

Mental Health in Organizations

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This paper is a review of the current literature on mental health in organizations and it targets an executive audience who aspires to be better equipped to address mental health issues in the workplace. It identifies different types of mental illnesses and symptomatic behaviors. It touches upon the U.S. law that prohibits discrimination against people living with mental illness. It discusses the stressors that affect the prevalence of mental illnesses and the stigmas associated with mental illnesses. It identifies several human resource strategies that can help managers to address mental health issues effectively in their organizations. Implementing those strategies may contribute to enhancing fairness and inclusion in organizations and therefore the likelihood of managing diversity successfully. Finally, it addresses remission from mental illnesses.

Keywords: mental health, mental illness, HR strategies, workplace

INTRODUCTION

Emphasizing Mental Health at Work

For the last two decades, managing diversity and inclusion in organizations has been a forerunner in practice and the scientific literature with tremendous efforts dedicated to its understanding (Gray, Wilcox, & Nordstokke, 2017; Shore, Randel, Chung, Dean, Holcombe, & Singh, 2011; van Knippenberg & Mell, 2016). Diversity refers to many indicators based on which people may perceive themselves and/or others as being different (van Knippenberg, & Schippers, 2007).

Mental health is considered an invisible indicator of diversity and is still a taboo, not only in organizations but also in society in general. It is only when the employees reveal to their employers about their mental illness and related issues that the illness may be taken into consideration by the employer, and that issues and symptoms may be managed in organizations (Memish, Martin, Bartlett, Dawkins, & Sanderson, 2017). Such disclosure about employees' mental health issues may only occur when the

organizational climate is perceived as being inclusive (Phillips, Rothdard & Dumas, 2017; Raymond, Olsen, Ainsworth, Lotia, Harbridge, & Holland, 2019). Therefore, it is very important to address mental health issues in the workplace through an inclusive climate which results in providing a fair treatment to all employees, facilitating peer and organizational support, and enabling the implementation of a psychologically safe environment where mental health issues are free of stigma (Wehman, 2003). For instance, research suggests that inclusive education practices positively influence a teacher's mental well-being, student educational outcomes, and parent experiences (Gray et al., 2017). Another study, conducted by Peterson, Gordon, and Neale (2017), revealed that among the themes that were raised during some interviews, themes such as the meaning of work, disclosure of mental illness, the benefits of working, special arrangements or accommodations, and the work environment were key topics that both employers and employees value to sustain successful employment. Such research supports the importance of workplace inclusion in the reduction of mental health issues and associated symptoms at work, and the enhancement of performance at the individual and organizational levels (Wright, Bonett, & Sweeney, 1993).

The potential negative consequences of active mental illnesses in the workplace include high levels of burnout, absenteeism, accidents, turnover, suicide and may also lead to counterproductive work behaviors such as sexual harassment, workplace bullying and violence (Auten, & Fritz, 2019; Dimoff, & Kelloway, 2019; Richman, Rospenda, Nawyn, Flaherty, Fendrich, Drum, & Johnson, 1999). These consequences are very serious and can negatively impact organizational effectiveness. It is therefore very important from a managerial standpoint to prevent the occurrence of such detrimental outcomes by implementing the appropriate human resource practices to detect, prevent and manage mental health issues and associated symptoms at work (Memish et al., 2017).

This paper aims to bring awareness of mental health issues and to propose solutions to provide appropriate support to employees dealing with mental health struggles. It is a review of the current literature which first defines mental health impairment and identifies several mental illnesses. Second, it discusses the U.S. Americans with Disabilities Act (ADA) law that prohibits discrimination against people living with mental illness. Third, it addresses the relationship between stress and mental health issues and discusses the stigmas related to mental health. Based on the literature, it provides managerial recommendations as to how to implement the best human resource practices to tackle mental health in organizations. Finally, it explores the possibility of remission from mental health illnesses.

