

# Hard labour

the employee to adjust their working hours. Pam Smith, community involvement team manager at 2gether Mental Health NHS Foundation Trust in

I was both excited and nervous. The interview could land me something I really wanted: a job with a major news organisation. But I was determined to be open about my psychiatric problems, as they are very much a part of me – what you see is what you get, for better or worse. I revealed that I have paranoid schizophrenia, confident that, in the world after the Disability Discrimination Act, employers couldn't discriminate against me. Sadly, this employer did in the end, but only after asking me what 'reasonable adjustments' I would need in the job. My response was amazement at such a question – so I flippantly suggested not sending me to Basra, as the stress may lead me to have a psychotic episode in a gunfight.

Gloucestershire says that she allows flexible working hours for her whole team.

'In a small team like ours, we can allow shorter hours over a period if someone needs them, because the rest of the team takes up the slack,' she says. She uses flexible working both to keep someone in work when their mental health is deteriorating and to allow someone to recover at home from a physical injury or an operation.

The next suggestion in the TUC document is 'giving someone a workplace buddy'. At university, for my MA, I had a few people I could trust to talk to when my brain was giving me messages about conspiracies against me in the class. This was informal, and they generally laughed

when I fronted them about it – but the system worked.

Brigid Morris, project manager for Open Up Toolkit, the project set up to help service users tackle discrimination against mental

Landing and holding onto a job can be challenging for people diagnosed with a mental illness, despite legislation outlawing discrimination against them

Richard Shrubbs argues that candidates should be open about their condition



I had been given reasonable adjustments under the Disability Discrimination Act at college – despite my very obvious intelligence and determination throughout the practical assessments to meet the deadlines everyone was given, I was given an hour extra at each examination. However, I'm mad, not thick! I took 10 minutes of each allowance to tidy up the papers, and I was in the pub before the first pint had been sunk by my classmates.

The Disability Discrimination Act came into being in 1995. It outlaws discrimination against disabled people in the workplace. It also makes sure that people with wheelchairs can access most public areas and workplaces, that those with visual impairments can get around, and so on. The act applies to everyone with a disability – whether they're in a wheelchair or mad as a brush. People with mental health problems have more incipient and difficult disabilities than most, though – it affects our behaviour and the way we view the world. Put simply, the wheelchair user sees a conspiracy of staircases against them, someone who is mentally ill can think the whole world's against them.

The Trades Union Council (TUC) published a guide for union representatives in May last year to help ensure that people with psychiatric issues get fair treatment in the workplace. Called 'Representing and supporting members with mental health problems at work', it's a concise, useful guide to all manner of workplace situations, and the recruitment and retention of service users in the workplace. As a place to start, this is one of the best available.

There is a section on reasonable adjustments commonly given in the workplace. The first is allowing

illness, says that the team has a lexicon of emotions created by their experiences in the mental health system.

'Surprisingly, because it is a predominantly male workforce here, people are able to speak about their feelings quite openly. This really prevents people from bottling it up and enables them to speak out long before minor issues become problems,' she says. Open Up and many other mental health charities have an anonymous telephone counselling line for staff to use if they are feeling too stressed about something. They don't record who uses it and when, but they do know it is used.

The TUC document also suggests changing someone's work duties if they become ill. Tom Bromwich, of the work placement organisation Pluss, says that he took someone on with post-traumatic stress disorder (PTSD). The employee was confident that he could work full time, even though Mr Bromwich suggested in the interview that he take up the part-time post. 'It became apparent that his PTSD was making life hard for him,' Mr Bromwich says. 'We were happy, therefore, to reduce his hours for the part-time post. Since then he has taken up another part-time job in his home area in addition to this post, and he's very happy in his life as it is now.'

There is, inevitably, the potential issue of sickness among service users. We can get too overloaded by our problems – sometimes without knowing it. And we may not be aware about our declining health. Ms Smith says that when someone is off sick she visits them every week. 'I try not to tread on their toes. Walking the line between being friendly and getting in their way can be tricky, but I do seem to manage it,' she says. Regular contact with

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the person who is off sick shows them that they are a valued team member and prevents them from being caught in the rut of long-term sickness, where they lose interest in the job they are absent from.

As Open Up staff are based all over England and Wales, Ms Morris can't, for obvious reasons, visit sick staff members. Instead she phones them. If, for instance, their south-west representative – several hours from London – goes off sick, she reduces their workload to the minimum. She cancels all non-urgent appointments and, where possible, gets another representative to attend meetings. Recently, with one rep off, she sent someone from London to attend an urgent meeting in their place.

There are occasions when we feel as right as rain but everyone else knows we're as sick as a dog. Ms Morris, whose representatives are all mental health service users, hasn't run into this kind of situation among her paid staff, but she has among volunteers and people who attend her events. 'In one instance, we had a case where a volunteer was very unwell,' she says. 'We have networks into many care teams, and in this case we got onto his support network, who got him into treatment.'

Mrs Smith experienced a similar incident, which has led to the introduction of a new policy toward volunteers. 'We now get a new volunteer to sign a piece of paper where they agree that we can get onto their care team directly if they experience a period of illness and don't have the insight to deal with it. It is a rare event, but we do need to take care, both for their sakes and for all our staff members.'

One dilemma is whether to discipline someone or get them talking long before a disciplinary situation is necessary. Mr Bromwich sums up the issue best: 'Communication is the key in averting problems before they occur.' Often a complaint can be averted by taking a staff member aside and getting the issue out in the open

before it festers, and the difficult and stressful process of taking disciplinary action is pursued.

In my opinion, those of us with experience of mental illness need to be open about our past. The Disability Discrimination Act should ensure that no one discriminates against those who are mentally ill in the recruitment process, and employers are bound by law to make sure everyone in the workplace is comfortable and not overburdened in their role.

Once in post, employees and managers must be open wherever possible, as communication not only averts problems, but also ensures a good working environment for all. Certainly, for employees with mental health disabilities, communication is key. ■

## Help at hand

**Joy Callum, administrative assistant at 2Gether NHS Trust, Gloucester, writes:**

When I had my breakdown, I had low confidence, and because I lacked workplace skills – I couldn't use a computer, for example – I believed I had no future in work.

Before I applied for work, I did courses run by the government to give me the skills I felt I lacked. There was a scheme funded by the NHS called Clubhouse (now closed), which ran courses in the skills required in the workplace, including a computer course, which is essential in the work I do now. This really boosted my confidence and set me on the road back to employment.

It is important that I stay on my medication, as it controls my mental health problems, so I didn't ask for any reasonable adjustments under the Disability Discrimination Act. I felt I didn't need any. If I did, I would ask my manager, who would write to occupational health. The systems are in place if I need the adjustments, but at the moment I don't. I feel comfortable enough in my team to ask for help if I need it.