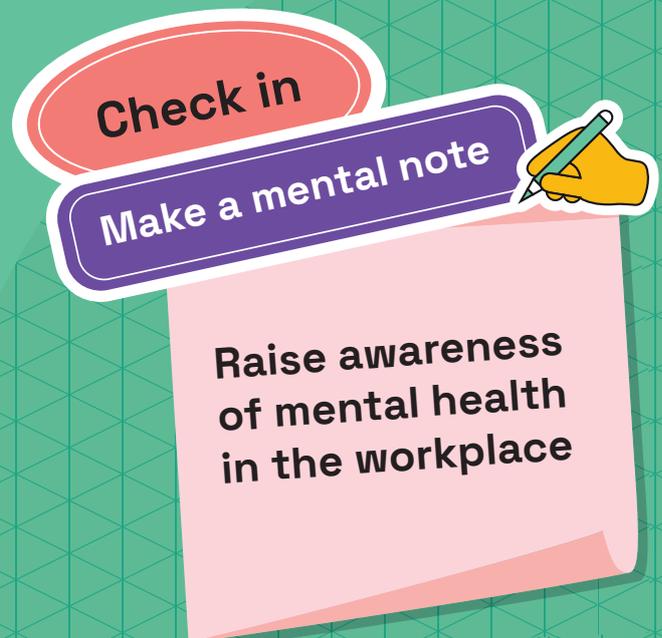


Program Guidance

Part I: About Mental Notes – A Mental Health-Related Stigma Awareness Program





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About this guidance

Comcare's 'Mental Notes' – a Mental Health-Related Stigma Awareness Program (“**the Program**”) – aims to reduce mental health-related stigma and improve psychosocial wellbeing at work. This guidance was developed to provide an overview of the Program and guide its implementation.

The guidance is in two parts:

Part I: About Mental Notes – provides an overview of the Program, including background, objectives and principles.

Part II: How to implement Mental Notes – provides a step-by-step guide on how to implement the Program, use the resources, and monitor and evaluate the Program's performance. To access Part II, visit www.comcare.gov.au/mentalnotes

Many workplaces have moved towards having an organisational mental health strategy, which outlines priorities for mental health and includes policies, procedures, and initiatives that will be undertaken to promote psychosocial wellbeing and provide support for workers with experiences of mental health issues. Ideally, participation in this program would be aligned with an organisational mental health strategy and form part of broader efforts to achieve mentally healthy workplaces.

To access the resources and learn more about workplace mental health-related stigma, visit www.comcare.gov.au/mentalnotes

This guidance was prepared by the Mental Health and Research team, Strategic Partnerships and Engagement Group, Comcare.

Content warning: Due to the topic of this program, this guidance may contain language and/or themes that some people may find confronting.



Definitions

Comcare acknowledges that language itself can be stigmatising and that different individuals prefer to describe their experiences in different ways. Comcare has followed guidance published by the National Mental Health Commission when selecting terminology for describing experiences of mental health issues but is cognisant that the terms used may not reflect everyone's preferences. In this program, **“workers with experiences of mental health issues”** refers to workers who have lived or living experiences of mental health issues either personally or by being a close family member or carer of someone with such experiences.

The term **“workers”** applies to any person in Comcare's jurisdiction who works in any capacity, in or as part of a business or undertaking. It includes employees, independent contractors or subcontractors (or their employees), employees in a labour hire company, outworkers (e.g., a home-based worker), apprentices or trainees, students gaining work experience, and volunteers.

The term **“managers and supervisors”** refers to middle and senior managers in an organisation. A middle manager or supervisor is a worker who has responsibility in their organisation for managing other workers. They usually report to a senior manager, executive or another middle manager. Senior managers and executives are responsible for ensuring their organisation complies with its duties and obligations under the *Work Health and Safety Act 2011* (WHS Act) and the *Safety Rehabilitation Compensation Act 1988* (SRC Act).

“Organisations” are entities in Comcare's jurisdiction that comprise of groups of people working together for a particular purpose. They include government departments and agencies, companies and institutes.



Program background

The Program is taking place amidst unprecedented national efforts to promote mentally healthy workplaces, including the release of a new [Model Code of Practice](#) on managing psychosocial hazards at work by Safe Work Australia, and initiatives such as the [National Workplace Initiative](#) and the development of a [National Stigma and Discrimination Reduction Strategy](#) by the National Mental Health Commission. Comcare is the national authority for work health and safety, and workers' compensation and is contributing to these national efforts through a growing number of initiatives using research, knowledge translation, communication, service provision, education and training, and others.