LITERATURE REVIEW ON MENTAL ILLNESS AT WORK

Mental Health Impairments and Illnesses

The National Alliance on Mental Illness (NAMI) defines a mental health impairment as a medical condition that disrupts a person's thinking, feeling, mood, ability to relate to others, and daily functioning. Mental illnesses are medical conditions that often result in diminished functioning, i.e., diminished capacity for coping with the ordinary demands of work and life. The criteria for diagnosing a mental illness are provided by the Diagnostic and Statistical Manual of Mental Disorders (DSM) which is published by the American Psychiatric Association (APA) with the latest version of the manual being the DSM-5.

The estimated number of people who suffer from a mental illness at any given point in time is at least 1 in 5 people in North America (American Institute of Stress, 2005; Mental Health Commission of Canada [MHCC], 2012). Mental illnesses are prevalent worldwide with around 450 million people suffering from one or more of these conditions (Dimoff & Kelloway, 2019; World Health Organization, 2004; 2006). Symptoms such as lack of motivation and concentration, difficulty focusing and poor social interactions may lead to reduced well-being and productivity (Johnson, Harvey, Glozier, Calvo, Christensen, & Deady, 2019). In a team environment, colleagues might be among the first people to notice symptoms of mental illnesses (Stromwall, Holley, & Bashor, 2011). It is therefore important to consider the workplace as a possible environment in which detection, prevention and management of

mental illness symptoms and illnesses should be addressed to increase individuals' functioning and organizational effectiveness.

A selection of DSM-5 mental health disorders is described in the following to help employers recognize some of the symptoms an employee may show if the illness has not been diagnosed or if it is not treated efficiently.

Major Depressive Disorder

Someone depressed is likely to feel and look sad, find themselves low on energy or motivation, or no longer enjoying doing things that they used to interest them, might be experiencing depression.

Bipolar Disorder

Another mood disorder also previously known as 'manic depression' is Bipolar Disorder. It is a condition where people experience cycles of extreme moods with episodes of extreme lows, or depression, and extreme highs, or mania. During a manic episode, they feel very happy and have lots of ambitious plans and ideas. They may spend large amounts of money on things that they cannot afford, not feel like eating or sleeping, talk quickly and become annoyed easily.

Schizophrenia

The main symptoms of schizophrenia are the so-called psychotic symptoms (which can also be observed in the context of other mental illnesses). The main psychotic symptoms are hallucinations (hearing or seeing something that isn't real) and delusions (believing something that can be proven to be untrue). Other symptoms include confused thoughts, unusual behavior and lack of motivation for everyday tasks.

Anxiety Disorder

Everyone feels anxious now and then, but when it does not go away and is affecting the person's everyday life, then it can be labeled 'anxiety disorder'. Anxiety disorders may affect the employee's ability to concentrate, sleep and carry out ordinary tasks.

Personality Disorder

Every individual has a unique personality with their pattern of thoughts, feelings and behaviors. These differences are part of normal diversity and help to make human relations interesting. The term personality disorder is not ideal and can lead to stigma. No one likes to be told that there is something wrong with their personality, and some people may use the term inappropriately to discriminate against others. However, personality disorders are genuine mental disorders that cause suffering, so understanding them is important to enable people to seek the help they need. Personality disorder refers to a long-term pattern of thinking, behavior and emotion that is extreme and inflexible. Some people with a personality disorder may appear withdrawn, some dramatic and emotional, and others odd or eccentric. People with personality disorders find it hard to change their behavior or adapt to different situations. They may have trouble sustaining work or forming positive relationships with others.

Eating Disorder

An eating disorder is a serious mental health condition that involves an unhealthy preoccupation with eating, exercise or body shape. It is not always easy to tell if someone has an eating disorder, since they may try to hide it because of shame or guilt. However, some of the behaviors associated with eating disorders include unhealthy dieting, binge eating, purging, excessive exercise, social withdrawal and distorted body image.

Post-Traumatic Stress Disorder (PTSD)

It happens when fear, anxiety and memories of a traumatic event do not go away. The feelings last for a long time and interfere with how people cope with everyday life. PTSD can be caused by traumatic

experiences that involve death, serious injury or sexual violence (actual or threatened). This might include physical or sexual assault, living in a war zone, torture, and natural disasters. Everyone responds to trauma differently.

