

Creating an evidence-based mentally healthy workplace

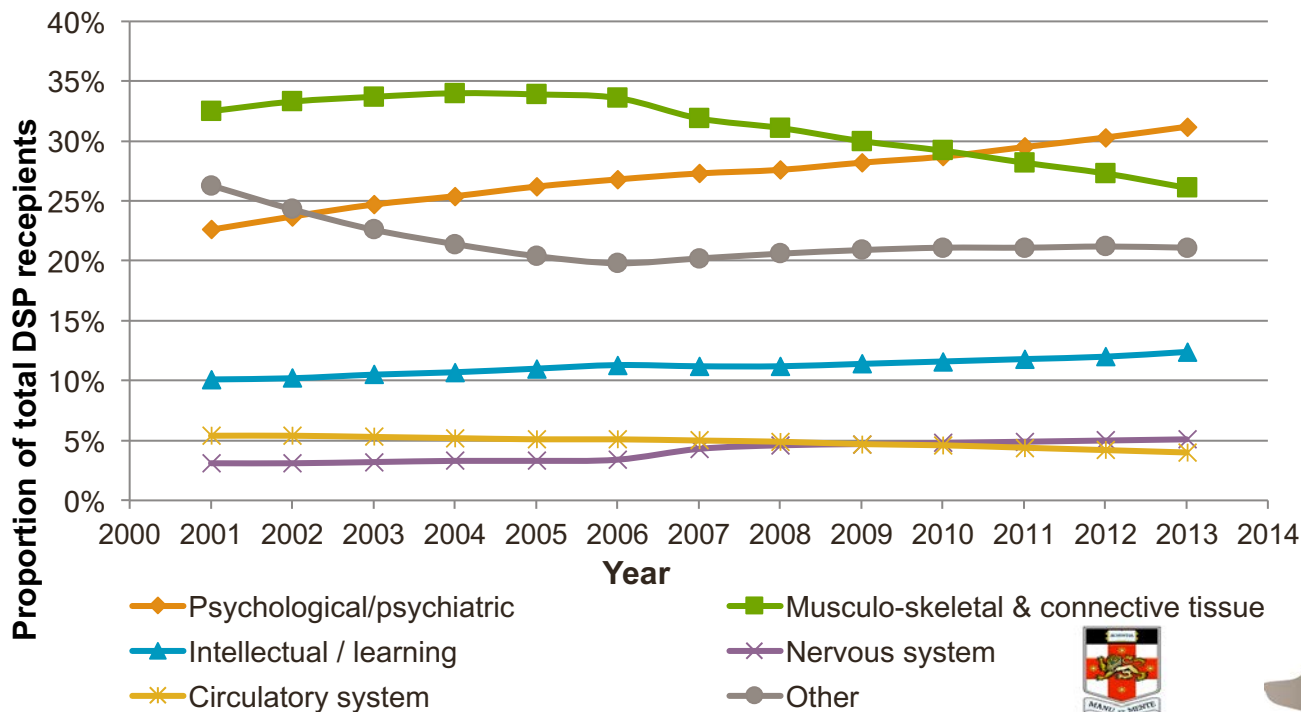


A/Prof Samuel Harvey
Chief Psychiatrist
Black Dog Institute, UNSW Sydney



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What is the nature of the problem we are trying to solve?



- Mental disorder also the only major condition to be increasing as a cause for major workplace injuries
- Huge cost to society (\$12 billion per year) and individuals

Key questions

1. How do workplace factors impact on mental health?
2. What type of workplace interventions are effective, particularly in high risk industries, like first responders?
3. What does this mean for what an other organization – what should they reasonably be expected to undertake?



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The role of job strain in understanding midlife common mental disorder: a national birth cohort study

Samuel B Harvey, Dilan A Sellaheewa, Min-Jung Wang, Josie Milligan-Saville, Bridget T Bryan, Max Henderson, Stephani L Hatch, Arnstein Mykletun

