

**The Nick Kilhams
Mental Health In The Workplace
Survey 2022**

A Tellmi Report



Acknowledgement

This report is dedicated to Nick Kilhams, a market leading Political Risk and Credit Underwriter who died by suicide in May 2021.

The research was funded by the Nick Kilhams Foundation which was set up to honour his memory, shine a light on mental health and prevent further tragedies within the insurance industry.

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This is a summary version of the full report.

Introduction

One in six employees is experiencing a mental health issue at any one time and stress is responsible for almost half of all working days lost in Britain. Poor mental health is clearly a societal problem, but it is a particular issue within the insurance sector. In 2022, Ecclesiastical's annual Broker Wellbeing Survey found that stress and anxiety levels had risen for the fourth year running. The research, which was conducted with 250 brokers, found that 70% had experienced stress at work over the past 12 months, compared to 61% in 2021. Anxiety had increased to 44% from 41% and the proportion of brokers feeling overwhelmed rose to 41% from 36% in 2021. The research identified heavy workloads (72%), dealing with regulation (58%), and customer demands (54%) as the top three causes of stress in the workplace.

Employee mental health and well-being is important, not only for individuals themselves, but also for companies, because it leads to higher productivity levels, less absenteeism, less employee turnover and lower health care costs (Kramer and Son 2016; Beehr 2019). Deloitte's 2022 'Mental Health and Employers Report' found that the finance, insurance and real estate industries have the highest annual employee mental health cost at £3,700 per person per annum. The total cost of poor mental health has increased by 25% since the start of the pandemic, up to £53-56 billion in 2020-21, which equates to over 2.6% of the UK's annual Gross Domestic Product. Deloitte's 2021 report estimated that on average, organisation wide culture change, awareness raising around mental health and proactive screening can provide a ROI of £6 for every £1 invested. In contrast, reactive support, such as offering employees therapy once their mental health had worsened, provided an average return of only £3 for every £1 invested.

The central ambition of this survey was to understand why employees in the insurance industry who have access to workplace support for their mental health, do not avail of it when they need it. The survey, and the subsequent interviews with employees, shed new light on real and perceived barriers to support and the report ends with key recommendations for change.

Method

Although quantitative research is useful because it captures the scale and the cost of poor mental health across industries, there is a dearth of qualitative research exploring the concerns of individuals working within specific sectors. This is particularly true of the insurance industry where poor mental health has been identified as a growing concern. This study sets out to address that gap. Using a mixed methods approach, this study explores why employees in the insurance industry do not avail of workplace support for their mental health.

A survey of 24 questions was distributed to employees across the insurance sector in November. A total of 272 respondents aged 18 to 65+ responded to the survey. The survey responses provide quantitative data and open text boxes enabled respondents to include qualitative contributions. Percentages have been rounded up or down as appropriate throughout.

Surveys tend to capture data from people who are willing to share their experiences. This is both a strength and a weakness of any self-report methodology. Employees with direct experience of mental health issues may have been more likely to respond and therefore, the data may exaggerate the prevalence of mental illness in the sector. However, the parity between the statistical data gathered for this study and the data generated by Ecclesiastical's Broker Wellbeing Survey suggests that it provides a fairly accurate picture of wellbeing within the sector.

Through the survey, 12 respondents were recruited for face-to-face interviews, which were conducted in late December by Tellmi psychologist Dr. Suzi Godson. Interview candidates comprised an equal mix of men and women from a broad spectrum of age ranges and levels of seniority. Interviews were recorded, transcribed and anonymised and the original audio recordings were subsequently destroyed. The quotes used throughout the survey are a mix of open text and interview responses. Because an equal number of males and females responded to the survey and gender did not emerge as a significant theme, pseudonyms that indicate gender have not been used in order to further safeguard anonymity. Names, places or personal details referred to in the texts have also been removed.

Demographics.

A total of 272 respondents aged 18 to 65+ responded to the survey; 58% of respondents were in mid level roles, 32% were in senior roles and 12% were at a junior level.

Gender

The gender balance was relatively equal; 54% of respondents were male and 46% were female. Men were much more likely to talk about the traditional responsibilities associated with maleness. There was a sense that men needed to feel that they were the breadwinners and so employment was tied to masculinity.

Insurance is still very much a male dominated sector. Data from the Association of British Insurer (2018) found that at entry level, 55% of those in the insurance and long-term savings industry were women but at the executive level this fell to 21%, a reduction of more than 60%. The fact that the insurance industry still feels like an old boys club makes it more difficult for men to admit to any emotional vulnerability.

Several women report having to work harder to get to the top and many of them are pulling a second shift looking after children and managing domestic responsibilities when they get home in the evenings. Juggling everything made some women feel as if they were failing at work and at home.

Sexuality

Almost all the respondents (93%) were heterosexual. Just 2.57% were gay or lesbian, 2.21% were bisexual and 1.84% declined to reveal their sexuality. Inclusivity is even more important when numbers are so small and there was evidence that companies are trying hard to ensure that representation is taken into consideration when organising events, or celebrations.

Ethnicity

Although 14% of the UK population are minority ethnic and, in London, where much of the industry is centred, the ethnic minority population is 40%, only 2% of insurance executives are minority ethnic (ABI, 2021). In this study, the majority of respondents (92%) were white; 4.0% were Asian or Asian British, 2% were from mixed or multiple ethnic groups, 1% were Black British and 1% were from other ethnic groups.

People from mixed backgrounds find it harder to access mental health support. In this survey, 72% of Asian or Asian British respondents said that they did not seek support at work when they experienced a sustained period of stress, anxiety or depression. One of the main problems was the lack of professionals with mixed or multicultural backgrounds who could genuinely understand the issues that they might be struggling with.

The prevalence of mental health issues in the insurance industry.

This study confirms that the prevalence of mental health issues in the insurance industry is higher than it is in other industries: 81% of respondents had experienced a period of sustained stress, anxiety or depression as an adult and 23% reported serious ongoing mental health problems. Depression and anxiety were the most commonly cited disorders. Several respondents had been suicidal, made attempts on their life and some had been sectioned against their will to protect them from harming themselves.

Some of the issues that respondents spoke about were historic and not all of them had been formally diagnosed or treated at the time. Several mentioned unresolved traumas from childhood. A number of women mentioned having experienced post-natal depression which made returning to work after childbirth particularly difficult.

Wellbeing in the last two weeks

Using questions from the Generalised Anxiety Disorder 2-item (GAD-2) and Patient Health Questionnaire 2-item (PHQ-2) scales, the survey assessed respondents wellbeing in the previous two weeks.

53% had felt nervous, anxious or on edge for several days.

10% felt that way more than half the time
8% had felt like that nearly every single day

29% had not been able to stop, or control worrying for several days.

12% felt like that more than half the time
7% felt like that nearly every day.

30% felt little interest or pleasure in doing things for several days.

6% felt like that more than half the time
3% felt like that nearly every day.

30% had felt down, depressed or hopeless for several days.

6% felt like that more than half the time
2% felt like that nearly every day.

Why is mental health worse in the insurance industry?

There are specific stressors associated with working in the insurance industry that make employees more vulnerable to poor mental health. Long hours, huge workloads and high stress levels are mentioned by several respondents.