Substance Abuse Disorder

Drugs and/or alcohol abuse can affect the lives of those caught up in it in ways they might not expect. It can affect health, relationships, job and education. Recognizing there is a problem with drugs and/or alcohol is an important first step in seeking help and treatment.

Attention Deficit Hyperactivity Disorder (ADHD or ADD) and Autism Spectrum Disorder (ASD)

These conditions are not considered mental illnesses, but rather developmental disorders. It is, however, important to mention them here as employees showing symptoms of these disorders could see their functioning in the workplace altered in ways similar to that of mental illnesses. These developmental disorders are also indicators of diversity. ADHD involves symptoms including inattention, hyperactivity and impulsive behavior. These symptoms are associated with learning, behavioral and emotional problems. Autism is a lifelong developmental disability that affects how people behave and interact with the world around them. It may be mild, moderate or severe. The main features of autism are difficulty in social interactions and communication, and restricted and repetitive behaviors and interests.

The Law in the United States of America

To address the issues of discrimination toward individuals with disabilities, the American with Disability Act (ADA) was signed and became law in 1990 and was later amended with changes effective in 2009. The civil rights protections are given to individuals with disabilities similar to those provided to individuals based on race, color, sex, national origin, age, and religion by the Title VII Civil Rights Act of 1964. The ADA guarantees equal opportunities in public accommodations, employment, transportation, state and local government services, and telecommunications.

ADA intends to prohibit discrimination based on disabilities, although studies have found both negative and positive effects of such practice. For example, the ADA placed a great burden and hiring cost on employers and caused a decrease in the employment rate of disabled people (Barnard, 1990, 1992; DeLeire, 2003). Also, the determination of “disability” and “qualified individual with a disability” may induce considerable litigation (Barnard, 1990). On the other hand, ADA includes individuals with mental impairment, which was considered as novel and revolutionary (Scheid, 2005). With this coverage, the employers are reminded that they should not discriminate against people with mental illness when hiring and managing them in organizations. Moreover, with the establishment of the ADA law, employers are enforced to hold their stigmatized attitudes and behaviors to fairly treat employees living with mental illness.

Stressors and Mental Illnesses

People living with mental illness are vulnerable to stressors coming from their environment, such as work and family conflicts, high job demands, economic insecurity, low job autonomy, and long work hours, to name just a few (Goh, Pfeffer, Zenios, & Rajpal, 2015). This vulnerability, when exposed to such stressors, can trigger the emergence of mental illness symptoms or relapse episodes. Several studies that examine mental health vulnerability to stressors focused on nursing, a profession with a high level of occupational stress. Elsayed, Hansan, and Musleh (2018) examined work stress, coping strategies, and levels of depression among nurses working in psychiatric hospitals. They found that stress and depression are prevalent among psychiatric nurses and they recommended implementing programs that aim at teaching them how to deal with stress at work and improving their coping strategies.

Another study conducted with firefighters examined the relationship between occupational stress and mental illness symptoms as well as the moderating effect of work recovery strategies (Sawhney, Jennings, Britt, & Sliter, 2018). Following up on semi-structured interviews with 20 firefighters and a literature review, a total of seven work recovery strategies emerged: work-related, and stress-related discussions,

time spent with coworkers/supervisor, exercise, recreational activities, relaxation, and mastery experiences. Moreover, in a consecutive study, it was found from surveying 268 firefighters that the positive relationship between experienced occupational stress and mental health symptoms was stronger when firefighters were less frequently engaged in work recovery strategies. Thus, having the opportunity to open up and talk about mental health issues at work, and receive support from colleagues and employers during difficult times and situations, plays an important role in managing the symptoms.

Given this vulnerability, employees living with mental illness need to receive support especially during periods of uncertainty such as during the COVID-19 pandemic (Duan & Zhu, 2020). Providing the right psychological interventions and workplace accommodation to fulfill the needs of employees with mental impairments will contribute to enhancing their productivity and their contribution to the success of the organization (Villotti, Corbière, Fossey, Fraccaroli, Lecomte & Harvey, 2017).

