

Achieving Business Excellence: Health, Well-being and Performance

Forum C

Mental Health and Leadership: Practices and Policies

Professor Mansel Aylward CB

**Director, Centre for Psychosocial and Disability Research,
Cardiff University**

&

Chair, The Wales Centre for Health

AylwardM@cardiff.ac.uk

www.cf.ac.uk/psych/unum/index.html



Llywodraeth Cynulliad Cymru
Welsh Assembly Government

Enterprise for Health, Management Conference 30 October 2008: London



Beyond Absence Management:

- **Organisational features of successful companies**
 - **Psychosocial determinants of health and well-being at work**
 - **“Stress” in life and work**
 - **Personal responses and Perceptions**
 - **The Healthy Workplace**
-

“Stress” in Life and Work:

- A modification of HSE’s definition of “stress”:

Stress is the largely subjective adverse reactions people have to perceived or actual excessive pressure or other types of demand placed upon them

- Stress/Distress is a sensation: it is not of itself a disease
-

Potential Stressors:

- **Demands:** overload, time, hours, resources, conditions
 - **Control:** decision-making, work organisation, inflexibility
 - **Support:** employers, colleagues, family, health professionals
 - **Relationships:** bullying, harassment, socio-domestic
 - **Role:** lack of understanding
 - **Change:** consultation, information, job-security, organisational change
-

Stress and the Workplace: what we think we know?

- **Demand, Control & Support¹**
 - high strain and harmful outcomes
 - perceptions of “stress” / emotions ignored
- **Effort-Reward Imbalance² (ERI)**
 - importance of subjective perceptions
 - fails to predict health outcomes
- **Cognitive Appraisal Theory³ (CAT)**
 - appraisal and coping
 - individual responses pivotal

1. Karasek, 1979
2. Peter and Siegrist, 1999
3. Lazarus & Folkman, 1984; Cox, Griffiths et al, 2000

“STRESS” – Theories and Models

- Demand and Control (Karesek, 1979)
- Effort – Reward Imbalance (Peter & Siegrist, 1999)

Research Findings:

- Neither reduces employees’ perceived levels of stress as was hoped
 - Ignorance about precise processes of “stress”/ measurement
 - Interventions: ? Right time; ? Right way; ? Right people
-

A more current view - stress as a process

Stress is a process and one must consider:

Exposure to stressful experiences/job characteristics.

Perceptions of stress.

Psychological resources that allow one to cope with the above.

Health outcomes induced by the above.

Appraisal or Perceived Stress

- **Stress occurs when demands exceed the ability to cope**
 - **Important to measure perceived stress**
 - **Also link with psychosocial resources that help you cope**
-

Stressor-----Perceived Stress-----Stress Response

Primary appraisal

- Is this a threat?

Secondary appraisal

(Coping)

- What can I do about it?

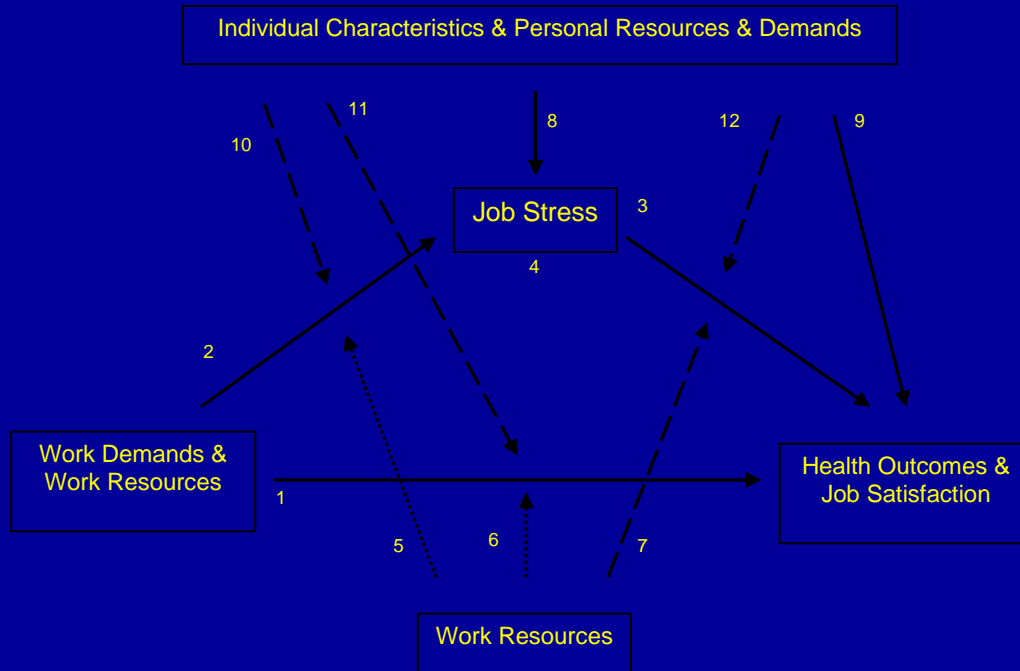
Stress occurs when there is an imbalance between primary and secondary appraisal of a situation