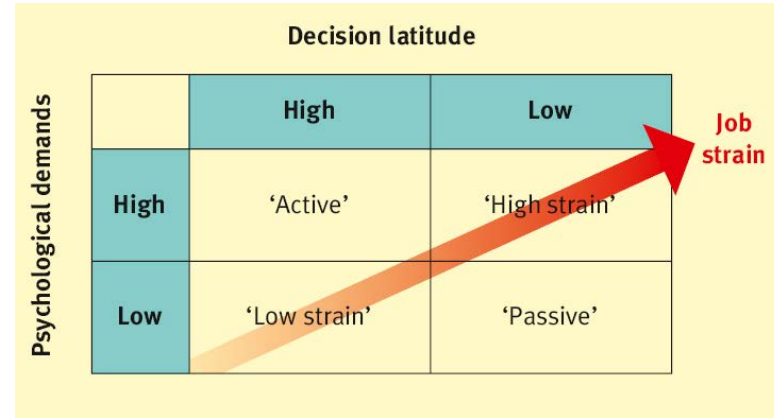


Lancet Psychiatry 2018

Published **Online**

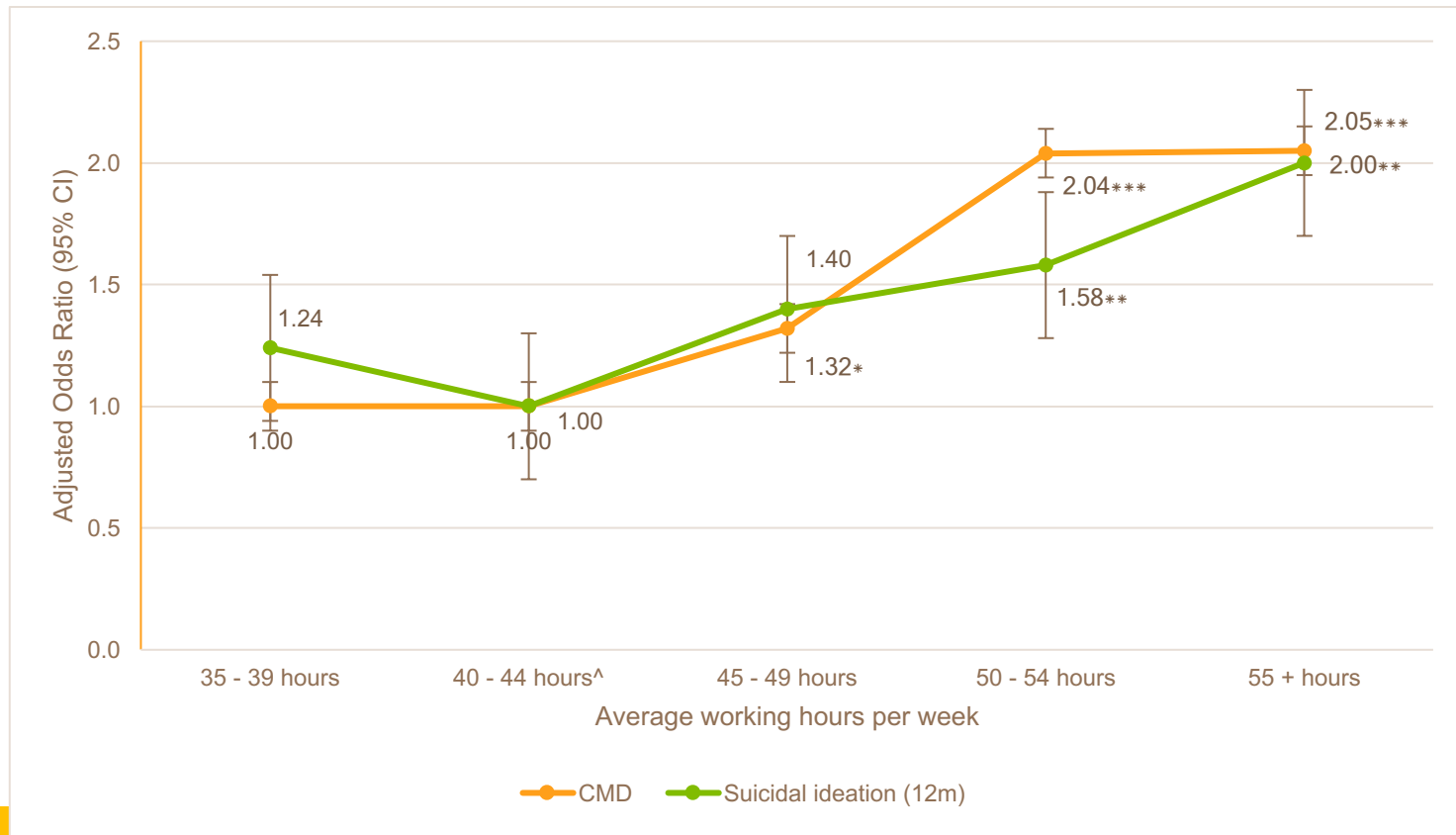
May 10, 2018

- 6870 working individual followed over the first 50 years of their life
- Examined the link between job strain (high job demands and low job control) and future CMD
- High job strain remained an independent predictor of future CMD (adjusted OR 2.2)
- Population attributable fraction 14% (compared to 8% for non-work stressful events)



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Working hours of Junior Medical Officers



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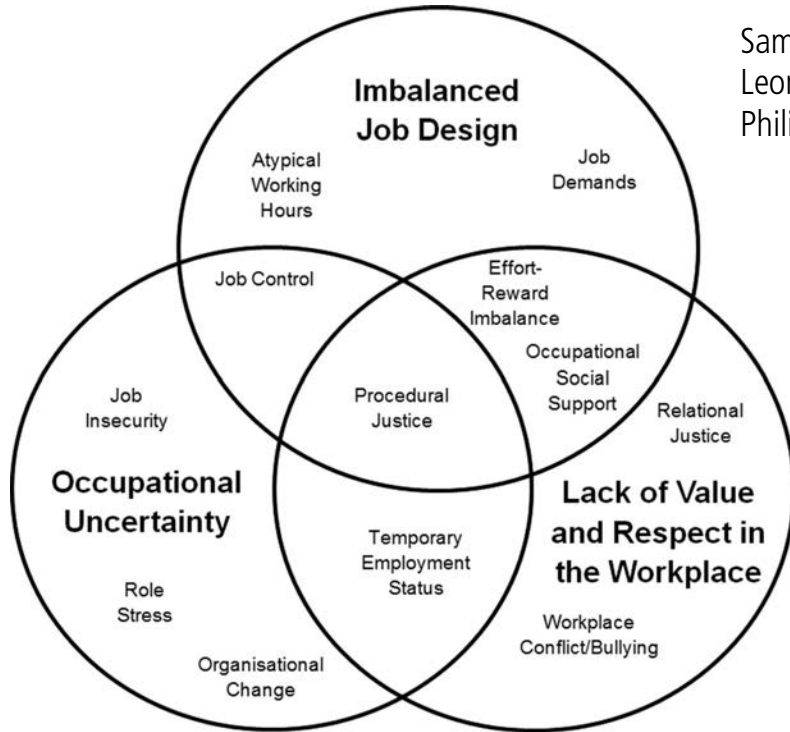


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Psychiatry
Medicine

Can work make you mentally ill? A systematic meta-review of work-related risk factors for common mental health problems