Excessive workload has a negative impact on wellbeing. This was very much bound up in the fact that people did not feel that their jobs were terribly secure and therefore they over performed to prove their value.

Uncertainty about job security. In the insurance industry, job security is always at the mercy of the markets. People did not feel that they had any control over job security and that exponentially increased stress levels. Lack of agency increases anxiety and respondents worry constantly about the risk of redundancy.

It's a niche market so it's harder to get another job. Many of the respondents had personal experience of redundancy. Even when an entire team is laid off there is stigma about being unemployed. Because the insurance industry is quite specialised, employees don't have transferable skills which makes getting another job more difficult. Because the market is small and everyone knows each other, mental health issues are not something that can easily be kept private. Unemployment removes access to support and exacerbates stress which escalates mental health problems:

Workplace culture

The culture of a workplace determines how happy and how mentally healthy employees are. You can put all the employee support programs you like in place but if the company culture rewards overwork and stoicism and stigmatises support seeking, no one will use them. Workplace cultures are difficult to define because the rules are unwritten, but the core values of a company communicate to all employees how things are done and what it is, or isn't appropriate to disclose within the working environment. When workplace culture penalises vulnerability, no one wins:

Managers really matter. The culture of a workplace is determined from the top down, and the attitude of senior managers plays a key role in defining the culture of a company when it comes to support for mental health. Good workplace cultures reward managers who prioritise the wellbeing of their employees and the knock on effect is a happier healthier workforce who are more productive.

Leading by example. Employees would really value senior staff members being more open about mental health. However senior staff members are afraid of talking about their mental health struggles because they don't want to be seen as weak. Raising awareness is pointless if people are not open about their own mental health experiences. When there is a lack of openness around the issue of mental health, employees will not use support services because they do not trust them to be confidential.

Toxic workplace cultures make it impossible to ask for help. The focus on productivity is compounded by the stigma around support seeking. This stops people seeking help when they begin to struggle. Toxic workplace

cultures can impact all aspects of an employees life. Some people described how the stress they were under at work had impacted their ability to conceive and once they moved to a less stressful roll, they got pregnant.

Openness makes it easier for colleagues to support each other. When there is openness around mental health within a company, employees feel much more relaxed about support seeking and they also serve as an invaluable support system for each other. Employees are even willing to take lower paid jobs to work in companies where they feel valued:

The impact of Covid and work from home

Although research shows that Covid had a largely negative impact on employee mental health, many respondents in this survey felt that hybrid working gave them greater flexibility over the way they worked.

Hybrid working has been particularly beneficial for people with mental health issues. Flexible working has enabled employees with mental health issues to manage their time and cope with fluctuations in their wellbeing: Covid also seems to have reduced some of the stigma around mental health issues in the workplace. For those who found working from home helpful, the current drive to return to the office has increased stress levels

Younger staff struggled more with work from home. For some younger staff, working from home led to feelings of isolation which actually triggered mental health issues. Working from home also removed the boundary between work and leisure and replaced it with an expectation that calls and emails would be answered outside working hours:

Workplace Support

Exemplars. A few companies lead the way in the provision of workplace support and their effort is acknowledged and appreciated by staff. Adopting a more holistic approach to the provision of support helps overcome some of the stigma that prevents people asking for help. This respondent suggests that if companies reframed mental health support as help with achieving life objectives, it would be much more acceptable to employees. When companies take a proactive approach to supporting employee mental health, there is a corresponding increase in employee satisfaction and employee productivity.

Employees who are looking for new roles proactively seek companies that have positive approach to mental health. Unfortunately, the focus on results and profits kills some genuinely great incentives. Some companies which previously offered funding to enable staff to pursue personal development withdrew the funding when external consultants advised them that the scheme wasn't competitive enough and only the best members of staff should be rewarded.

The Mental Health First Aid program is not popular.

Training employees to become Mental Health First Aiders is one of the most common workplace support strategies. Despite their ubiquity in the workplace, they are not a popular option for a number of very valid reasons. The lack of anonymity is a major barrier to disclosure. The Mental Health First Aid programme is seen as a cheap solution which does more for the volunteers who get the training than the people they are meant to support.

Private healthcare is not private.

Within the insurance industry, a higher number of employees have access to private healthcare, however this survey suggests that women (35%) are much more likely to make use of this benefit than men (19%). They seem to be much more willing to seek support and to know their way around the healthcare system.

Men are generally less likely to access healthcare and mental healthcare. Some respondents are unwilling to avail of the service because they think their employers will interpret it as a sign that they are not coping. Many more choose not to use their private health insurance for mental health support because they don't want it to go on their records. Others view private 'health' care as something that is different to 'mental' health care and so they never realised that they could access counselling or therapy through their private health insurance.

Employee Assistance Programmes

There is scepticism about the quality of the support on offer through Employee Assistance Programmes. Some people think it is merely a tick box exercise. Others assume that the support they get through work will be substandard. Amongst those who do access workplace support, there is a lot of dissatisfaction with the quality of the provision. The relationship between HR and mental health and wellbeing support also seems to be a mismatch. When people are paranoid about the impact that having a mental health issue could have on their career, they are certainly not going to talk to HR about it.

Employee Assistance Programmes are not publicised well enough.

Employees will only access support if they know it exists. In this survey, 25% of respondents did not know whether any workplace support was available in their company. Younger people were far less likely to be aware of support options; 69% of young people aged 16-24, were unaware of the availability of any mental health support in their workplace. This discrepancy might be understandable if younger employees were less likely to need mental health support, but a much higher percentage (44%) of people in this age group reported having a diagnosed mental health condition.

The onus is on businesses to make information about the support that the offer easy to access because employees find it difficult to ask for help. Some workplaces do a lot to publicise the support they provide for their employees. Other workplaces need do a lot more. Putting a poster up in the kitchen isn't enough.

When people do try to access workplace support, the process is far too complicated. Trying to access support through links that don't work, or getting to websites that have out of date information on them means that people eventually just give up.

Younger people are not accessing support

Although 85% of employees aged 18-34 had experienced a sustained period of stress, anxiety or depression, 68% had NOT accessed workplace support during that period. Only 13% of people under the age of 34 chose to access workplace support when they were struggling with their mental health.

Concern about the impact on career. The main reason that younger employees do not access support is because they want to remain anonymous and they worry about the impact that it might have on their career path:

Young people don't know who to talk to, or how to access support.

Overall, 25% of employees did not know if their workplace offered support but within 18-34 year old employees, 41% of employees did not know if their workplace offered any mental health support solutions. This is partly because younger employees are less confident and are reluctant to ask manager how to access support.

Younger employees minimise or dismiss their symptoms because they don't want to be a burden. Rather than assessing how the way they feel is limiting their life, they dismiss their concerns as minor because they don't want to be a burden; 56% of junior level employees do not think that their issues are serious or important enough to seek help for.

Rating workplace support

Only 15% of respondents had accessed workplace support. Some had very positive things to say about their experiences. Others felt that they had been badly let down by workplace support services and were not given any support until they finally reached crisis point and had to be admitted as an in-patient.

Of the 15% of respondents who had accessed workplace support:

Women rated workplace support as 3.5 out of 5.

Men rated workplace support as 3 out of 5.

Young people aged 18-24 who used it the least, rated it as 2 out of 5.

Who do employees turn to for emotional support?

