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# Creating work climates that facilitate and maximize the benefits of disclosing mental health problems in the workplace

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“I suffer from anxiety and panic attacks which in turn leads to me suffering from mild depression. This has a huge impact on not only my life but those around me. I'm a very private person and very few people know about what I'm battling with, I'm worried what people think or that people will talk, judge or see me as weak. I feel like people never fully understand mental health issues if they haven't been through it, and even when they have, everyone's struggles are different and their own. I give off this hard exterior at times but inside I'm often really struggling. The thought of people seeing me as weak is something I dread, although I believe those who fight these battles are the strongest amongst us all. I know telling people would save a thousand questions and confusion. Some people would understand, help even, I know it's best to talk but it's the fear of those who will judge.” (Jenny, November 11, 2016)<sup>1</sup>

## Disclosure of Mental Health Problems

“I told my manager in my job that I was experiencing depression and that I was on medication which would affect my ability to do my job. He said he did not believe that my medication was affecting my performance, and that I was just not up to doing my job and I would be dismissed in three months' time unless I improve. I really didn't know what to do or who to talk to as I have a lot of financial commitments. I had to take time off work as I couldn't face going back there following this.” (#endstigma, November 30, 2016)

<sup>1</sup> These opening vignettes are excerpts of personal stories shared on [www.time-to-change.org.uk](http://www.time-to-change.org.uk), a website, and social movement, devoted to changing attitudes and behaviors related to mental health problems. Contributors of personal stories select their own pseudonyms.

“I feel incredibly lucky to work for Home Group, a social enterprise, charity and one of the UK's largest providers of quality housing and supported housing services. The organization also manages a number of mental health services across the country. I felt my anxiety sneaking up on me again a few months ago. I informed HR and my line manager, I was provided with a confidential helpline number where I was able to speak immediately to a professional counsellor, and I had texts and phone calls from at least three colleagues during the time I was off. The result? I returned to work happy and well after three days. In previous employment, I have had to wait around three months to see a counsellor through occupational health and have ended up being off sick for up to six weeks.” (Lucy, January 10, 2017)

As these opening vignettes demonstrate, the decision to reveal a mental health problem in the workplace can be tumultuous and difficult for many employees. Although disclosure can potentially lead to positive outcomes for employees with mental health problems, disclosure can also very possibly lead to unfair or uncivil treatment by superiors and/or coworkers, despite the existence of laws aimed at preventing such discrimination at work. Depending on the length and severity of symptoms, poor mental health is a type of disability. Yet, when one first hears the words “disability in the workplace,” an employee's mental health may not be the first image that comes to mind. Indeed, whereas some manifestations of disabilities are quite visible—consider, for instance, a wheelchair used by a person living with paraplegia, a white cane used by a person who is visually impaired, or a signal dog used by a person who is deaf—a mental health problem does not always have visible manifestations. As a result, managers and coworkers may very well not be aware of someone's mental health status,

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and its possible workplace implications. It is the typically invisible and often episodic nature of mental health problems that renders the topic of disclosure so important when considering the impacts of mental health problems in the workplace.

An employee's decision to disclose a mental health problem is of particular importance to managers and supervisors for several reasons. Given the prevalence of mental health problems in society, most managers will supervise individuals with a mental health problem in their career—*whether they know it or not*. Disclosure is often necessary for employees to seek support for the mental health problem that they experience at work. Moreover, civil (human) rights legislation in several western countries, such as the United States, the United Kingdom, and Canada, specify that disclosure is typically a necessary first step for employees to seek formal accommodation for a mental health disability. There is also evidence that disclosure is associated with reduced anxiety, as well as increased job satisfaction and performance, particularly when one receives the relevant social and instrumental support they need following disclosure. Finally, there is evidence to suggest that employees are more likely to disclose a disability, including mental health problems, to an immediate supervisor or manager, compared to revealing their problems to both coworkers and HR/administrators. It is likely that employees disclose most often to their immediate supervisors or managers because they feel a level of interpersonal familiarity, and also recognize that their supervisor is in a position to provide accommodations and assistance.

The first goal of this paper is to render managers more aware of the reasons why one or more of their employees would choose to conceal rather than disclose their mental health problem. In so doing, we bring particular attention to the issue of stigma, and how it affects perceptions that employees have of others and of themselves. Many employees see the potential costs of disclosing as outweighing its possible benefits, which would be understandable given the suggestion that mental health problems are among the most stigmatized conditions in the workplace. We then describe some organizational benefits of managers creating a work climate where their employees are more inclined to disclose their mental health problem. Finally, we offer managers several considerations for comporting themselves and managing their staff in ways that would create such a work climate. A compassionate and supportive climate would not only encourage employees to come forward, but also help mobilize organizational resources to optimize accommodations, and help to curb the overall stigmatization of mental illness. Moreover, by fostering organizational climates supportive of employees in difficulty, organizations reap the benefits of retaining talented employees, increased employee performance, and more positive employee attitudes. A central point made in this article is that the decision to disclose one's mental health problems, past or present, is a deeply personal decision; only the focal employee can decide when to disclose, to whom to disclose, and what to specifically disclose. For this reason, managers should avoid pressuring employees to disclose, whether implicitly or explicitly, but instead foster workplace climates that convey support for those living with mental health problems and that help facilitate employees' disclosure of their mental