Stigmas Related to Mental Illnesses, Still Prevalent in Workplaces and Society

Mental health struggles are most often hidden because of the related negative stereotypes still present in our society and organizational culture (Dobson, Szeto, & Knaak, 2019). These negative stereotypes may refer to assumptions such as people living with mental health issues may be violent and not as competent, reliable, stable, and/or capable of performing as a 'normal' person (Seeman, Tang, Brown & Ing, 2016). This negative perception often leads to dehumanizing the person living with mental health struggles, which may negatively impact self-esteem, productivity, and increase suicidal thoughts and/or behaviors (Elraz, 2017).

Moreover, these pejorative connotations related to mental health issues may make the employees and their employers uncomfortable discussing such issues in the workplace, leaving employees with mental health issues without clear support from their employers. People living with mental illness often face stigma, without receiving proper support, throughout their careers. If mental health illnesses are continually ignored, they can hurt a person's career such as stifling growth. Such persistent problem has long time damaging consequences such as experiencing the glass ceiling effect over a lifetime career. Indeed, people living with mental illness may be more likely to experience discrimination when it comes to moving upward in the hierarchy of a company (Dinh, Strazdins, & Welsh, 2017) because they are victims of those negative stereotypes related to mental health impairments.

Sometimes, individuals suffering from mental illnesses may encounter problems with the law, which may result as being part of the stigma. Recent research conducted in the U.S. shows that approximately 20% of inmates in jails and 15% of inmates in state prisons are estimated to have a serious mental illness (Treatment Advocacy Center, 2016), other research suggests that most of the inmates in jail and prison suffer from some sort of mental health issues (Franke, Vogel, Eher, & Dudeck, 2019) and once released from prison, this population is likely to be socially excluded and discriminated against in organizations since no law protects former inmates. This situation may require rehabilitation of former inmates to help them reenter the workforce after being incarcerated and contribute again to society. Such rehabilitation may require them to receive medical and psychological treatment (Semenza & Grosholz, 2019; Wakeman, McKinney, Rich, 2009). Once treated, former inmates may reenter the workplace again and become productive employees. Treating job applicants based on their qualifications and not based on their criminal background is a step towards a fair selection process that will encourage the employment of people living with mental health challenges and who have been incarcerated.

Reasonable Accommodations to Enhance Mental Health in the Workplace

Managing mental health in organizations is possible and may significantly contribute to reducing the likelihood of negative consequences related to mental health struggles (Buys, Wagner, Randall, & Yu, 2016; Nexø, Kristensen, Gronvad, Kristiansen, & Poulsen, 2018). In this section, we will identify human resource practices that may be implemented to detect, prevent, and manage mental health issues at work.

Organizational Justice and Inclusion

Managing perceptions of organizational justice and inclusion is very important to enhance the likelihood to reach positive outcomes. Research suggests that employees' perceptions of organizational justice and inclusive climate reduce the likelihood of experiencing mental health issues at work. Organizational justice is defined as employees' perception of how fair their organization treats them on four dimensions: distributive justice (i.e., perceptions of fairness regarding the distribution and allocation of resources, and outcomes), procedural justice (i.e., perception of fairness regarding the procedures used to determine the outcomes), informational justice (i.e., perception of fairness regarding the quality and quantity of information received), and interpersonal justice (i.e., perception of fairness regarding the dignity and compassion offered by the employer during the interpersonal interaction) (Colquitt, 2001; Colquitt, Conlon, Wesson, Porter, & Ng, 2001; Elovainio, & Virtanen, 2020; Herr, Bosch, Loerbroks, Genser, Almer, van Vianen & Fisher, 2018).