Most people (76%) who responded to this survey were married or cohabiting. Only 9% of respondents are single and 4% are divorced, separated or widowed.

Relationships are the primary source of support for all respondents.

70% would turn to their partner for support if they had a problem with their mental health

53% would talk to a friend

34.56% would turn to a family member.

Employees want to maintain the boundary between their personal and professional lives.

Family and friends are the primary source of support because there is a strong desire to keep mental health issues out of the workplace, It is hard to know whether that is a response to the risks associated with disclosure, or a genuine desire to keep these things private.

Workplace support is a last resort.

26% would turn to a private therapist

17% would talk to their GP.

11% of respondents would turn to an employee assistance programme

4% would talk to a workplace counsellor

3% would talk to HR.

13% of respondents would not talk to anyone at all.

Why do employees not avail of workplace support?

Although 69% of respondents say that their workplace provides support for mental health, 66% of respondents in this survey did not seek workplace support when they experienced a sustained period of stress, anxiety and depression.

Disclosure is perceived as being too risky. In this survey, respondents were acutely aware of the potential negative impacts of disclosing a mental health issue in the workplace.

- 49% would worry that it might harm chances of promotion
- 44% would worry about being viewed as weak
- 43% would worry about what colleagues might think, say or do
- 42% would worry about being seen as incompetent
- 42% would worry that it would never be forgotten and would remain on a workplace file
- 42% feel that there is stigma around seeking support
- 39% would worry about colleagues finding out
- 32% would worry that interactions would not remain confidential
- 25% would feel embarrassed or ashamed
- 17% would feel very comfortable seeking support for a mental health issue
- 13% don't know where to go to get help
- 8% think their gender makes it harder to ask for help

Employees fear that it will have a negative impact on career progress. Although efforts have been made to try and destigmatise mental health in the workplace, the perception that disclosure will have a negative impact on career progress persists. Men in particular have a deep rooted fear of being seen as irrational, weak or incompetent

Lack of confidentiality is a legitimate concern. Employees have serious concerns about disclosures remaining anonymous. This is best evidenced by the almost universal mistrust of the Mental Health First Aid programme.

Stigma is still an issue. Despite all that has been done to try and address the issue of stigma, it remains a legitimate concern for many employees:

Lack of understanding around how mental health issues are treated. Most people don't understand how mental health issues are treated, nor do they understand the difference between types of therapeutic interventions. There is currently no easy way to determine the quality of a therapy or a therapist.

The perception that talking is a universal solution isn't helpful for everyone. One young man explained how he talked ad-nauseam to his family and friends about how he was feeling, but none of them were able to help. Talking to professionals seemed to make things worse. What did help was getting a diagnosis of clinical depression. Realising that he was ill enabled him to make changes to his life that helped him to get better:

Employees don't recognise the physical symptoms of stress and anxiety. One of the recurring themes in this survey was the fact that employees in the insurance industry did not understand early warning signs and only paid attention to their mental health when they reached crisis point. Educating employees in the insurance sector about mental illness would prevent people reaching crisis point before they asked for help

When suicide is the benchmark for severity, people dismiss symptoms. Employees don't feel that they can ask for help sooner, because they use suicide as the gauge by which they measure whether they are 'severe' enough to merit help.

Conclusion

Mental health issues are more prevalent in the insurance sector because it is a hugely competitive industry where employees are expected to tolerate high stress in exchange for high salaries. The trade off for being paid well is that you work extremely hard and you don't complain.

Roughly 25% of junior and mid level employees and 19% of senior level employees reported clinical mental health disorders, however 81% of respondents had experienced a sustained period of stress, anxiety or depression in adulthood.

Although 69% of respondents said that their company offered some form of mental health support, only 15% had ever accessed any of the wellbeing services on offer through their company.

Uncertainty about job security is a barrier to openness within the insurance sector. Redundancy is a constant underlying concern because the market is subject to unforeseen economic and geopolitical fluctuation. Lack of agency increases employee stress levels and fear of redundancy is compounded by the knowledge that working in a niche market means that brokers don't necessarily have many transferable skills. In other industries seniority makes it easier to get jobs. In the insurance industry, the opposite is true. Risk is a young person's game. Worrying about redundancy is hugely stressful and the older employees get, the more they prioritise stability and job security over financial reward.

The primary barrier to disclosure is the perception that being identified as having any kind of mental health issue can jeopardise career progression. These fears are largely hypothetical and could be countered with education and greater transparency, however several respondents had personal experience of disclosure leading to discrimination or isolation. Although employers have a 'duty of care' and must do all they reasonably can to support their employees' health, safety and wellbeing, a 2019 Business in

the Community (BITC) Mental Health at Work report revealed that 9% of employees who had disclosed a mental health problem at work were dismissed, demoted or disciplined.

This survey did not include questions on Covid, but it was a topic that came up in the face to face interviews. Although most research on workplace wellbeing found that Covid increased stress levels, for employees with mental health issues, hybrid working seems to have been largely beneficial. Removing the pressure of presenteeism enabled people to manage their time in a way that allows them to prioritise self-care without impacting productivity. Some younger staff found lockdown very isolating and for one young woman, it triggered the onset of panic attacks and a diagnosis of Generalised Anxiety Disorder.

Although efforts have been made to raise awareness of high stress levels and to increase the amount of support available to insurance industry employees, there is a very big difference between providing statutory access to support services and actively encouraging employees to use them. Posters in the kitchen and emails with phone numbers for support services is not enough. Convincing employees that availing of support won't have a negative impact on the way that they are perceived within the company requires a change in workplace culture.

Workplace culture is determined by how motivated managers are to support employee wellbeing. When business is driven by results, it's too easy to focus on productivity at the expense of health, but it is a false economy. Presenteeism is not productivity and there is a very big difference between how long you spend on a laptop and how much you actually achieve. Educating management to understand the connection between employee wellbeing and the success of the company will make them more effective leaders and shift the culture of the workplace in the right direction. Removing managers who refuse to prioritise the wellbeing of their staff is the fastest way for a company to communicate its genuine commitment to improving workplace culture.

The first step for any company that genuinely cares about employee wellbeing is to determine what the existing culture is like. What example do senior management set? What kind of behaviour is rewarded and what is discouraged? Focus groups and surveys can start the conversation,

but the only way to really find out how staff feel is to provide them with opportunities to share their views anonymously.

Some companies have invested huge amounts of time, effort and money in promoting and supporting workplace mental health. By integrating positive mental health practices into the working day, they actively advocate self care and create a culture of openness around support seeking. These companies were very much in the minority, but the glowing feedback from their employees shows that the investment is appreciated. Employees at exemplar companies expressed how the focus on staff wellbeing increased loyalty and created long term stability in the workforce.

Although workplace culture is driven from the top down, social interaction can be a bottom up phenomenon. In companies with a greater degree of openness, colleagues can become an important support system for each other. Strong friendship networks amongst employees create a kind of social glue which makes the workplace a happier environment and reduces staff turnover. Several participants mentioned the importance of social events as a way to foster better employee relationships.

A lack of transparency around confidentiality means that employees still feel that it is safer to rely on family and friends than it is to access support within the workplace. The majority (70%) would talk to a partner if they had a problem with their mental health and just 4% would talk to HR. Worryingly, 13% would not talk to anyone at all.

