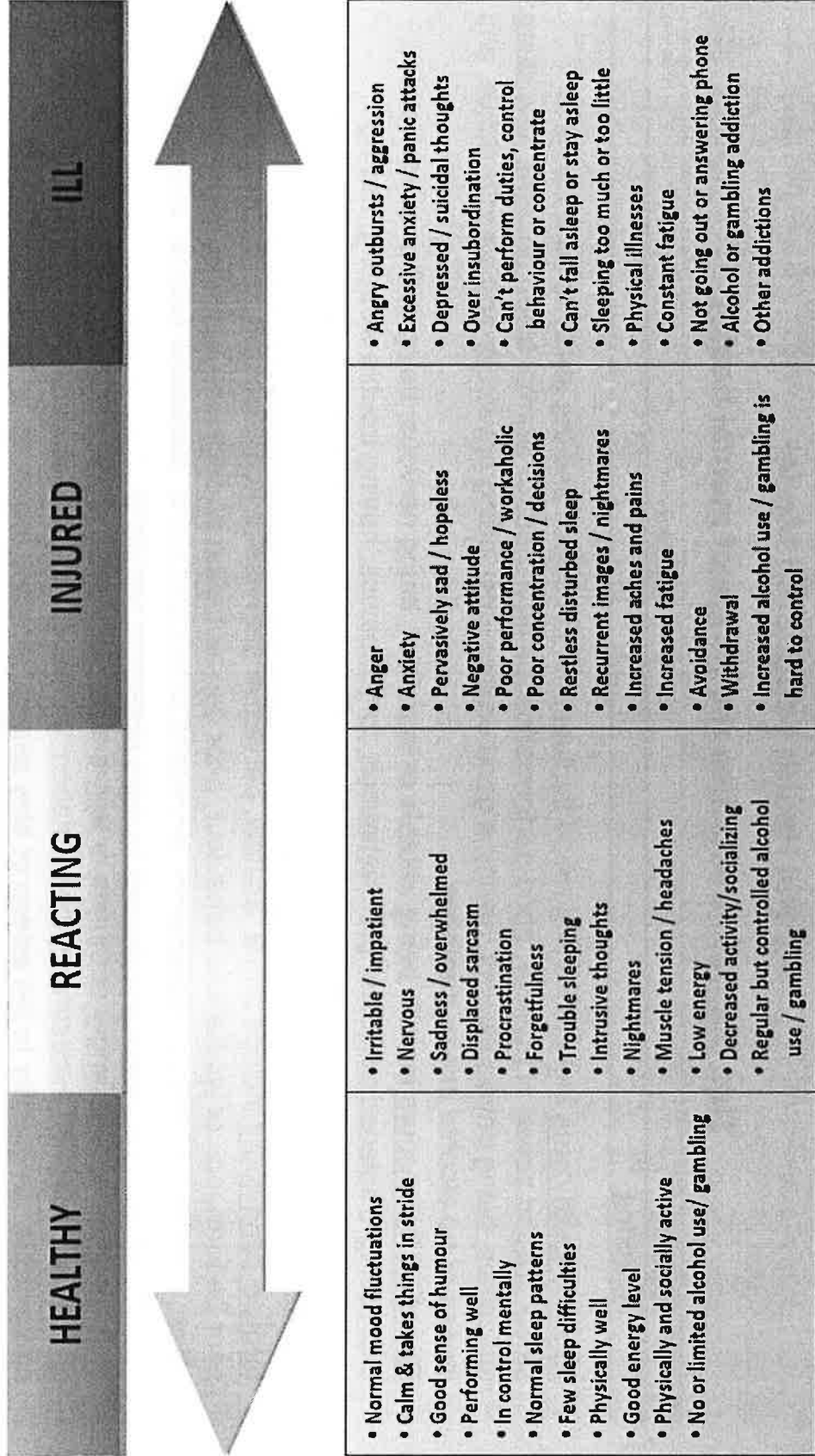




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HANDOUT # 1

Mental Health Continuum Model





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Mental Health Continuum Model

This diagram describes the range of mental health:

