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EDITORIALS

Stigma and discrimination of mental health problems: workplace implications

There is a current policy spotlight on providing greater employment support for people with mental health problems [1,2]. The key role of occupational health professionals in helping employers and employees to negotiate common mental health problems in the workplace has previously been emphasized [3]. This editorial will focus on one key aspect of mental health problems in the workplace: stigma and discrimination.

There is evidence that people with mental health problems report being turned down for a job because of their mental health problem [4,5] or stopping themselves from looking for work because they anticipate discrimination [6]. Disclosure of a mental health problem in the workplace can also lead to discriminatory behaviours from managers and colleagues such as micro-management, lack of opportunities for advancement, over-inferring of mistakes to illness, gossip and social exclusion [7].

A framework for understanding these phenomena conceptualizes stigma as comprised of the three problems of: knowledge (ignorance or misinformation), attitudes (prejudice) and behaviour (discrimination)[8]. We have recently used this framework to undertake a survey of employer's knowledge, attitudes and workplace behaviours [9]. Of the 502 employers who participated, a number of concerns were reported about hiring applicants with a mental health problem including: (i) symptom concerns such as threat to safety of other employees or clients (17%), person would be incapable of handling stress (14%) and strange or unpredictable behaviour (11%), (ii) work performance concerns, particularly impaired job performance (20%), (iii) work personality concerns, particularly absenteeism (29%) and (iv) administrative concerns including level of monitoring needed (7%) and negative attitude of other employees (2%).

In a study by Manning and White [10], standard of previous work (89%), job description (87%), whether receiving treatment (69%), time off sick in previous year (68%) and diagnosis (64%) were reported as factors always or usually considered in hiring decisions. Fenton and colleagues [11] similarly found that employment record (78%), sickness record (69%), diagnosis (36%), detention under the Mental Health Act (36%) and medical opinion regarding fitness to work (7%) were most commonly reported as influential factors.

Krupa [12] highlighted four assumptions underlying workplace stigma: (i) people with mental health problems lack the competence to meet the demands of work, (ii) people with mental health problems are dangerous or unpredictable in the workplace, (3) working is not healthy for people with a mental health problem and (4) providing employment for people with mental illness is an act of charity. These assumptions vary in their salience and intensity based on a range of organizational, individual and societal factors.

By considering evidence on prevailing knowledge, attitudes and workplace behaviours of employers and line managers, occupational health advisors can dispel myths such as those highlighted by Krupa [11] above and address concerns such as those highlighted in our recent study. The literature on factors that influence hiring decisions should be considered to ensure that organizations are complying with the Disability Discrimination Act when hiring and supporting employees.

Occupational health professionals also have a key role in supporting job applicants and employees who disclose a mental health problem. In a US Survey of professionals and managers with a mental health problem, 87% reported disclosing their illness to someone at work. Of those who had disclosed, the following reasons were most commonly given: (i) experiencing symptoms 32%, (ii) feeling that employment was secure 32%, (iii) feeling disclosure would not lead to negative circumstances 29% and (iv) experiencing hospitalization 20% [13]. This suggests that disclosure either occurs in times of crisis when the person is not able to conceal their illness or at times where they feel valued and secure in the workplace.

In the UK, different legal considerations apply when a person decides whether or not to disclose. The legal implications of disclosure are discussed in a recent paper, which highlights the contextual factors that need to be considered [14]. By facilitating applicants and employees to disclose and make reasonable accommodation requests in keeping with personal preferences, legal requirements and organizational considerations, occupational health professionals can contribute to this process being positive for both employee or applicant and employer or line manager. This function along with the previously outlined roles in terms of educating and supporting line managers and employers are at the core of challenging stigmatizing knowledge, attitudes and behaviours in the workplace and tackling what is a serious issue for mental health service users and for British business.

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