Stigma and the perceived lack of confidentiality are barriers that are difficult to overcome without a radical change in workplace culture. There is widespread scepticism around the sincerity of the support that is available through the workplace. This is particularly apparent in the obvious distrust expressed about the Mental Health First Aid scheme.

There are 350,000 Mental Health first Aiders in England and it is the leading mental health training organisation in England. Adoption by the Big Four, Deloitte, Ernst & Young, KPMG, and PricewaterhouseCoopers and the City Mental Health Alliance has encouraged the programme to be

rolled out in the insurance industry. However well intentioned the scheme is, this survey suggests that getting employees to open up to trained colleagues is perceived as being fraught with risk. Even when an employee rates the individual Mental Health First Aider as a manager, or a colleague, they will not disclose a mental health issue for fear that it might make them appear weak or incompetent.

Many companies also offer access to private health care, but employees described how difficult it was to find a good therapist; one compared it to 'online dating'. Many are afraid to use private therapy because they don't want a mental illness appearing on their records. There is no clarity about whether this is the case, or not, but people who work in the insurance industry are familiar with the way that data determines insurance tariffs, so they are probably more sceptical than most about whether or not that information is eventually passed back to employers.

Increasing awareness of the support that is available would help; 25% of all respondents and 72% of junior level employees aged 18-24 didn't know if their workplace offered any support at all. Making it easier to access services would also help. Several people complained that the process was so convoluted that they gave up. Quality control is also important. Sending out emails listing services that don't actually work is pointless.

One of the most concerning findings in this survey was the level of ignorance around the relationship between stress levels and the onset of mental health conditions such as anxiety and depression. Many respondents repeatedly ignored warning signs and physical symptoms until they had a major breakdown.

One of the main problems is that people use suicidality as a measure to gauge the severity of their own emotional distress. Rather than assessing any deterioration against their 'well' self, they dismiss their problems as not serious enough to waste anyone's time with. Helping staff to understand that any mental or physical issue that impairs their capacity to function is serious enough to merit support might encourage more employees to use the services that are available to them, but since so many employees don't seem to recognise the signs of mental distress, proactive mental health screening might be a better idea.

Deloitte's 2022 Mental Health report suggests that proactive intervention is more cost effective for employers. Their analysis found that screening employees to identify individuals who may be susceptible to, or experiencing mental health issues, so that targeted support can be provided at an early stage to prevent the problem from worsening provides a ROI of £6.30 for every £1.00 invested.

Training and awareness-raising programmes generating ROIs of 6:10 and 5.30 for every £1.00, respectively. In contrast, reactive support such as offering employees therapy or treatment once their mental health has worsened provides an ROI of only £3.10 for every £1.00 invested.

Rather than educating and training small numbers of employees to become Mental Health First Aiders, it would make more sense to adopt a company wide approach to education and training around mental health. Teaching all staff how to spot the signs of mental illness would have an immediate impact in terms of challenging stigma and creating greater openness. It would also be easier for employees to start the conversation with colleagues they are concerned about, particularly if they are worried about the risk of suicide. Although Public Health England make it clear that 'Talking about suicide will not put the idea in someone's mind, but it will make the topic less taboo' and the key guidance is to always ask about suicidal thoughts if they are suspected, people are afraid of saying the wrong thing. As this respondent explains, it is impossible to say anything about suicide to a suicidal person that they don't already know:

Key recommendations

Changes that will cost virtually nothing but will address a number of existing concerns.

- Reassure staff that using workplace support is confidential
- Provide complete transparency around confidentiality and what stays on record if services are accessed
- Reassure staff that disclosing a mental health issue will not affect career progression
- Encourage senior leaders and managers to be more open about their own mental health experiences.
- Publicise available support properly, make it easy to access and provide clear instructions on how to use services
- Regularly test links to digital support to ensure they are working and that there are no digital dead ends in the support system
- Make looking after mental health in the workplace a prosocial experience by organising events and activities. From hikes to choirs to lunchtime running clubs or art workshops, there are an infinite number of low cost ways to improve cohesiveness and build social bonds amongst staff.

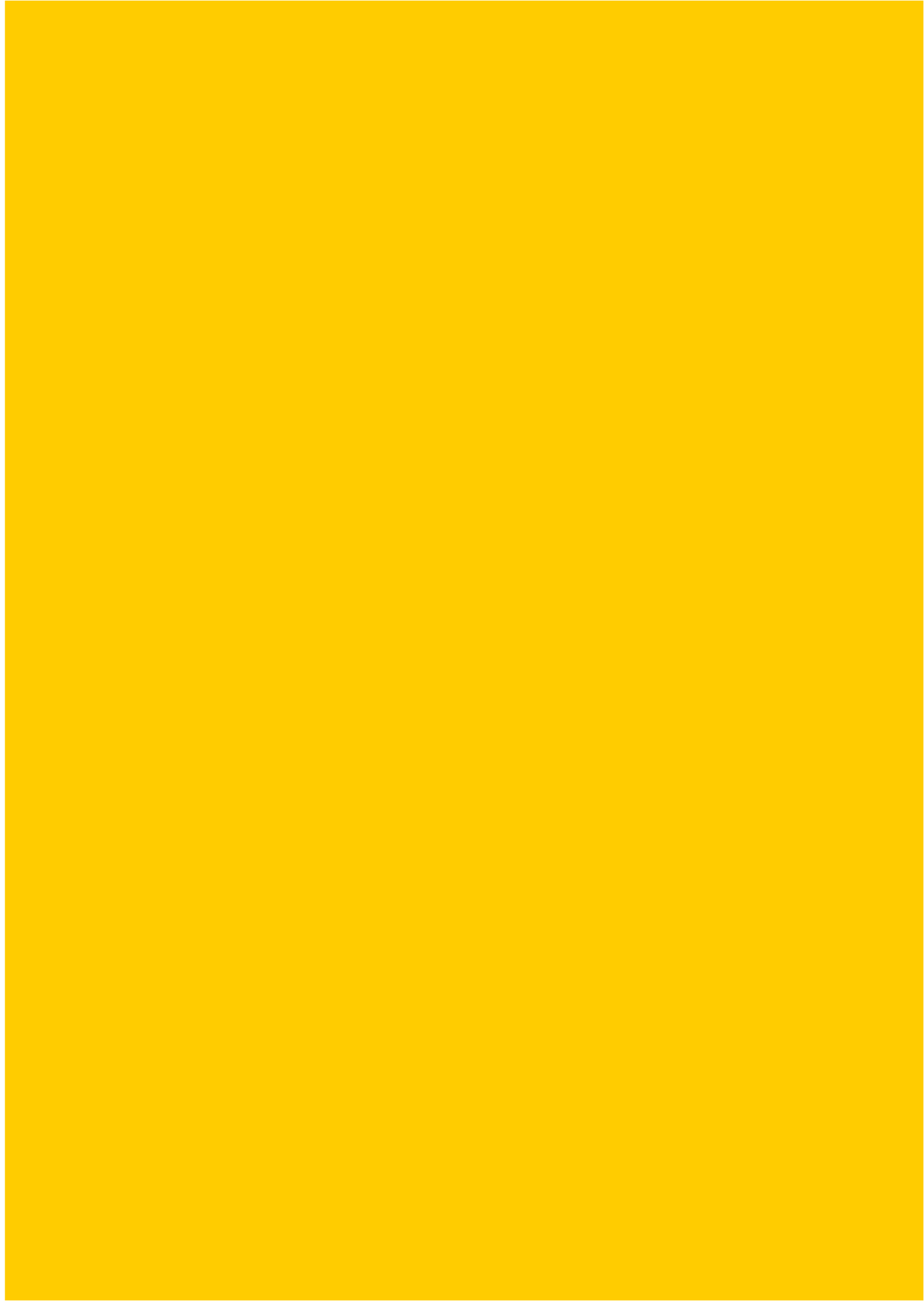
Changes that will cost something to implement but will significantly improve mental health in the workplace

- Provide ALL STAFF with education and training on how to spot the signs of mental illness and how to talk to a colleague if they are concerned about their mental health. Some training resources such as the Zero suicide alliance training course are free although bigger companies should offer a donation.