Samuel B Harvey,^{1,2,3} Matthew Modini,¹ Sadhbh Joyce,¹ Josie S Milligan-Saville,¹ Leona Tan,¹ Arnstein Mykletun,^{4,5,6} Richard A Bryant,⁷ Helen Christensen,² Philip B Mitchell^{1,2}



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Key questions

1. How do workplace factors impact on mental health?
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DEBATE

Open Access

Workplace mental health: developing an integrated intervention approach

Anthony D LaMontagne^{1,2*}, Angela Martin³, Kathryn M Page^{1,2}, Nicola J Reavley², Andrew J Noblet⁴, Allison J Milner¹, Tessa Keegel^{5,6} and Peter M Smith^{6,7,8}

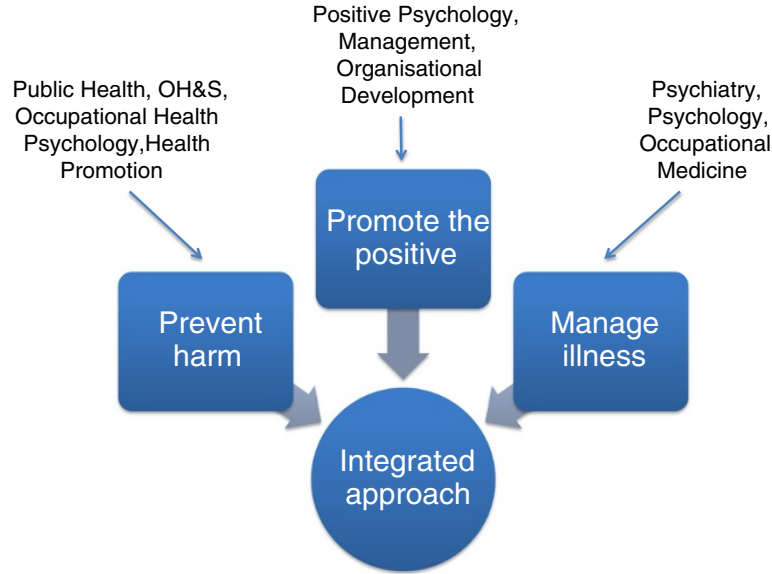
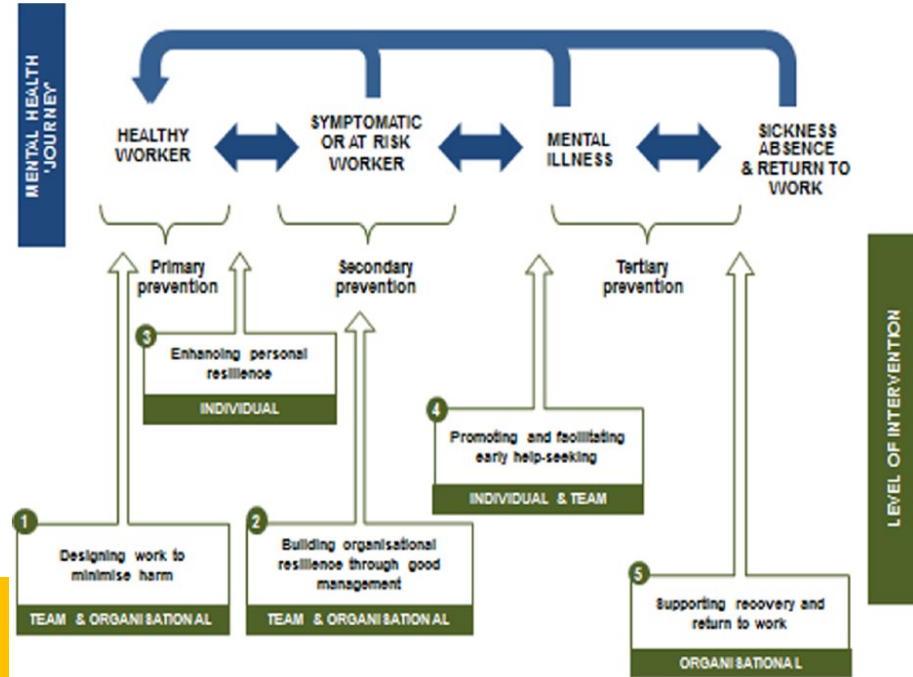


Figure 1 The three threads of the integrated approach to workplace mental health.

A framework to create more mentally healthy workplaces: A viewpoint

Katherine Petrie¹, Sadhbh Joyce¹, Leona Tan^{1,2},
Max Henderson³, Anya Johnson⁴, Helena Nguyen⁴,
Matthew Modini^{1,2}, Markus Groth⁵, Nicholas Glozier⁶
and Samuel B Harvey^{1,7}

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Interventions	Symptom reduction	Occupational outcomes
Increased employee control	★ ★	?
Physical activity	★ ★	★
Workplace health promotion	★	★
Screening	★	★
Counselling	★	★
Cognitive behavioural therapy (CBT)-based stress management interventions (SMI)	★ ★ ★	?
Psychological debriefing following a potentially traumatic event in the workplace	Strong evidence against	?
CBT for established depression or anxiety disorder	★ ★ ★	★ ★
Exposure therapy for established anxiety disorders and post-traumatic stress disorder (PTSD)	★ ★ ★	★ ★
Medication	★ ★ ★	?

