

LEARNING THE SIGNS

IIRSM SPOKE TO **STEPHEN MERCHANT** IIRSM, THE HEALTH, SAFETY AND RISK ADVISER FOR SAMH, SCOTLAND'S LEADING MENTAL HEALTH CHARITY.

I have been involved in health and safety for over 20 years, and have spent a lot of that time working with the fire services. Firefighters are all too often involved in stressful situations and can face traumatic events. From that, I went to work mainly for the NHS, in both local authority and voluntary care sectors. I began to work for SAMH as Health, Safety and Risk Adviser in June 2006, so I'm still rather new to the post. It's a new position in a number of ways. Before I was appointed, there were a number of people who dealt with health and safety at SAMH, but they all also had other remits. I'm the first dedicated health and safety specialist here, and have responsibility for health and safety across the whole of Scotland.

SAMH is Scotland's leading mental health charity. We provide services to over 3,000 people across Scotland who have direct experience of mental health problems. When I joined SAMH, I was surprised to learn that one in four people are currently suffering some kind of mental health problem. The people who use our services get in touch with us through a variety of ways – some may be referred by their GPs or social workers, while others seek out our services for themselves. It's important to remember that everybody's situation is different and deserves our fresh attention. People with mental health problems deserve not just good but excellent policy, services and opportunities. Mental health is everyone's business and as such has to be on everyone's agenda.

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THE IMPACT OF MENTAL HEALTH

One of the big difficulties is that too many people confuse the issues of stress and mental health. Stress is, of course, a big problem which can affect people both at work and at home; it can lead to very serious conditions such as heart problems and high blood pressure. Mental health problems are much broader, and also include other conditions, such as depression, anxiety and schizophrenia.

The significance of these issues was highlighted by the World Health Organisation, which calculated the cost of varying diseases using the disability-adjusted life year (DALY) as a comparator. Estimates for Western European countries, including the UK, show that mental health problems now account for more DALYs lost each year than any other health condition. The figures for 2002 show that 19.2% of the total loss was attributable to mental health problems, compared with 17.5% for cardiovascular disease and 16.5% for cancer. The costs of mental health problems are greater than the costs of smoking and drinking combined. In Scotland, around 30% of all GP consultations are associated with mental health problems. A third of all sick leave among people in paid employment in the UK is because of stress, anxiety and depression.

TRAINING

At SAMH, one of our major forms of support that we provide is employment-related training, to enable people who use

our services to gain access to mainstream employment. We offer training in horticulture, IT and woodworking. Where possible, this training enables people to return to mainstream employment. Even where this is not the case, it helps them to build self-confidence and self-esteem. We can't always promise to get people back to where they were before their problems began, but we can help them on the path to recovery.

SAMH's policies and procedures are transparent and available to anyone. As an organisation, SAMH has a very positive ethos of recruiting people with experience of mental health problems. A number of people who have used our services in the past now work with us. Service users are involved on the Board, ensuring they are involved in all the organisational decision-making processes. We hope that this makes people more secure in using our services, as we share their vision and objectives.

STIGMA AND PREJUDICE

Given the frequency with which mental health problems occur, employers must do all they can to identify those employees who have or may be at risk of a mental health problem, and do all they can to address these problems. Unfortunately, the expectations of people with mental health problems are often worryingly low. Employers are too often only concerned about their ability to work and hold down a job and the many myths, stigma and discrimination all increase the problems experienced by people who have a mental health problem.

David Denton, Chair of the Board of SAMH, spoke out about the fact that too many people are prejudiced about mental health, saying: "We cannot tackle the issue of stigma unless we engage a wider audience. We need to move outside of our comfort zone and talk to those who are sceptical, ignorant or dismissive." We must remember that mental health problems are a form of disability; as with many other disabilities, the general public tends to label and prejudge it. Many employers do have a better understanding now of physical disabilities and are more comfortable with adjusting their workplaces to meet the needs of an employee in a wheelchair, for example. Unfortunately, this is rarely the case for someone with a mental health problem.

IN THE WORKPLACE

SAMH also gives advice to people about how to develop their own mental health and wellbeing. Some of this advice can be very straightforward, such as talking about their feelings, eating well, keeping active and doing something they enjoy. It's also important for employers and line managers to be trained so that they do what they can to meet the needs of their employees. Line managers need to appreciate that long hours, unrealistic targets and overwork can all contribute to any problems.

When someone with a mental health problem starts to work for us, we sit down with them and work out their objectives and goals at the start. We discuss possible trigger mechanisms to help both them and their line manager understand their difficulties and encourage people to talk to their line manager if they are struggling. Some employees in other organisations have used a 'traffic light' system to help their line managers understand how they are doing at any given point: green means that they are feeling fine, and red shows that they are in need of help. If a line manager sees an amber light, they should try not to add to an employee's stress that day and should discuss how they are feeling.

We appreciate that every business has a lot of work to do, and these are issues which employers are right to consider carefully. If an employee is operating heavy machinery, for example, an employer has a duty of care both to that employee and to the rest of the workforce. But ultimately, encouraging employees to work with their employers to develop assessment tools and help them manage their issues should help to make people more productive. How people who have mental health problems are managed is crucial and, as with any disability, employers should make reasonable adjustments under the Disability Discrimination Act. Employers have a duty of care to assess issues which are exposing an employee to ill health, including mental health problems.

Our main advice is to intervene early if any problems arise. Don't push people away or pretend that the problems don't exist. Do demonstrate that you're exercising your duty of care, making reasonable adjustments, and treating employees fairly and equally. Prevention is always better than cure.

THE TRUE COSTS WHAT'S IT WORTH?

SAMH commissioned the Sainsbury Centre for Mental Health to undertake an analysis of the social and economic costs of mental health problems in Scotland. Its final report – What's it Worth? – was launched at the Scottish Parliament on 22 November 2006. It examines not only the costs of providing health and social care services to the economy, but also the personal costs of mental health problems.

The study's findings were shocking. In 2005, the total cost of mental health problems in Scotland was £8.6 billion. These costs include absence from work and the cost of welfare benefits. This is equivalent to 9% of Scottish GDP and is more than the total amount spent in Scotland by the NHS on all health conditions combined. The human costs of mental health problems include the impact on people's lives and relationships and, of course, suicide. The total amount spent in Scotland by the NHS on all health conditions combined was £7.7 billion in 2004/05.

Mental health problems have a significant impact on employment. The study calculated the costs of the major factors. All figures are for the year 2004/05.

- **Sickness absence:** Taken together, stress, anxiety and depression constitute the single most important cause of sickness absence from paid employment in the UK, accounting for around 60 million lost working days each year. Scotland's share of the national output loss was nearly £360 million in 2004/05.
- **Worklessness:** There are around 2.8 million people on Incapacity Benefit in the UK. 35% of these cite mental health problems as the main reason for their claim. This represents a loss to the Scottish economy of £915 million per year.
- **Unpaid work:** Mental health problems reduce the capacity of individuals to undertake unpaid work as well as paid work, such as informal care. Losses attributable to mental health care problems in Scotland cost an estimated £781 million per year.
- **Premature mortality:** 835 suicides in Scotland also have a financial cost. Taking into account the reduction in working life and average earnings, the cost of lost output attributable to premature mortality associated with mental health problems is £323 million per year.

The report – What's it Worth – can be downloaded from www.samh.org.uk/assets/files/112.pdf.