- Carry out regular mental health screenings to try and identify people who need support before they reach crisis point

Key recommendations for younger staff

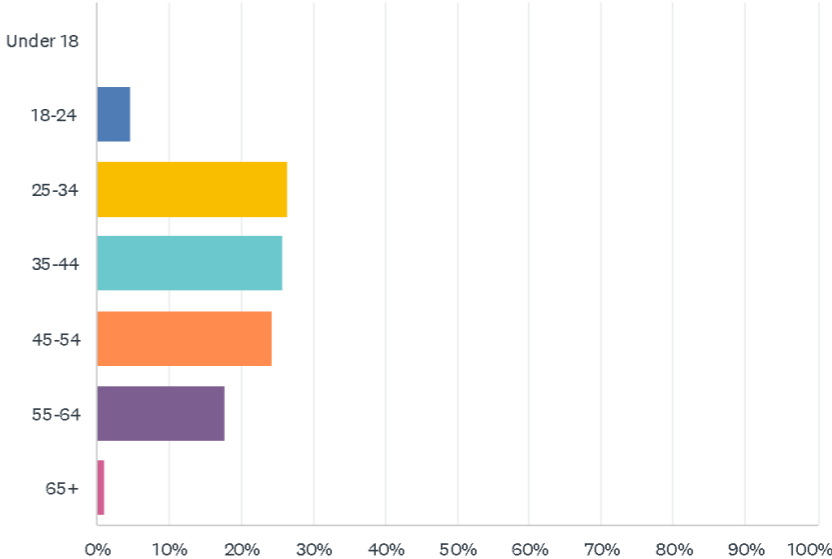
Mental health issues are more prevalent in younger employees in the insurance sector (31% v. National average of 16%) but in the very early stages of a career when you are at a junior level, disclosing a mental health issue can feel like too much of a risk. Most (72%) younger employees don't know what workplace support is available to them, and fears about the impact on career progression mean it is unlikely that they would access it anyway. For this cohort, access to an evidence based, anonymous peer support service such as the Tellmi app would be very beneficial:



Appendix

What age are you

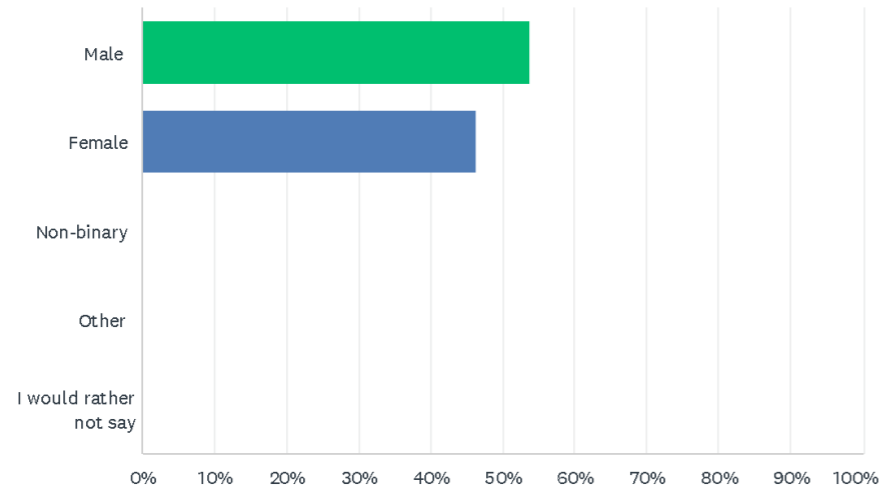
Answered: 272 Skipped: 0



ANSWER CHOICES	RESPONSES	
Under 18	0.00%	0
18-24	4.78%	13
25-34	26.47%	72
35-44	25.74%	70
45-54	24.26%	66
55-64	17.65%	48
65+	1.10%	3
TOTAL		272

What is your gender?

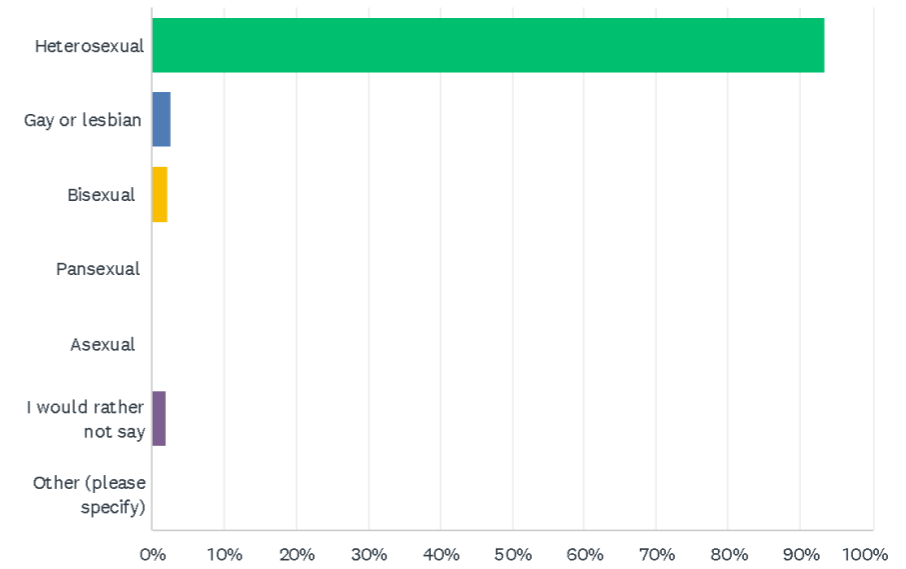
Answered: 272 Skipped: 0



ANSWER CHOICES	RESPONSES
Male	53.68% 146
Female	46.32% 126
Non-binary	0.00% 0
Other	0.00% 0
I would rather not say	0.00% 0
Total Respondents: 272	

What is your sexuality?