• Healthy	• Injured
• Reacting	• Ill

- **Healthy behaviours** include normal mood fluctuations, calmness and the ability to take things in stride, a good sense of humour, good performance, being in control, normal sleep patterns, few sleep difficulties, being physically well, having a good energy level, being physically and socially active, and limited or no alcohol use or gambling.
- **Reacting behaviours** include being irritable or impatient, being nervous, being sad or overwhelmed, expressing displaced sarcasm, procrastination, forgetfulness, having trouble sleeping, having intrusive thoughts, having nightmares, having muscle tension or headaches, having low energy, decreased activity or socializing, and regular but controlled alcohol use or gambling.
- **Injured behaviours** include anger, anxiety, pervasive sadness or hopelessness, a negative attitude, poor performance or workaholic behaviour, poor concentration or decisions, restless or disturbed sleep, recurrent images or nightmares, increased aches and pains, increased fatigue, avoidance, withdrawal, and increased alcohol use or hard-to-control gambling.
- **Ill behaviours** include angry outbursts or aggression; excessive anxiety or panic attacks; depression or suicidal thoughts; excessive insubordination; an inability to perform duties, control behaviour or concentrate; an inability to fall asleep or stay asleep; sleeping too much or too little; physical illnesses; constant fatigue; not going out or not answering phone; and an alcohol or gambling addiction or other addictions.
- *National Defence and the Canadian Armed Forces: Road to Mental Readiness (R2MR)*
www.forces.gc.ca/en/caf-community-health-services-r2mr/index.page

Glossary of Terms

14 Psychosocial Hazards

Addressing these 14 workplace factors is known to positively impact employee's mental health, psychological safety, participation and productivity. If these factors effectively exist in the workplace they have the potential to prevent psychological harm. These 13 workplace factors were adapted from *Guarding Minds @ Work* and identified for the purposes of the CSA *National Standard of Canada for Psychological Health and Safety in the Workplace*.

1. **Psychological Support:** A workplace where co-workers and supervisors are supportive of employees' psychological and mental health concerns, and respond appropriately as needed.
2. **Organizational Culture:** A workplace characterized by trust, honesty and fairness.
3. **Clear Leadership & Expectations:** A workplace where there is effective leadership and support that helps employees know what they need to do, how their work contributes to the organization and whether there are impending changes.
4. **Civility and Respect:** A workplace where employees are respectful and considerate in their interactions with one another, as well as with customers, clients and the public. Civility and respect are based on showing esteem, care and consideration for others, and acknowledging their dignity.
5. **Psychological Demands:** A workplace where the psychological demands of any given job are documented and assessed in conjunction with the physical demands of the job. Psychological demands of the job will allow organizations to determine whether any given activity of the job might be a hazard to the worker's health and well-being.



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6. **Growth & Development:** A workplace where employees receive encouragement and support in the development of their interpersonal, emotional and job skills.
7. **Recognition and Reward:** A workplace where there is appropriate acknowledgement and appreciation of employees' efforts in a fair and timely manner.
8. **Involvement and Influence:** A workplace where employees are included in discussions about how their work is done and how important decisions are made.
9. **Workload Management:** A workplace where tasks and responsibilities can be accomplished successfully within the time available.
10. **Engagement:** A workplace where employees enjoy and feel connected to their work and where they feel motivated to do their job well.
11. **Balance:** A workplace where there is recognition of the need for balance between the demands of work, family and personal life.
12. **Psychological Protection:** A workplace where psychological safety is demonstrated when employees feel able to put themselves on the line, ask questions, seek feedback, report mistakes and problems, or propose a new idea without fearing negative consequences to themselves, their job or their career.
13. **Protection of Physical Safety:** A workplace in which employee's psychological, as well as physical safety is protected from hazards and risks related to the worker's physical environment.
14. **Any other chronic stressor that may be identified by workers**

The Employer's Agenda is NOT a Worker's Agenda!