Perception of justice can be considered a dimension of an inclusive climate in organizations. Inclusion was defined by Shore et al., (2011, p. 1265) as "the degree to which an employee perceives that he or she is an esteemed member of the workgroup through experiencing treatment that satisfies his or her needs for belongingness and uniqueness". Therefore, when the climate is perceived as being inclusive, group members feel recognized by their peers, and they feel valued for their distinctive contribution to the organization's success. Managing perceptions of fairness and inclusion in organizations contribute to enhancing mental health at work and reduces the likelihood of negative consequences related to mental illnesses. For example, a study conducted by Ybema and van den Bos (2010) found that distributive and procedural justice contributed to lower depressive symptoms, and distributive justice contributed to lower sickness absence in the following year. They also found reversed effects where sickness absence contributed to lower perceptions of distributive justice leading to higher depressive symptoms a year later. This research reveals the importance of justice in organizations as a means to enhance the well-being of people at work and to prevent mental health issues and absenteeism at work. Similarly, Spell and Arnold (2007) found that the interactive effects of distributive and procedural justice climates significantly reduce individual feelings of both anxiety and depression (Mor Barak, Findler, & Wind, 2003) and that justice climate was negatively related to burnout (Moreover, Moliner, Martinez-Tru, Peiro, Ramos, and Cropanzano, 2005). Thus, implementing a diverse, fair, and inclusive climate in organizations appears to be beneficial for employees' health and well-being. Employees who perceive being included and fairly treated in organizations are less sick and in better mental health (Ndjaboué, Brisson & Vézina, 2012).

Diversity Training

Providing diversity training that brings awareness of mental health issues and illnesses may be a first attempt to reach out to those employees who need mental health support and equip other employees to become receptive to working with people living with mental disabilities. Developing compassion and empathy towards people living with mental illness in the workplace is essential for establishing an inclusive and supportive work environment free of stigma (Roberge, 2013). Such support may come from their coworkers, as well as their supervisors. Providing diversity training that focuses on perspective taking and understanding differences that touch upon difficulties, challenges, and realities of people living with mental illnesses may enhance the effectiveness of diverse teams. It may also help team members to identify symptomatic behaviors and provide appropriate support to these mentally challenged employees (Bezrukova, Spell, Perry, & Jehn, 2016). Moreover, implementing training programs that aim to teach employees how to manage stress at work and to improve their coping strategies and problem-solving skills are recommended strategies to improve mental health in organizations (Elsayed, et al., 2018). The training program may be conducted by an external consultant, by an HR representative, or by a team leader member of the organization. During the training session, *providing mental health resources*, such as networking with mental health organizations like the National Alliance on Mental Illness (NAMI), the National Institute of Mental Health (NIMH) and the Substance Abuse and Mental Health Services Administration (SAMHSA). Employers could consider inviting guest speakers from these organizations

to talk to employees about mental health at work and provide a discussion forum where employees can share their concerns about mental health with the expert.

Idiosyncratic Deals

It is highly recommended to provide idiosyncratic deals (I-deal) that fulfill the needs of those employees with mental health conditions while enhancing the bottom-line effectiveness of the organization (Hornung, Glaser, & Rousseau, 2018). These I-deal may take different forms such as offering flexible work arrangements for which both parties (employee and employer) agree, e.g., a workweek of only 2 or 3 days (Vanajan, Bültmann, & Henkens, 2020; Wang, Wang, Yao, Hsu, & Lawler, 2019). Certain mental health conditions may require such type of accommodation in order for the employee experiencing mental illness to be included in the workplace and contribute to the success of the organization. Such accommodation could be allowing the employee to work remotely from home (Hager, 2018; Vander Elst, Verhoogen, Sercu, van den Broeck, Baillien, & Godderis, 2017; Wells, 2019). Again, such accommodations must be considered reasonable from both parties, the employee and employer involved.

Wellness Programs

Implementing wellness programs that address awareness of mental health issues in life and at work, and offer relaxing activities such as a walk during lunch time, meditation, yoga or art therapy classes during break time to help manage stress and mental illness symptoms (Van Lith, 2016). Indeed, such activities may be a stress reliever and overtime might enhance the productivity and effectiveness of all employees. Such practices may contribute to the prevention and management of mental health issues at work.

Employee Assistance Programs

Providing employee assistance programs or providing an anonymous hot-line phone number where therapists can be reached out to discuss any concerns that employees may have regarding mental health issues are important resources for employees. Psychological support can be offered on or off-site. When employees have easy access to such type of support, it helps them to release stress and gain awareness of their coping mechanisms that can prevent relapse and/or manage mental illness. Employees who do not have a diagnosed mental illness but still experience symptoms could benefit from confidential therapy sessions, and coping mechanisms that enhance functioning may be discussed with the therapist.