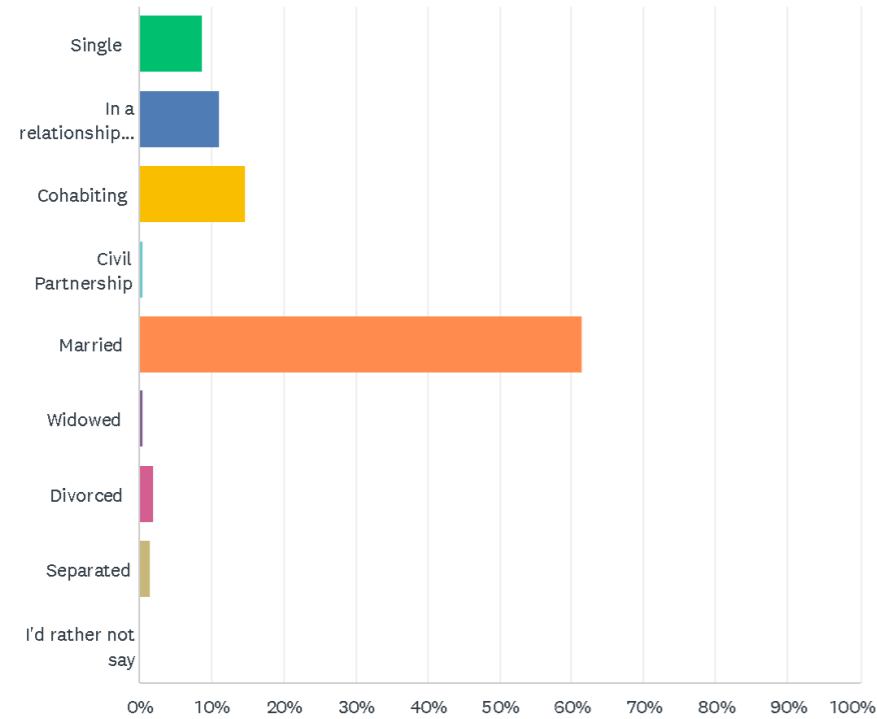
Answered: 272 Skipped: 0



ANSWER CHOICES	RESPONSES
Heterosexual	93.38% 254
Gay or lesbian	2.57% 7
Bisexual	2.21% 6
Pansexual	0.00% 0
Asexual	0.00% 0
I would rather not say	1.84% 5
Other (please specify)	0.00% 0
Total Respondents: 272	

What is your relationship status?

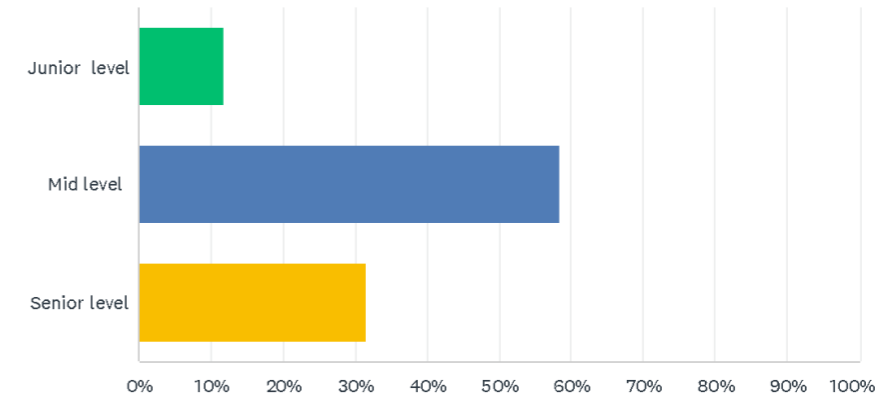
Answered: 272 Skipped: 0



ANSWER CHOICES	RESPONSES	Count
Single	8.82%	24
In a relationship but not cohabiting	11.03%	30
Cohabiting	14.71%	40
Civil Partnership	0.37%	1
Married	61.40%	167
Widowed	0.37%	1
Divorced	1.84%	5
Separated	1.47%	4
I'd rather not say	0.00%	0
TOTAL		272

What is your level of seniority in the workplace?

Answered: 272 Skipped: 0



ANSWER CHOICES	RESPONSES	Count
Junior level	11.76%	32
Mid level	58.46%	159
Senior level	31.62%	86
Total Respondents: 272		

If you have previously accessed workplace support for your mental health, how would you rate the provision?

Answered: 35 Skipped: 237

3.3★
average rating

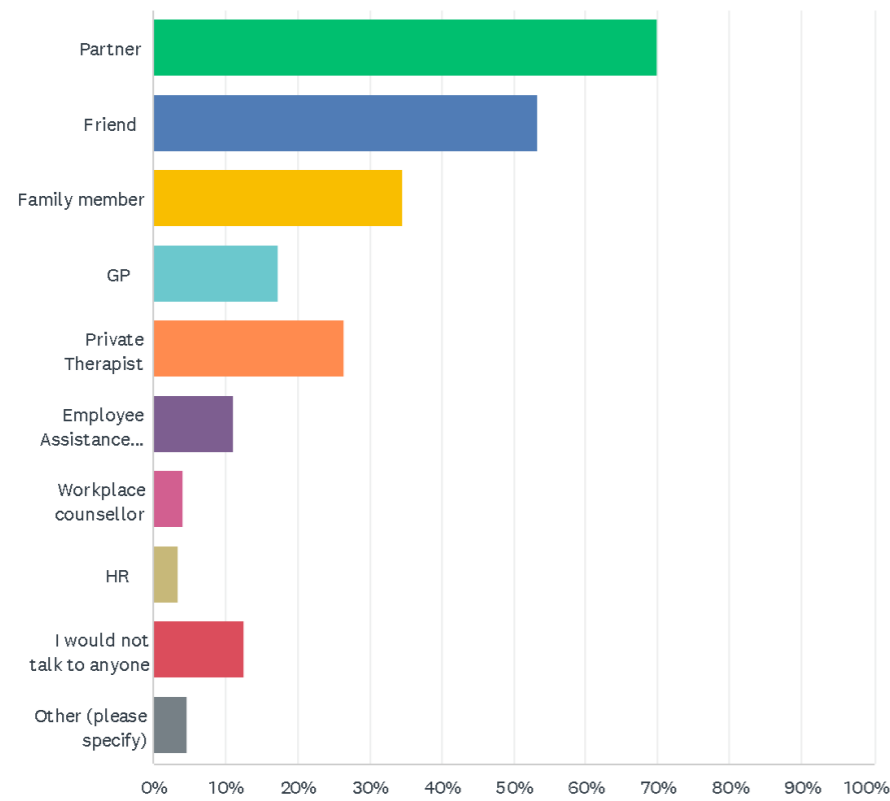


	1	2	3	4	5	TOTAL	WEIGHTED AVERAGE
★	20.00% 7	2.86% 1	25.71% 9	25.71% 9	25.71% 9	35	3.34

Comments (57)

If you had a problem with your mental health who would you turn to for support? You can select more than one