Psychological Medicine (2016), **46**, 683–697. © Cambridge University Press 2015
doi:10.1017/S0033291715002408

Workplace interventions for common mental disorders: a systematic meta-review

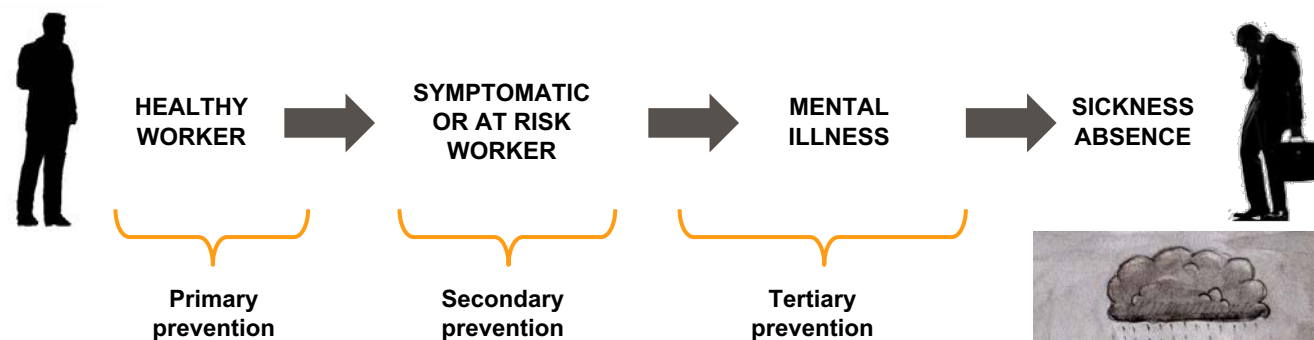
S. Joyce¹, M. Modini¹, H. Christensen², A. Mykletun^{3,4,5}, R. Bryant⁶, P. B. Mitchell^{1,2},
S. B. Harvey^{1,2,7*}

**THE MENTALLY
HEALTHY
WORK
PLACE ALLIANCE**



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Development of evidence-based workplace interventions for first responders in NSW



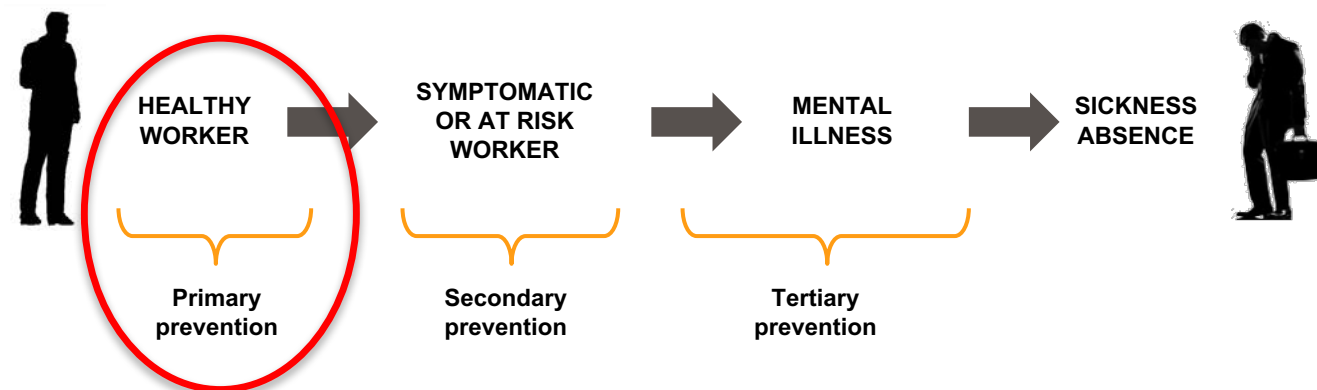
Prevention

Reactive



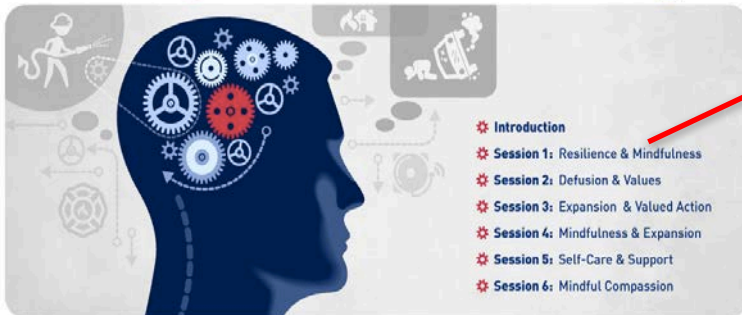
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Development of evidence-based workplace interventions for first responders in NSW



- Could we come up with new ways to prevent some cases of mental illness?
 1. Pre-employment selection
 2. Reduction of known risks
 3. Resilience training

Resilience@Work (RAW) Mindfulness Program



🎧 Audio | 🏠 Credits | 🗺️ Course Map | 📖 Bookmark | ⏮️ Resume | ✉️ Email | ? Help | ➡️ Exit

