



## Speak Up About Mental Health

### Introduction

We all experience changes in our mental health, both “ups” and “downs,” at different times in our lives: feelings of happiness when celebrating an important milestone, excitement and anxiousness when starting a new job or buying a home, or sadness when a friend or loved one moves away or leaves us. Feeling a full spectrum of emotions is normal and healthy. At times, it is actually helpful for us to experience emotions such as stress and anger because it can motivate us to act, and help us build empathy for others when they go through challenges.

Sometimes we may feel pressure to only show our best self. We may feel the need to silence some emotions and keep our feelings to ourselves in work or social situations. We do this because we might feel shame, or fear being judged or treated differently, which may be a result of **stigma**. To combat this, we need to increase our comfort with, and understanding of, mental illness. It is important to have conversations about mental health at your workplace. Everyone can help reduce stigma by speaking up about mental health and speaking out against unhealthy attitudes that contribute to stigma.

### WHAT is a Mental Illness and How Does it Develop?

One in five Canadians live with a mental illness and one in four people will experience a mental health concern at some point during their lifetime. According to the Canadian Mental Health Association (2013), mental illness costs the Canadian economy an estimated \$51 billion a year, and each day 500,000 people will miss work due to a mental health issue (CMHA, 2013). The terms mental illness, mental disorder, or psychiatric condition are all used to describe a wide range of conditions that affect a person’s emotions, thoughts, and behaviours. Mental health illnesses can influence how a person views themselves and their environment, and how they interact with the world around them.

Mental illnesses have different levels of severity and can affect individuals of any age, gender, income, or education level. There is currently no consensus on what causes someone to develop a mental illness; however, there are known risk factors such as genetics, biological traits, or lived experiences (e.g., stressful situations in childhood, or at school or work, experiencing violence or other traumatic events or circumstances).

Those with a mental illness experience unique challenges just like other illnesses, yet it’s often harder for those living with a mental illness to talk about it. This is largely because those experiencing mental health illness may be unfairly judged or treated due to **stigma**.

### Know the Facts About Mental Health (*Adapted from CMHA, 2013*):

**Myth:** People with a mental illness are dangerous.

**Fact:** The vast majority of people living with a mental illness are not violent.

**Myth:** People who experience a mental illness can’t work.



**Fact:** Workplaces are filled with people who have experienced a mental illness. Such individuals have the same potential to work at any level, just like anybody else, depending on their own abilities, experience and motivation. Some people benefit from changes at work to support their goals, but many work with few supports from their employer.

**Myth:** A person who has had a mental illness can never be “normal.”

**Fact:** People with a mental illness can and do manage their conditions just like other illnesses.

## WHAT is “Stigma?”

**Stigma** involves negative attitudes and actions towards an individual because of a mental or physical illness, or other personal characteristic. It’s a false perception of an individual or their behaviour, developed out of fear and misinformation. It can include making negative judgements, assumptions, or comments about a person, their condition, or a particular trait. Stigma can lead to prejudice and **stereotypes** (unfair judgement and labelling) and **discrimination** (treating someone differently on the basis of a personal characteristic).

## WHY is Stigma a concern?

The effects of stigma are harmful to an individual’s health and well-being. Stigma leads people to assume that those living with mental health problems are not normal, are possibly dangerous, that they are to blame for their condition, and that they could easily get over it if they wanted to. The truth is, individuals don’t choose to have a mental illness and are unlikely to recover fully without proper support and treatment. These misunderstandings affect how people view and treat those living with such problems. They may exclude or deny them opportunities for employment or career advancement, housing, and social interactions. Stigma also influences how individuals feel about themselves, causing feelings of shame, self-blame, and low self-esteem. Given the effects, experiencing stigma can lead to the development or worsening of mental health conditions or symptoms over time.

Despite how common it is to have a mental illness, more than 60 percent of people with a mental illness won't get the help they need. While there are several barriers which may affect access to treatment (e.g., availability, cost, knowledge of available services), stigma is found to be the largest one. This is because individuals living with a mental illness may fear judgment and consequences from disclosing their condition. Feelings of self-blame and low self-esteem, or the illness itself may also affect a person’s belief that they can be helped, and they may not properly follow their treatment and management plan. As a consequence, individuals may delay getting support early when it would be most helpful, or may not get help until their condition severely affects their daily life and functioning.

Workplaces can offer a network of personal and program supports for improving mental health, yet only 23 percent of Canadians are likely to feel comfortable discussing their condition with their employers. Studies show that stigma surrounding mental illness leads to the underuse of health services at work such as Employee



Assistance Programs and on-site counseling. This may be because employees worry they could suffer negative opinions and effects on career opportunities if management is made aware of their mental health condition. All employees should know that accessing Employee Assistance Programs and health services at work is strictly confidential. No personal or private information is shared with employers.