-
- Social Support – a major psychosocial resource.
 - Perceptions and Personal responses at “heart” of problem
-

Things are more complicated!

- **Many other factors must be considered – especially individual differences.**
 - **New models are being developed and tested**
(Mark and Smith, 2008).
-

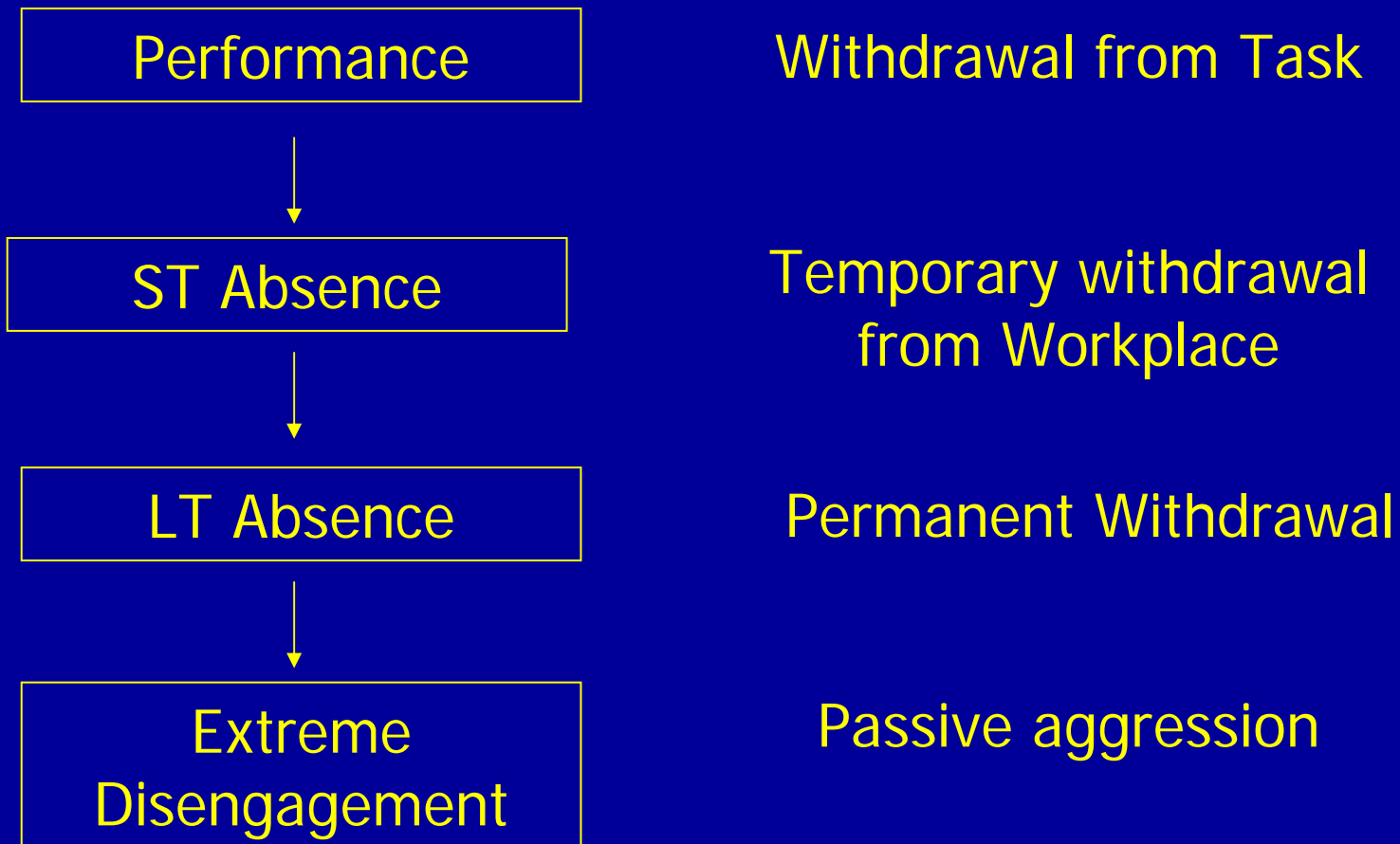
THE DRIVE MODEL AND STRESS AT WORK



Prevention and management

- **On the basis of such models one can design different types of interventions (e.g. organisational or individual).**
 - **We should move away from a “one size fits all approach”.**
 - **However, a process based approach can provide a framework that accounts for individual variation but has a firm theoretical basis.**
-

Avoid The Withdrawal Behaviours Continuum:



Successful Strategies

- **Successful strategies are likely dependent on:**
 - * **Sound leadership and support, culture, work organisation, openness, communication**
 - * **Key role of line managers – the prism through which climate is perceived by employees**
 - * **Balanced effort and rewards, job demands and control, being valued.**