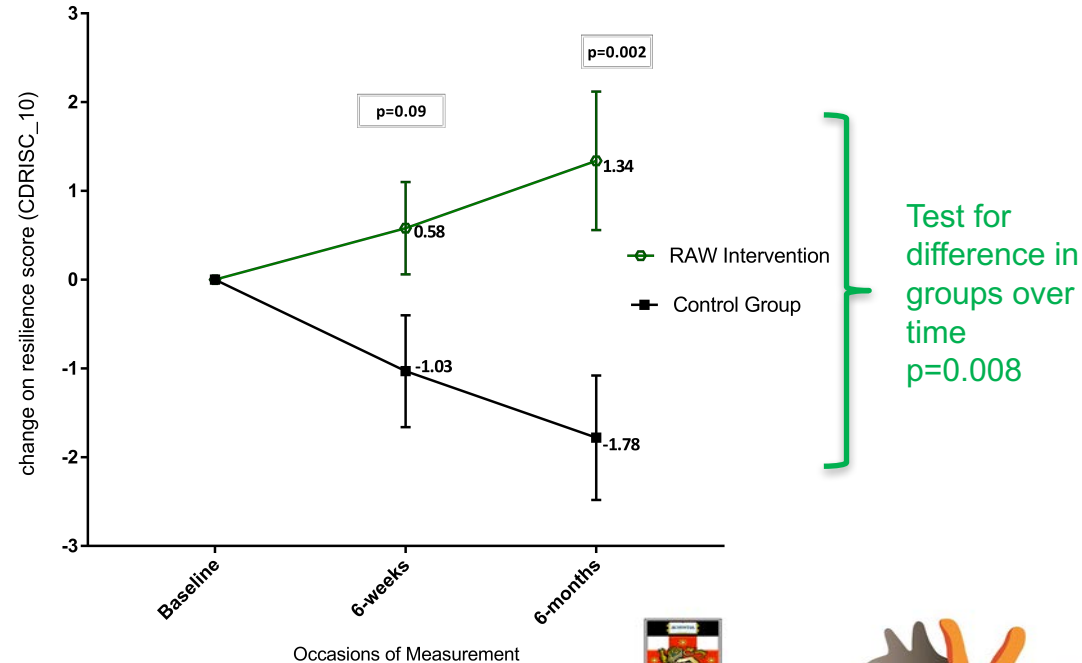


- Six sessions
- 20-25 minutes each
- Delivered via iPads

Theoretical underpinning :

- Mindfulness based Cognitive Therapy
- Acceptance & Commitment Therapy
- Compassion focused Therapy

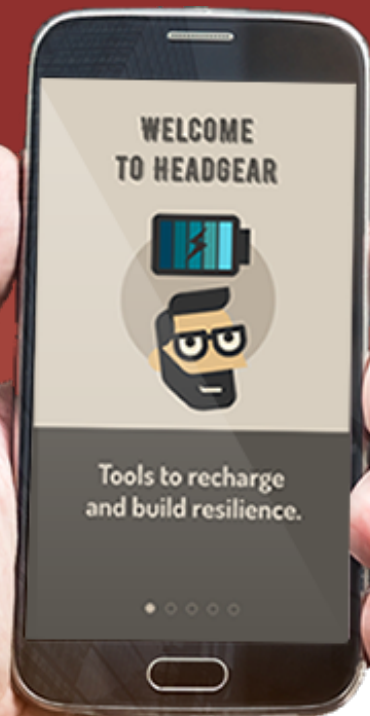
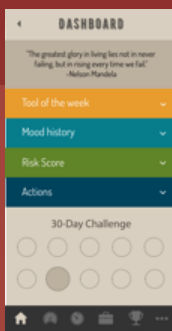
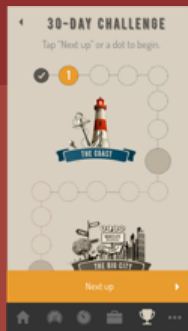
RCT of mindfulness training amongst rescue workers (n=143)





HEADGEAR

TOUGHEN YOUR NUT



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Mood Tracking



Information about risk



BAT / Mindfulness training



Links to immediate support if needed



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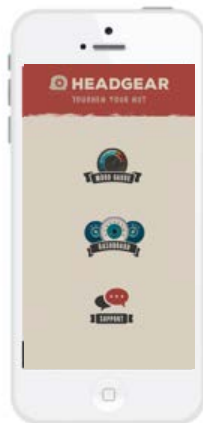
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Headgear Trial



vs

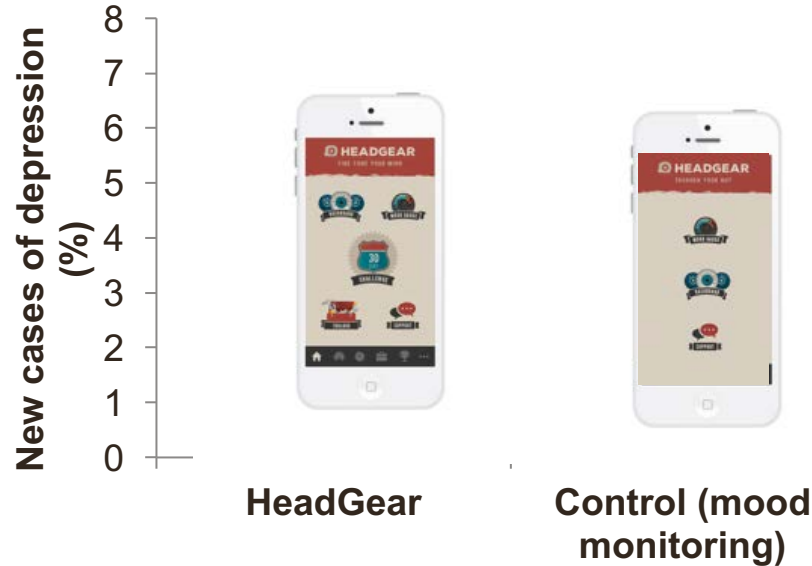


- 2271 'healthy' workers
- None had depression at the start of the trial
- Largest ever trial of a mental health app