The Comcare scheme covers more than 400,000 workers and 200 employers across Australian Public Service (APS) agencies and self-insured licensees. Comcare's purpose brings together its business and engages its clients and stakeholders around physical and psychological injury prevention, early intervention, injury recovery, return to work and workplace health and safety regulation. The Comcare Corporate Plan 2020-2023 is aligned to five strategic priorities that support this purpose. The Mental Notes Program aligns with Priority area 3: Prevention and early intervention across our scheme.

In 2022, psychological injury was the third top cause of workers' compensation claims in the Comcare jurisdiction, accounting for 12 per cent of all claims. Injury (54 per cent) and disease (34 per cent) were the two top causes (Comcare, 2022). Psychological injuries are on the rise and often take longer to resolve. The [National Return to Work Survey 2021](#) found that nationally one in three injured workers experienced stigma. In the [Comcare jurisdiction](#), this number was even higher with 2 in 5 injured workers thinking that they would be treated differently at work and a quarter felt their supervisor thought they were faking or exaggerating. This suggests that stigma associated with having a psychological injury is a barrier to returning to work.

Mental Notes resources were developed in collaboration with creative agency CRE8IVE Pty Ltd., and market research company Big Village (previously ENGINE).

Program objectives

While some level of support for mental health and psychological injury is available in most workplaces, workers who experience psychological distress often do not seek help or disclose their condition due to stigma associated with having experiences of mental health issues (Beyond Blue, 2015) or because they perceive that their manager/supervisor may not be able to appropriately support them (ENGINE, 2022). To address these challenges, this multi-staged Program uses communication, education and behaviour change strategies to:

- Raise awareness of mental health-related stigma in the workplace (awareness)
- Provide managers/supervisors with knowledge and skills to offer support and reduce stigma (education)
- Encourage support and help seeking behaviour early (behaviour change)

The Program includes targeted messaging, tools and resources for managers/supervisors and workers.



Program audiences

The Program has three primary audiences that it targets with its messaging and resources:

1. Managers, supervisors, and other people leaders in Comcare's jurisdiction (Referred to as "managers/supervisors")
2. All workers working in Comcare's jurisdiction (Referred to as "workers")
3. Workers with lived experiences of mental health issues

Messages targeting managers/supervisors include those that aim to raise awareness about mental health-related stigma, promote inclusive leadership and motivate managers/supervisors to use the resources made available as part of the Program. Communication targeting a broad audience of workers aims to raise awareness of mental health-related stigma in the workplace, change attitudes and encourage support for co-workers. Communication targeting workers with lived experience of mental health issues aims to encourage early help-seeking behaviours and speaking up about mental health issues.

Key principles for implementation

The Program is founded on five broad principles that underpin the approach and messaging applied in the communication and educational materials. These principles need to be kept in mind during its implementation.

Prevention and early intervention

Preventing high levels of psychological distress in the workplace and intervening early when symptoms of mental health issues emerge is key to reducing the incidence, prevalence and recurrence of psychological injury. Preventative interventions focus on reducing exposure to psychosocial hazards – such as bullying, fatigue, mental stress, remote or isolated work – and support employers and workers to create and maintain physically and mentally healthy workplaces.

Supportive leadership

Our market research revealed that some workers in the Comcare jurisdiction feel reluctant to speak to their managers/supervisors about experiences of mental health issues out of a fear that they will be judged and discriminated against. Modelling supportive attitudes and behaviour towards people with experiences of mental health issues is an important step towards creating mentally healthy workplaces. Leaders can promote healthy habits by normalising discussions about mental health, regularly checking-in on their team's wellbeing, and facilitating access to relevant training and support services. Leaders themselves need to ensure they have undertaken sufficient training to appropriately support workers' mental health needs. Leaders who are open and empathetic about mental health and wellbeing show their team that they will be accepted and supported if they speak up and seek help.



Psychosocial safety climate

Psychosocial safety climate refers to the extent that workers believe that their psychological health and safety is protected and supported by senior management (Dollard & Bakker, 2010). High levels of psychosocial safety are associated with reduced absenteeism and increase productivity. Low levels are associated with workplace stress and dissatisfaction.

The Program aims to contribute to building psychosocially safe workplaces by calling out stigma and encouraging managers/supervisors to increase their capability to provide support to workers with experiences of mental health issues and promote mentally healthy workplaces.