-

Well-being in Work: Lessons Learned:

- **Productivity and Non-attendance (presenteeism, turnover, low morale) are symptoms of wider organisational problems.**
 - **Treating symptoms and not the underlying causes won't improve quality of working life or business performance**
 - **Presenteeism/Absence levels affect the bottom line**
-

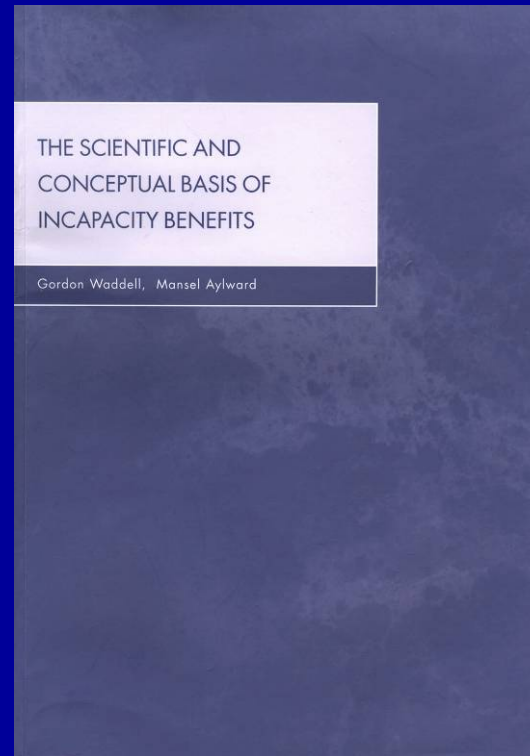
Health at Work:

- **The key idea is that work is healthy**
 - **The workplace = environment for promoting health; controlling ill health**
 - **A public health issue**
-

The Healthy Workplace

- **A climate where people are allowed to be well**
 - **Positive job design & good line management (the “prism”)**
 - **Proactive rehabilitation and support**
 - **Extensive training**
-

The Scientific and Conceptual Basis of Incapacity Benefits



Gordon Waddell and Mansel Aylward

The Power of Belief



Peter Halligan and Mansel Aylward

Professor Mansel Aylward CB



Contact:

Email: AylwardM@Cardiff.ac.uk

Website: <http://www.wch.wales.nhs.uk>

<http://www.cf.ac.uk/psych/cpdr/index.html>