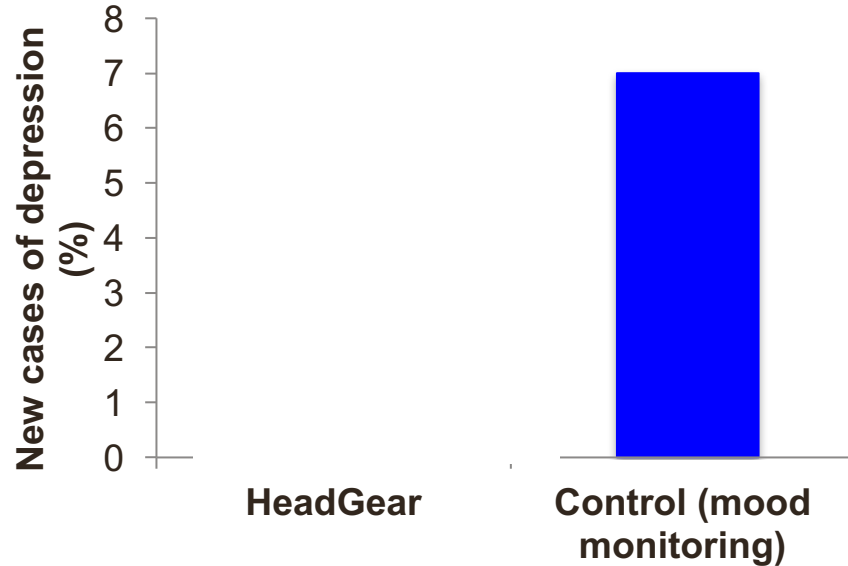
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Does it work? Can an app help prevent depression?

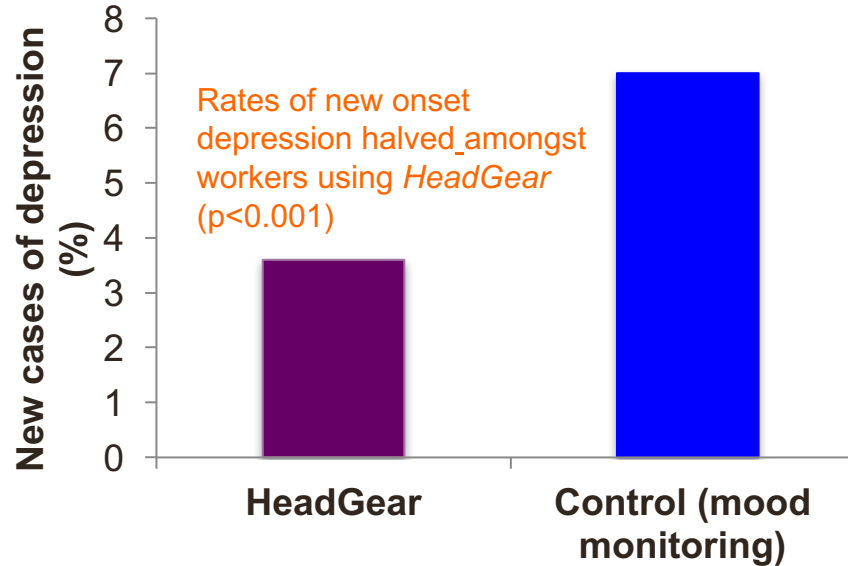


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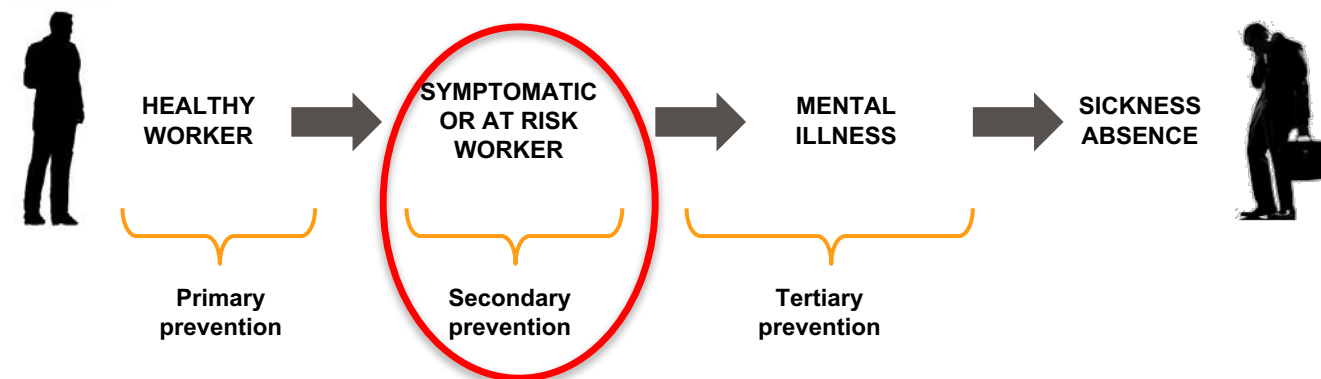
Does it work? Can an app help prevent depression?



Does it work? Can an app help prevent depression?



Development of evidence-based workplace interventions for first responders in NSW



- Psychoeducation (needs to be done correctly)
- Wellbeing checks (still researching)
- Manager mental health training