health-related needs. In addition, as we will explain in more detail, managers cannot expect a simple procedure or process for supporting employees with a mental health problem. Part of creating a supportive climate is recognizing that employees' individual experiences with mental health conditions are often unique and nuanced, as well as taking these personal experiences into account when seeking to understand and help an employee who discloses a mental health challenge.

## THE BARRIERS TO DISCLOSURE OF MENTAL HEALTH PROBLEMS IN THE WORKPLACE

Research that has focused on why individuals choose to disclose or conceal their mental health problems typically focuses on one of two related themes. The first is the notion of identity. Mental health problems can be characterized as *stigmatized* identities. As we will detail further, they are stigmatized because mental health problems are typically associated with perceived negative characteristics. Alternatively, some people choose to ignore or avoid incorporating their mental health problem into their identity, which can also influence the extent to which they disclose to others. The second theme is the cost-benefit analyses employees typically engage in, explicitly or implicitly, when deciding whether and how to disclose a mental health problem. People living with mental illness may perceive more costs than benefits to disclosure, or do not believe that the potential benefits outweigh the potential risks to disclosure. Both perspectives can hold individuals back from revealing their mental health problems in their workplace. Here, we delve deeper into these two themes of research to highlight the salient barriers to disclosure of a mental health problem in the workplace.

### Identity-Based Barriers

Each day, when we show up at work, each of us brings along a set of physical and psychological characteristics such as being introverted, Caucasian, young, female. These characteristics may influence both how the world perceives us and how we perceive ourselves. They may also be part of our identities, meaning the parts of our self-concept that have to do with who we are at our very core. Part of our self-concept may thus be composed of identities related to the various social or demographic groups each of us belongs to. Relevant to the current discussion, how a person with a mental health problem incorporates that characteristic into his or her identity will influence his or her willingness to disclose.

First, an important barrier to disclosure is the likelihood that the characteristic on which the identity is based is valued versus stigmatized. A stigmatized characteristic is one typified by negative stereotypes and resulting negative emotions, attitudes, and discriminatory behaviors relative to that condition. As a result, individuals who are stigmatized possess a characteristic that others believe "devalues" them. Importantly, stigma can be infused into one's identity.

Mental health problems are often typified by social stigma (also known as public stigma), which is stigma held by others, and these others are often members of relatively more powerful majority groups (here, those who do not have

mental health problems). There is a stigma gradient when looking at the vast spectrum of mental health problems. For example, some evidence suggests that psychotic disorders, such as schizophrenia, are typically judged more harshly compared to anxiety disorders, such as agoraphobia, and mood disorders, such as depression. Furthermore, mental illness is stigmatized both in society in general, and in work contexts in particular. A common barrier to disclosing mental health problems in the workplace is thus the fear of social stigma. Many people want to avoid being labelled by others as someone with a mental health problem and the real or perceived judgments that can coincide with that label. This barrier is exemplified in our first vignette, and it illustrates that even if one really *wants* to disclose, the fear of being negatively judged prevents the person from doing so.

Indeed, there are many negative beliefs about mental illness. For example, common stereotypes associated with mental health problems is that people who have a mental health problem are simply weak and do not want to work. A less common, but still relevant stereotype, is that people with mental health problems are unpredictable, and potentially destructive. In line with these stereotypes, in the 8<sup>th</sup> Annual National Report Card on Health Care, conducted by the Canadian Medical Association in 2008, 46% of respondents in a large nationally representative survey agreed with the statement that people use the term mental illness as an excuse for 'poor behavior and personal failings', and 27% reported feeling fearful around people who live with a serious psychiatric disorder. Research has also shown that people tend to believe that those who live with mental health problems lack effective social skills and are difficult to work with. When people agree with such negative stereotypes, or if they have a negative emotional reaction to individuals belonging to the stereotyped group (such as feeling fear when interacting with a person with mental health problems), prejudice occurs. Behaving according to prejudice results in discrimination; a topic we return to when we discuss the cost-benefit analyses individuals living with mental health problems often engage in when grappling with disclosure.