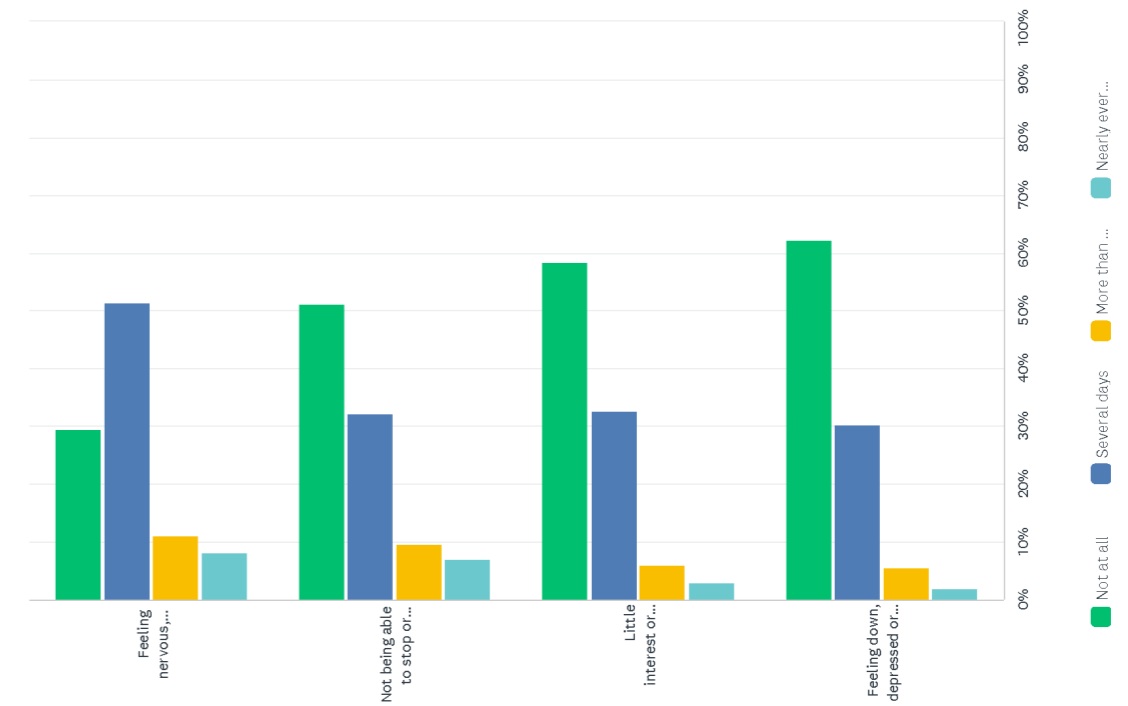
Answered: 272 Skipped: 0



ANSWER CHOICES	RESPONSES	
Partner	69.85%	190
Friend	53.31%	145
Family member	34.56%	94
GP	17.28%	47
Private Therapist	26.47%	72
Employee Assistance Programme	11.03%	30
Workplace counsellor	4.04%	11
HR	3.31%	9
I would not talk to anyone	12.50%	34
Other (please specify)	4.78%	13
Total Respondents: 272		

Over the last 2 weeks, how often have you been bothered by the following problems?

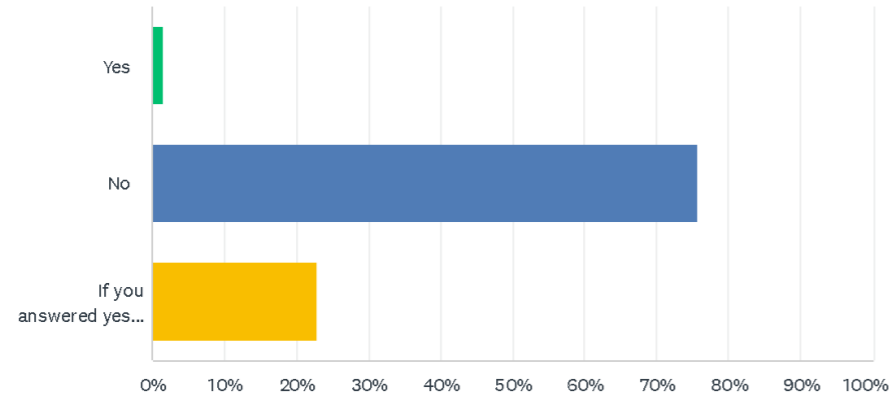
Answered: 272 Skipped: 0



	NOT AT ALL	SEVERAL DAYS	MORE THAN HALF THE DAYS	NEARLY EVERY DAY	TOTAL	WEIGHTED AVERAGE
Feeling nervous, anxious or on edge	29.52% 80	51.29% 139	11.07% 30	8.12% 22	271	0.98
Not being able to stop or control worrying	51.11% 138	32.22% 87	9.63% 26	7.04% 19	270	0.73
Little interest or pleasure in doing things	58.52% 158	32.59% 88	5.93% 16	2.96% 8	270	0.53
Feeling down, depressed or hopeless	62.22% 168	30.37% 82	5.56% 15	1.85% 5	270	0.47

Have you ever been diagnosed with a mental health disorder?

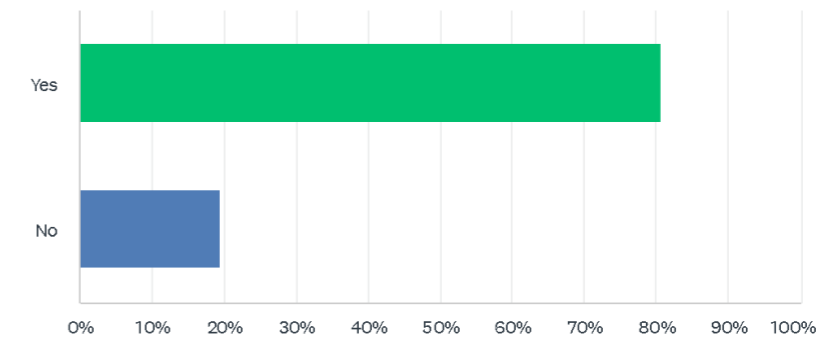
Answered: 272 Skipped: 0



ANSWER CHOICES	RESPONSES
Yes	1.47% 4
No	75.74% 206

Has there been a period as an adult where you felt stressed, anxious or depressed for a sustained period?

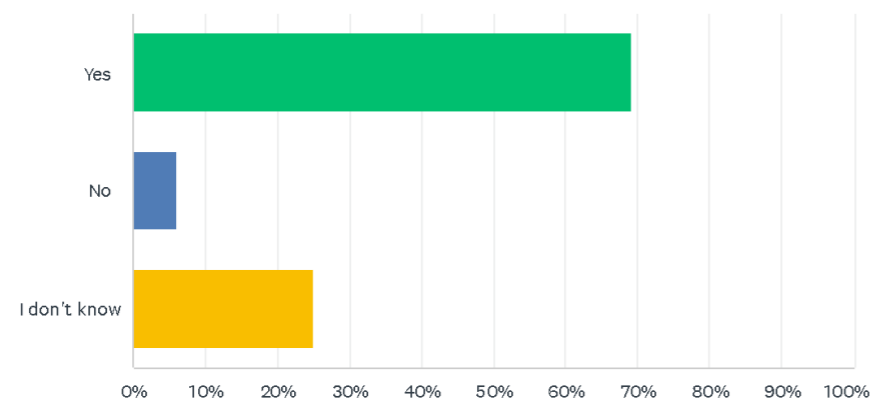
Answered: 272 Skipped: 0



ANSWER CHOICES	RESPONSES
Yes	80.51% 219
No	19.49% 53
TOTAL	272

Does your workplace provide mental health support for staff who feel stressed, anxious or depressed?

