouraging employees to get trained regularly, giving them frequent breaks, having stress buster sessions, urging them to break large assignments into smaller ones, and ensuring proper work-life balance. That's probably easier said than done!

Mental illness is enormously costly, yet research advances make the effective treatment of disorders such as anxiety and depression much more possible. Recent research in psychology identified six specific neuro-imaged forms of depression. When treatment was matched to the specific manifestation of the disease – precision medicine applied to mental health – the effectiveness of treatment was substantially enhanced.

For reasons both economic and humane, employers should work to destigmatise mental disorders, increase insurance coverage of treatments and ensure that care uses the best, most recent available evidence.

Jeffrey Pfeffer is a professor at Stanford Graduate School of Business. M Muneer is co-founder of Medil Institute Foundation