**HOW can I help reduce stigma?**

To reduce stigma, which contributes to negative attitudes toward people living with a mental illness, we need to start by dispelling the myths that are still prevalent and learn more about the facts. Doing so will help create more accepting, understanding, supportive environments. Just by reading this and furthering your understanding, you are already helping to reduce stigma. One way to take action is by having constructive, honest conversations about mental health. Words are powerful. What we hear and say affects how we think, as do the beliefs of those around us. Our words can also hurt those living with mental illnesses, whether we are aware of their condition or not. Our conversations also influence the social acceptance of openly discussing mental health issues and asking for help. Read the chart below to learn how to build positive, sensitive conversations about mental health.

<b>Instead of Saying:</b>	<b>Try using the words:</b>	<b>Why it matters:</b>
He/she is mentally ill.	He/she has a mental health problem, or he/she is experiencing a mental illness.	A person’s illness doesn’t define them. It’s one part of who they are. Put the person first, and the condition second and separate.
He/she is bipolar. He/she is depressed.	He/she is living with bipolar disorder He/she has depression.	Again, the person is not the disease, but has an illness.
Suffering with, or a victim of a mental illness.	Experiencing, being treated for, has a diagnosis of, or has a history of mental illness.	Words like suffer or victim is negative and may reduce empowerment to seek treatment.
Crazy, Psycho, Insane, Schizo, Nuts.	Avoid such negative terms when describing a person or situation.	These terms can be hurtful with negative hints behind them.
Happy pills, Uppers, Downers.	Prescription drugs, medication, antidepressants.	This can downplay or belittle the condition.
I’m so depressed (if used casually).	I am feeling unhappy, down, or upset.	It can make light of the condition and those who have it.
Committed suicide.	Died by suicide.	Suicide is not a crime, therefore it is not “committed”.



(adapted from *Partners for Life*, 2016)

Stigma stems largely from misunderstanding and misinformation. We often fear and reject the things we don't understand. By better informing ourselves of what individuals in our home and work lives are experiencing, we will be more empathetic, supportive, and accepting. More importantly, we won't fear judgement or negative consequences from talking about mental health, and we will feel more empowered to get help when needed.

### **Make it Happen at Your Workplace**

1. **Hold mental health awareness activities.** Promote Mental Health Awareness Week. Host presentations from local mental health organizations. Promote workplace mental health programs. Offer training sessions to team leaders and management to help create a supportive environment for mental health promotion.
2. **Speak up.** When you hear someone saying hurtful comments about mental illness or a person experiencing a mental health condition, share the information you've learned that may counter those negative perceptions. Encourage sensitive, respectful language.
3. **Educate yourself and your colleagues.** Gaining and sharing knowledge about mental health can create a culture of empathy and understanding at work. Share helpful resources via email or bulletin boards related to mental illness, bouncing back from challenging situations, stress management, and work-life balance (e.g., articles, local events, support groups). Below are some links you may find helpful to use in your workplace.

### **Resources & Websites**

- Mental health support and resources [click here to access the Work Health Life website](#)
- Mental Health Injury Toolkit: learn about workplace stress and what to do about it: [click here to access the OHCOWs website](#)
- Strategies and tools to help employees, supervisors, managers, and unions promote positive mental health at work: [click here to access the workplace strategies website](#)
- Mental Health Works: workplace mental health training and education: [click here to access the Mental Health Works website](#)

### **True or False**

1. A person who has had a mental illness can never be “normal.”
2. Stigma involves wrongful attitudes and behaviours towards someone because of a mental or physical illness, or other personal characteristic.
3. Instead of saying, “She is depressed,” it’s better to say, “She is living with depression.”
4. . Most people living with a mental illness will seek out the help they need to get better.



5. If I access Employee Assistance Programs at work, my personal information will be kept private and confidential.  
(Answers: 1. False, 2. True, 3. True, 4. False, 5. True)

**Key Reference:**

Shepell. (2016). Mental illness in the workplace: Removing stigma. Retrieved May 2, 2016 from [click here to access the Shepell's website](#)

**Other References:**

- CMHA. (n.d.). Myths about mental illness. Retrieved August 22, 2016 from [http://www.cmha.ca/mental\\_health/myths-about-mental-illness/#.V7tWV5grKUK](http://www.cmha.ca/mental_health/myths-about-mental-illness/#.V7tWV5grKUK)
- CMHA. (2013). Mental health for all fact sheet: Mental health is everyone's concern. Retrieved from [click here to access the Canadian Mental Health website](#)
- CMHA. (2016). Stigma. Retrieved June 23, 2016 from [click here to access the OHCOWs website](#)
- Hanisch, S., Twomey, C., Szeto, A., Birner, U., Nowak, D. & Sabariego, C. (2016). The effectiveness of interventions targeting the stigma of mental illness at the workplace: A systematic review. BMC Psychiatry, 16(1). doi: 10.1186/s12888-015-0706-4
- MHCC. (n.d.). Topics: Stigma. Retrieved May 2, 2016 [click here to access the Mental Health Commission website](#)
- Partners for Mental Health. (2016). Not myself today: Language dos and don'ts. Retrieved May 2, 2016 [click here to access the Partners for Mental Health website](#)
- Sickel, A. E., Nabors, N. A., & Seacat, J. D. (2014). Mental health stigma update: A review of consequences. Advances in Mental Health, 12(3), 202-215.