Work-Life Balance Practices

Work-life balance is defined as being “an equilibrium between the amount of time and effort somebody devotes to work and personal activities, in order to maintain an overall sense of harmony in life” (Clarke, Koch, & Hill, 2004, p. 121). Obviously, when employees reach a balance in between their life and work, it may positively affect their mental health. There are several human resource initiatives and practices that can be implemented “to assist employees to better balance their work and family responsibilities, gain improvements in well-being and mental health while providing organizational benefits. There is a large variety of family-friendly policies which include but are not limited to the following: flexible working hours, job sharing, part-time work, compressed workweeks, parental leave, telecommuting, on-site childcare facility. Also, employers may provide a range of benefits related to employees’ health and well-being, including extended health insurance for the employee and dependents, personal days, and access to programs or services to encourage fitness and physical and mental health. Still, other practices may support children’s education, employees’ participation in volunteer work, or facilitate phased retirement. (Lazar, Osoian, & Ratiu, 2010 p. 203) “

Thus, implementing these work-life balance practices can be viewed as supporting employees’ health, well-being, and work-life balance in organizations. They are preventive managerial strategies that can reduce the negative outcomes related to mental health issues and as a result enhance individuals’ functioning and organizational effectiveness (Weinzimmer, Baumann, Gullifor, & Koubova, 2017).

Compliance With Treatment and Functioning at Work: Remission Is Possible!

The relationship between mental health issues and functioning at work depends on mental stability experienced by employees suffering from mental illness. When unstable, employees who suffer from mental illness may require hospitalization, which may lead to absenteeism at work. Employers must be able to understand the health conditions of their employees and not discriminate based on such a situation. Instead, showing support during those difficult times become an important way to manage the situation in the workplace. When an employee requires hospitalization, it is in his/her best interest to be provided with medical attention that will help them recover. Such a goal should also be shared by the employer because when mental illnesses are detected and treated early, this minimizes the financial impact on the organization (Callander, Lindsay, & Scuffham, 2017).

Remission, defined as a level of symptomology that does not interfere with an individual's behavior, is possible (Belrose, Gibert, & Trousselard, 2019; Kwakernaak, Swilden, van Well, & Janssen, 2020). To achieve remission, it requires the employee to commit to the treatment. Prescribed medication is often part of the treatment in addition to long term psychotherapy, followed by self-care and healthy habits (Cleary, Schafer, McLean, & Visentin, 2020). When an employee with mental health struggles is followed by a medical doctor and supported by their employer to accommodate their special needs in relation to the disease and its remission, adequate levels of functioning at work can be achieved. Workers with mental illnesses can be as productive as any other employee. However, they often require their employer to be a health partner in their journey to recovery by providing them with mental health resources and creating a supportive and psychologically safe work environment and offering enough health coverage for continuous psychotherapy (Wells, 2019).

CONCLUSION

Mental health in organizations is still taboo and demystifying mental illnesses and its related stigmas are very important to find solutions that will benefit both the employer and the employees. This paper made several recommendations as to how employers can support their mentally ill employees. Employers should be able to recognize signs of mental illness as this is the first step towards the management of the illness in the workplace. Legally and emotionally, the employee should not be discriminated against or stigmatized based on their condition. A safe and supportive environment, which includes relevant training and resources should be provided to all employees, vulnerable or not, to maintain their mental health. Following these recommendations will help employees with mental health issues feel safer at work, reducing their stress levels and leading to better performance and reduced absenteeism. Thus, this paper is an attempt to reach out to the community to better value the contribution of people living with mental illness by proving them with the appropriate support in organizations. More research is needed to better demonstrate the positive effects of such support in the workplace. Indeed, gathering this information will be needed when comes the time to discuss with policymakers (Barling, & Cloutier, 2017) about financing proper mental health support and training in organizations nationwide, private as much as the public.

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