Tackling different types of stigma

Mental health stigma in the workplace can be perpetuated at different levels, including from one worker to another, from a worker unto themselves and at the organisational level through policies and norms that may discriminate against workers with experiences of mental health issues. Table 1 outlines the definition of different types of stigma. The Program aims to raise awareness and reduce all three through its messaging and education materials.

Stigma type	Definition	Example
Public stigma	A person's stigmatising thoughts, feelings and behaviours <i>about/towards people with experiences of mental health issues</i>	"People with depression should snap out of it."
Self-stigma	Stigmatising views that <i>individuals with mental health issues hold about themselves</i>	"I am not worthy of a promotion because of my depression."
Structural stigma	<i>Organisational policies and cultural norms</i> that enable the unfair treatment of workers with experiences of mental health issues.	"Mental health services and research don't deserve as much funding as other health issues."

Table 1: The three types of stigma addressed in the Program. Source: Beyond Blue 2020

Monitoring and evaluation

The Program is an ongoing initiative in which lessons from each phase will inform the development of the next. Monitoring and evaluation is an important mechanism for tracking usage and assessing the Program's effectiveness, relevance and efficiency. Monitoring and evaluation will increase accountability, improve the usefulness of resources, and the relevance of future planning. The Program has an overall monitoring and evaluation framework, which will be implemented by Comcare. However, individual agencies are encouraged to also monitor their own usage, training and other activities and evaluate the Program's performance in their own context. Please see the Monitoring and Evaluation section in Program Guidance: Part II for details.



Market research findings

The strategy and materials developed in this program are based on theories and findings from academic literature, consultations with industry and subject matter experts, and three rounds of market research with workers from Comcare's jurisdiction, conducted specifically to inform the development of the Program's resources and messages.

- **Phase I** of market research was exploratory and examined workers' and managers/supervisors' understanding of mental health and stigma. Participants thought that to overcome mental health-related stigma in the workplace and encourage early help seeking, more training for managers/supervisors was needed to build an environment where mental health can be freely discussed.
- **Phase II** focused on testing two creative concepts designed by our creative agency partner. Feedback included suggestions to make the wording inclusive of a range of mental health conditions (beyond anxiety and depression), and to focus on training managers/supervisors to promote a mentally healthy environment before encouraging workers with experiences of mental health issues to speak up and seek help. Participants also suggested that the material needs to be made available via a range of digital and printable resources, displayed in places where people congregate or where they might go when they are upset (e.g., bathrooms). Participants also said that the creative assets needed to be accompanied with a range of social and education activities, such as webinars, podcasts and informal workplace get-togethers.
- **Phase III** tested the phased approach outlined in this guidance, beginning with messages for managers/supervisors encouraging them to undertake training and then communicating to a general audience of workers to raise awareness of stigma. In its last phase, workers with experiences of mental health issues should be encouraged to speak up and seek help early. This phased approach, where managers/supervisors are targeted first was thought appropriate by the participants. Overall, the notion of Comcare encouraging communication about mental health in the workplace to reduce stigma was well regarded by the participants.

The findings from the market research have guided the development of the Program's approach, resources and the messages and visual style of the creative materials. The feedback from workers with lived experience of mental health issues was particularly important to the look and feel of the materials and the approach where managers and supervisors are targeted first and encouraged to improve their mental health literacy and skills.



Some of the key points that workers with lived experience of mental health issues made during market research are listed below and will continue to be important guides during the Program’s implementation. They include:

- It is important to focus on building a mentally healthy workplace before encouraging people to speak up and seek help.
- The responsibility to speak up and seek help cannot be put solely on workers with experiences of mental health issues; a workplace environment that enables workers to speak up needs to be created first.
- Managers/supervisors need to have the skills and knowledge to be able to have open and supportive conversations about mental health.
- Combatting mental health-related stigma is everyone’s responsibility.
- Language used in the creative materials that targets workers with lived experience of mental health issues needs to be soft and not come across as commands.
- The look and feel of the resources should come across as friendly and welcoming. Images should show welcoming faces and open body-language.

An important point made by managers and supervisors who participated in the market research was that they were not counsellors and may not be able to provide the psychosocial support sought by workers. They indicated that the focus of the messages should be on providing resources and links to services. This point emphasises the importance of investing in manager/supervisor training and capability-building before asking them to provide support to workers with lives experience of mental health issues.

Visit www.comcare.gov.au/mentalnotes to read Part II of this guidance: How to implement Mental Notes.



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