EMPLOYER's AGENDA	WORKER's AGENDA
Looking for cheap solutions	Sustainable efforts may require investment
Looking for quick and easy fix, to minimize impact on productivity	Consultation and collaboration to develop solutions relevant to the workplace will have long term benefits
Aimed at blaming workers	Pushing to educate people that it's not their fault (placing blame isn't a solution)
Fault a person's individual characteristics	Emphasize workplace factors
Examples:	What this looks like:
<p>EAP – designed to help employees cope with work demands imposed by management</p> <p>Stress management programs – easy to implement but difficult to measure their effectiveness</p> <p>Wellness Programs – emphasize the employee's obligation to take responsibility for their mental health</p>	<p>The Unions role is to develop PREVENTION-BASED solutions (with worker involvement) so all exposed workers are benefiting from the control</p> <p>These will be more sustainable and effective than isolated, individual measures</p> <p>WE want to address the underlying causes</p>

Self-Assessment Tool

20 Questions for Unions About Workplace Mental Health & Psychological Safety

SUMMARY: These questions can help union representatives consider the effectiveness of current approaches for promoting psychological health and safety in workplaces as well as in supporting workers who may be experiencing mental health issues at work.

1. Do our representatives/members have adequate awareness and training to identify a worker who may be experiencing a mental health issue?
2. Do we have performance indicators and evaluation methods to objectively evaluate how we address mental health issues in our workplace?
3. Do our representatives participate in the development of reasonable accommodation plans for workers that address emotional, psychological and interpersonal challenges?
4. Do we effectively support a workplace culture that allows for open communication among workers, management and union and is free from stigma and discrimination?
5. Do our representatives understand our role in helping to participate in and assist with the duty to accommodate?
6. Do our representatives understand our role in helping to eliminate harassment and bullying in the workplace?
7. Do we advocate for collective agreement wording that supports worker mental health and psychological safety?
8. Does our collective agreement address reasonable accommodation?
9. Are we sufficiently aware of accommodation options related to mental health issues to offer viable alternatives to suggestions put forward by management?



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10. Do we have a Joint Accommodation Committee that collaborates with management on reasonable accommodations that are successful for the worker with minimal impact on the collective agreement?
11. Do our representatives understand the requirement of confidentiality when discussing worker's personal medical information?
12. Do our representatives know how to handle a disclosure of mental illness from a worker?
13. What is our approach for dealing with co-worker resentment of accommodation?
14. Do our representatives model healthy and respectful workplace behaviours?
15. Are we aware of and trained in approaches that assist us to intervene effectively in co-worker conflict?
16. Are we aware of the resources, expertise, and supports that our union leadership offer to help us with mental health or psychological safety issues?
17. Is there a process in place to respond to a request to provide more evidence of the need for reasonable accommodation?
18. Is there a process in place to respond when a reasonable accommodation request is denied?
19. Is there a system in place to offer support to union representatives who are emotionally exhausted?
20. Does our union provide support in the interpretation of the collective agreement and are workers aware of how to access this support?

With appreciation to the Workforce Advisory Committee of the Mental Health Commission of Canada for their review of this document.

<https://www.workplacestrategiesformentalhealth.com/job-specific-strategies/20-Questions-for-Unions-About-Workplace-Mental-Health-and-Psychological-Safety>

Documents & Resources for Members

Psychosocial hazards are present in all workplaces, but little is done to identify, assess and control them. Despite the fact that mental health issues account for the majority of disability claims, employers are reticent to address the causes. Here are some tools to assist you in raising these issues in your workplace.

- ✓ <http://ohcow.on.ca>
- ✓ <http://ohcow.bluelemonmedia.com/MIIApp>
- ✓ PSAC National H&S Office: health&safety@psac-afpc.com
- ✓ Enforcement Authority: www.labour.gc.ca 1-800-641-4049
- ✓ www.mentalhealthfirstaid.ca
- ✓ www.pssm.ca
- ✓ <http://wmhp.cmhaontario.ca/>
- ✓ <http://www.bridgingthedistance.com/pages/peer.html>
- ✓ CSA Standard Z1003-13 *Psychological Health and Safety*
- ✓ (PSAC-TBS) Joint Task Force on Mental Health - Report I & II
- ✓ Implementation Guide
- ✓ CCOHS www.ccohs.ca