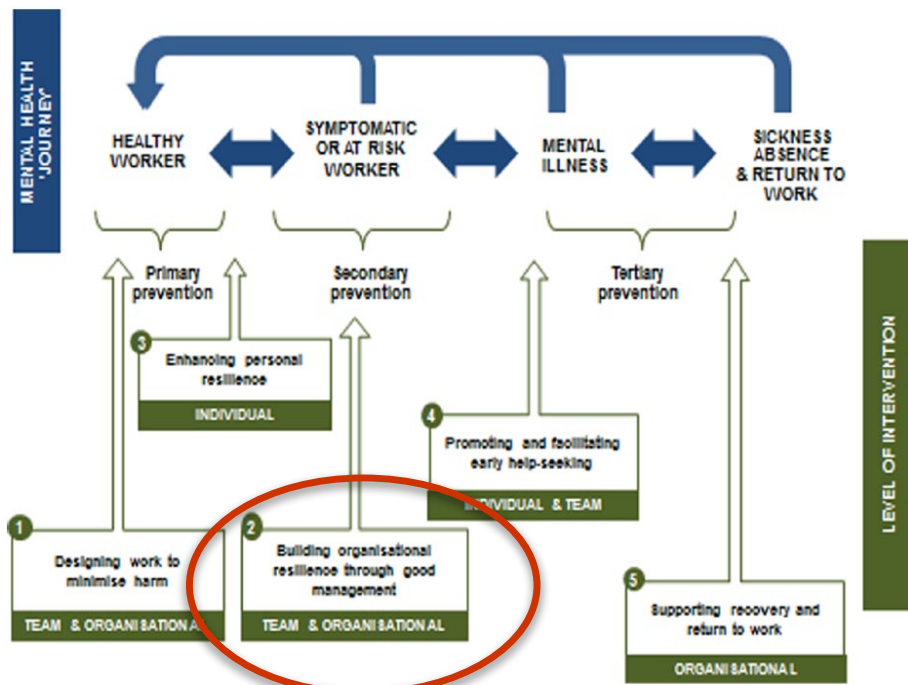
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A framework to create more mentally healthy workplaces: A viewpoint

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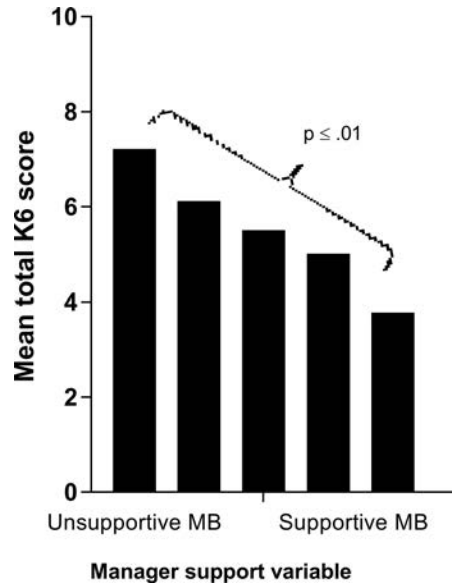
Katherine Petrie¹, Sadbh Joyce¹, Leona Tan^{1,2},
Max Henderson³, Anya Johnson⁴, Helena Nguyen⁴,
Matthew Modini^{1,2}, Markus Groth⁵, Nicholas Glozier⁶
and Samuel B Harvey^{1,7}



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The importance of manager support for the mental health and well-being of ambulance personnel

Katherine Petrie¹, Aimée Gayed², Bridget T. Bryan^{1,2}, Mark Deady^{1,2}, Ira Madan^{3,4}, Anita Savic⁵, Zoe Wooldridge⁶, Isabelle Counson^{1,2}, Rafael A. Calvo⁷, Nicholas Glozier⁸, Samuel B. Harvey^{1,2*}



Can you train managers to do this better?

If so, what should you be trying to change?



If you're worried about someone's mental health, start a conversation.



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RESPECT Manager Training

- Developed in collaboration with local fire service in NSW
- Delivered at Duty Commander level (uniformed, on shift managers)
 1. Basic mental health literacy, with a focus on how these conditions can be recognised in the workplace.
 2. Manager's role in responding to mental ill health.
 3. **Practicing skills in positive communication via group discussions, role play, etc.**



RESPECT

- **R**egular contact is essential
- **E**arlier the better
- **S**upportive and empathetic communication
- **P**ractical help, not psychotherapy
- **E**ncourage help-seeking
- **C**onsider return to work options
- **T**ell them the door is always open and arrange next contact

NSW Fire & Rescue RESPECT Study



Evaluated:

- **Confidence** in dealing with stress or mental health matters amongst staff
- **Behaviour** towards staff
- **Sickness absence rates** amongst those they manage



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NSW Fire & Rescue RESPECT Study

18% reduction in work-related sickness absence amongst workers whose manager was in the intervention group

Return on Investment: \$10 for each \$1 spent

Workplace mental health training for managers and its effect on sick leave in employees: a cluster randomised controlled trial

Josie S Milligan-Saville, Leona Tan, Aimée Gayed, Caryl Barnes, Ira Madan, Mark Dobson, Richard A Bryant, Helen Christensen, Arnstein Mykletun, Samuel B Harvey

THE LANCET
Psychiatry

Evaluated:



Confidence in dealing with stress or mental health matters amongst staff



Behaviour towards staff



Sickness absence rates amongst those they manage



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HeadCoach Manager Training



Topics	Modules
1. Common Mental Illnesses	3 x 10 minute Modules + Topic Toolbox (for quick reference to resources)
2. Helping Employees you are Concerned About (<i>reactive strategies</i>)	7 x 10 minute Modules + Topic Toolbox
3. Minimising Mental Health Risks in the Workplace (<i>preventive strategies</i>)	5 x 10 minute Modules + Topic Toolbox