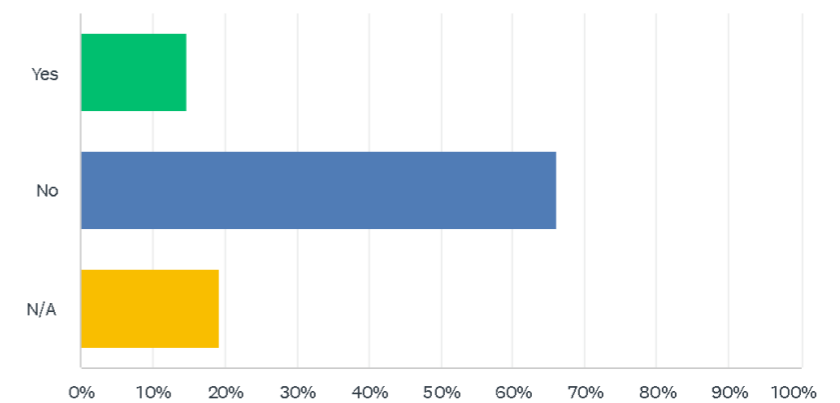
Answered: 272 Skipped: 0



ANSWER CHOICES	RESPONSES
Yes	69.12% 188
No	5.88% 16
I don't know	25.00% 68
TOTAL	272

During that period did you seek support from your workplace?

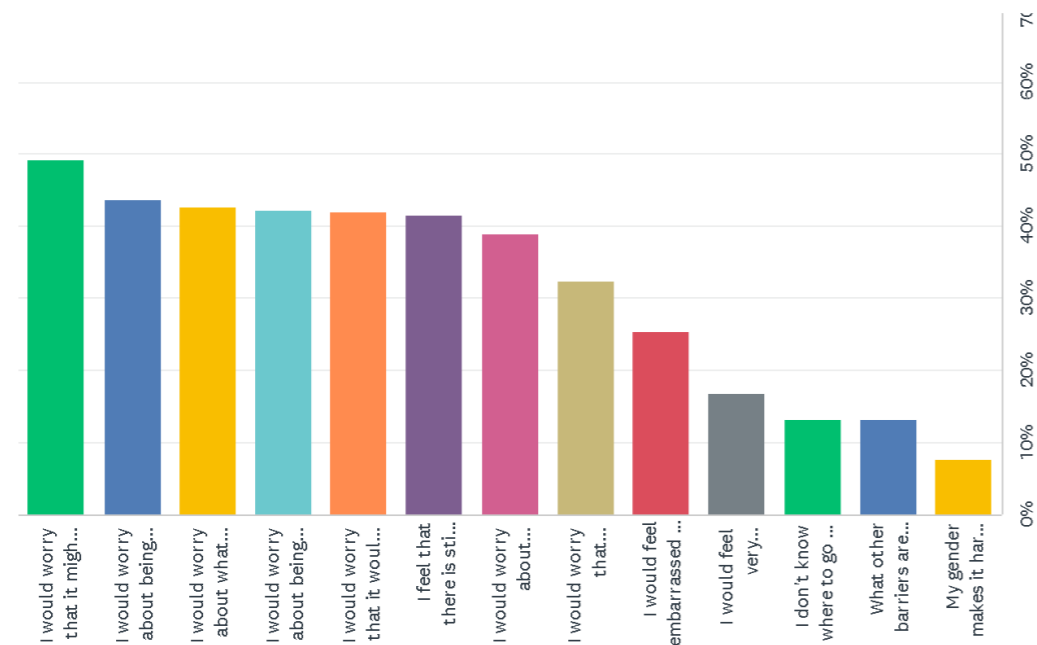
Answered: 272 Skipped: 0



ANSWER CHOICES	RESPONSES
Yes	14.71% 40
No	66.18% 180
N/A	19.12% 52
TOTAL	272

What do you think the barriers are when it comes to accessing workplace support for mental health? You can select more than one

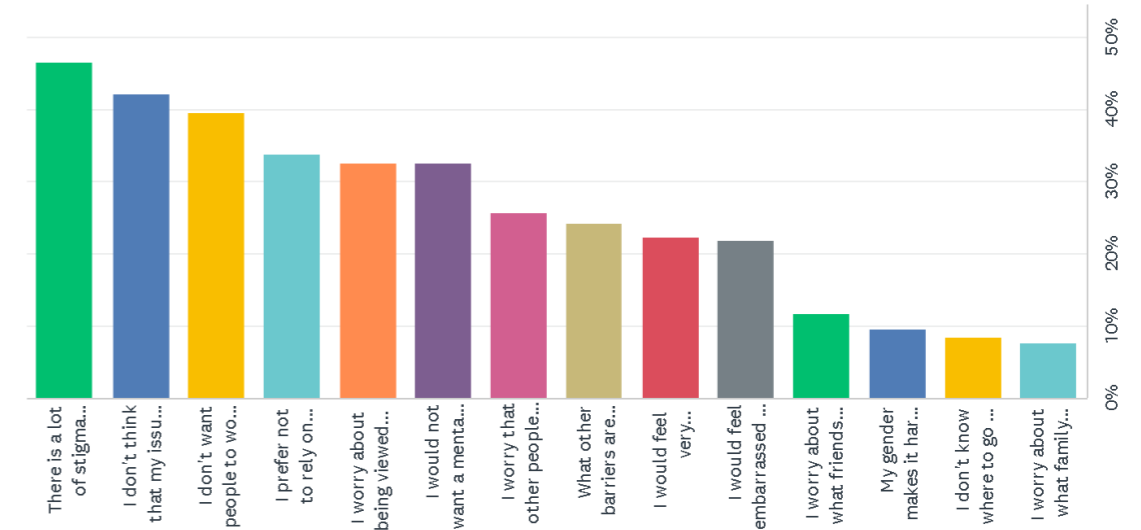
Answered: 272 Skipped: 0



ANSWER CHOICES	RESPONSES
I would worry that it might harm chances of promotion	49.26% 134
I would worry about being viewed as weak for having a mental health problem	43.75% 119
I would worry about what colleagues might think, say or do	42.65% 116
I would worry about being seen as incompetent	42.28% 115
I would worry that it would never be forgotten and would remain on a workplace file	41.91% 114
I feel that there is stigma around seeking support	41.54% 113
I would worry about colleagues finding out	38.97% 106
I would worry that interactions would not remain confidential	32.35% 88
I would feel embarrassed or ashamed	25.37% 69
I would feel very comfortable seeking support if I had a mental health issue	16.91% 46
I don't know where to go to get help	13.24% 36
What other barriers are there to accessing mental health support in the workplace?	13.24% 36
My gender makes it harder to ask for help	7.72% 21
Total Respondents: 272	

What do you think the barriers are when it comes to accessing professional help for mental health generally? You can select more than one

Answered: 272 Skipped: 0



ANSWER CHOICES	RESPONSES
There is a lot of stigma around seeking support	46.69% 127
I don't think that my issues are serious or important enough	42.28% 115
I don't want people to worry about me	39.71% 108
I prefer not to rely on others	33.82% 92
I worry about being viewed as weak, or crazy, for having a mental health problem	32.72% 89
I would not want a mental health problem to appear on my medical records	32.72% 89
I worry that other people might find out	25.74% 70
What other barriers are there to access mental health support?	24.26% 66
I would feel very comfortable seeking support if I had a mental health issue	22.43% 61
I would feel embarrassed or ashamed	22.06% 60
I worry about what friends might think	11.76% 32
My gender makes it hard for me to ask for help	9.56% 26
I don't know where to go to get help	8.46% 23
I worry about what family might think, say, do, or feel	7.72% 21
Total Respondents: 272	

**Tellmi is a multi-award winning provider
of mental health support and research.**

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