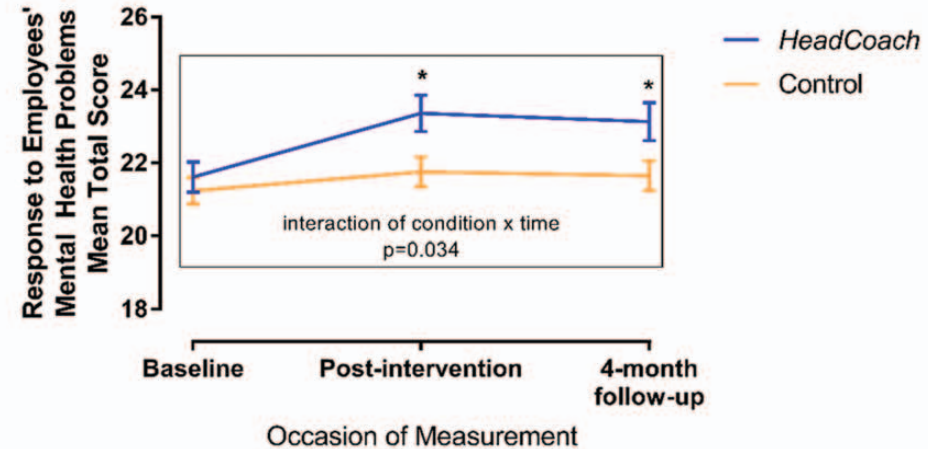
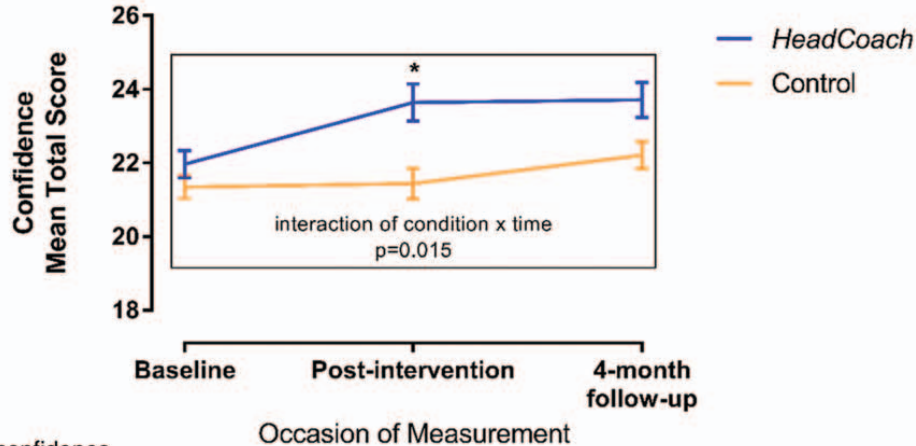
Developed in partnership with beyondblue with donations from the Movember Foundation.



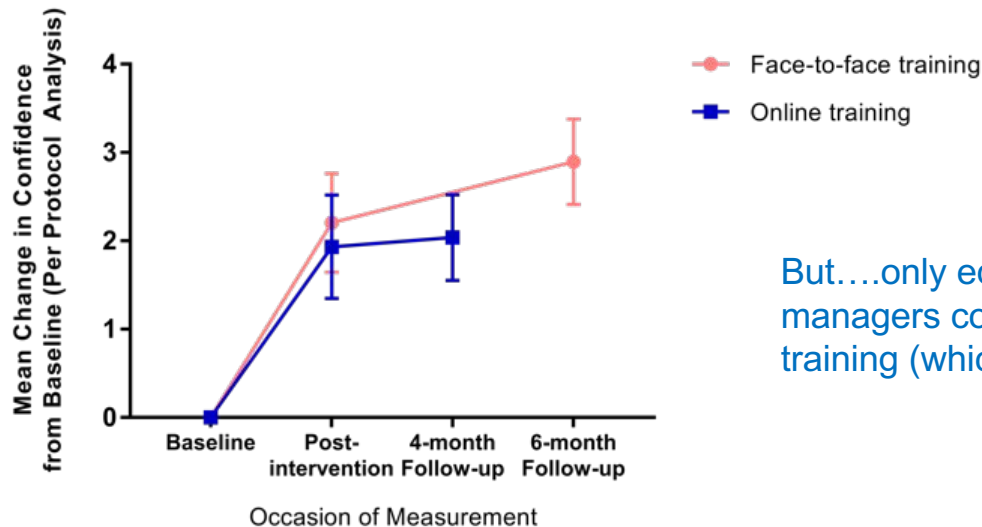
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A Cluster Randomized Controlled Trial to Evaluate *HeadCoach* An Online Mental Health Training Program for Workplace Managers

Aimée Gayed, MCrim, Bridget T. Bryan, MSc, Anthony D. LaMontagne, ScD, Allison Milner, PhD,
Mark Deady, PhD, Rafael A. Calvo, PhD, Andrew Mackinnon, PhD, Helen Christensen, PhD,
Arnstein Mykletun, PhD, Nicholas Glozier, PhD, and Samuel B. Harvey, PhD



So...face-to-face or online training?



But....only equivalent if managers complete the online training (which many don't!)

A comparison of face-to-face and online training in improving managers' confidence to support the mental health of workers

Aimée Gayed^{a,b,*}, Leona Tan^b, Anthony D. LaMontagne^{c,d}, Allison Milner^d, Mark Deady^b, Josie S. Milligan-Saville^a, Ira Madan^{e,f}, Rafael A. Calvo^{g,h}, Helen Christensen^b, Arnstein Mykletun^{a,i,j,k,l}, Nicholas Glozier^m, Samuel B. Harvey^b



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Common statements in allegations of negligence....

- They should have been debriefed
- They should have been told of the risks
- They should have been given better psychoeducation
- There should have been regular screening
- They have had all available treatment



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Conclusions

- Mental ill health has become the leading cause of long term work incapacity
- Workplace interventions can play a very important role in prevention and promoting recovery from mental ill health
- Good quality RCTs can be performed in the workplace
- There are a range of evidence-based workplace programs that should now be implemented
- There is still a lot of promotion of outdated and non-evidence informed approaches



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Thank you



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**Ambulance Service
of New South Wales**



**Ambulance
Victoria**



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