Self-stigma occurs when a person incorporates or internalizes the negative beliefs associated with social stigma into his or her own identity. Agreeing with and internalizing these beliefs may lead to self-limiting behavior. For example, a person who has internalized the stigma of mental illness may start believing that he or she is indeed a poor performer not worthy of a promotion, and consequently may no longer be proactive in terms of career advancement during performance reviews. Internalizing the stigma and seeing it as legitimate brings about negative views of oneself, reduced self-esteem, and feelings of demoralization, and shame. These negative thoughts and feelings about oneself may act as a deterrent to disclosure; indeed, few people are motivated to reveal to others the root of their negative self-views.

It is important for managers to understand that the likelihood of disclosure is also influenced by the extent to which an employee actually recognizes a mental health problem as part of his or her identity. Researchers Alecia Santuzzi and Pamela Waltz have carried out excellent work on the topic of identity as it relates to workers with disabilities. They use the concept of *disability identity* as being the part of

someone's self-concept defined by having a disability, which is distinct from the actual physical or psychological condition, and whether or not such condition is formally recognized in the relevant legal environment. Two individuals presenting similar symptoms related to depression might have very different perspectives of how much (if any) of their work-related or professional self-concept involves living with depression. For example, an artist who draws inspiration from his depression might incorporate depression into his sense of self differently compared to an artist who also lives with depression, but draws her inspiration from the sociopolitical climate. Moreover, the likelihood of adopting a disability identity is reduced when the worker is unaware of having a mental health problem, or relatedly, is unwilling to associate the mental health problem with a disability label. For example, a police officer who experiences a traumatic event on the job might begin to experience symptoms of post-traumatic stress disorder (PTSD). Even though she may be trained in recognizing the symptoms and signs of PTSD, she may also be unconsciously unwilling to accept these symptoms and signs in herself because they go against her professional identity as a 'strong and fearless' police officer. Thus, while some people might internalize social stigma into their identity, resulting in the aforementioned self-stigma, others might eschew recognizing their mental health problem in order to avoid such self-stigmatization. Such avoidance can be a barrier to disclosure because the employee does not perceive there is *anything* to disclose.

As explained above, employees vary in the extent to which they incorporate their mental health problem into their identity, with those avoiding such incorporation being less likely to disclose. Moreover, those who do include their mental health problem in their identity are less likely to disclose to the extent that this aspect of their identity is stigmatized. However, some people view their mental health problem in a positive light and thus fully incorporate it as an integral part of their sense of self. They can sometimes even feel pride in that identity (similar to how many cancer survivors feel pride in that identity). When this occurs, a person is typically more favorable towards disclosure. In addition, those who incorporate their condition into their identity may even feel a sense of responsibility in disclosing their mental health problems as a means of educating others, and helping to reduce stigma. However, even when employees have a relatively positive self-perception of their mental health problems, they may still choose to conceal this aspect of their identity because they believe that the personal and professional costs of disclosure outweigh its potential benefits. We turn to this issue next.

### Cost-Based Barriers

Beyond perceptions of stigma, research has revealed that there are indeed real and perceived costs to disclosing one's mental health problem in the workplace. Stigma surrounding mental health problems persists to a large extent because employees continue to experience adverse effects of disclosure, despite legislation that is supposed to prevent such adverse responses from happening. Compare, for example, the divergent experiences recalled in the second and third opening vignettes regarding disclosure of a mental health problem. In the third vignette the employee recalls receiving

a supportive, helpful, and reasonable response from her employer. Because of this response, she is able to return to work once her symptoms have subsided and continue to be a productive team member. The employee in the second vignette however, describes a decidedly more negative experience in which his or her employer refuses to believe that the medication used to manage the mental health problem is the source of poorer job performance. As a result, the person feels embarrassed and withdraws from work.

Some evidence suggests that employees report positive or neutral, rather than negative, experiences following their disclosure. For example, in a 2014 study on disclosure of a disability in the workplace, including the disclosure of mental health problems, Sarah Von Schrader, Valerie Malzer and Suzanne Bruyère found that about one quarter of respondents indicated that they experienced adverse long-term effects as a result of their disclosure, whereas 34.3% reported neutral and 41.1% reported positive long-term effects. At the same time, the fact that some people do experience certain negative reactions following disclosure can further contribute to employees' fears regarding the costs of disclosure. In many circumstances, it can be difficult to determine *a priori* whether revealing one's mental health problem in a work setting will lead to a productive, collaborative response from one's employer, or harm one's job status and future career prospects.

Pop-press articles advising employees whether or not to disclose their mental health problems typically invoke a cost-benefit analysis. For example, in a 2014 *New York Times* article entitled "Deciding Whether to Disclose Mental Disorders to the Boss" the author suggests that a person with a mental health problem should consider elements such as the extent to which one's supervisor is supportive, the overall culture of one's company, and even one's own performance track-record and reputation in order to calculate the potential costs to disclosure. A number of legal experts, researchers, people with disabilities, and allies of people with disabilities argue that in many cases, it is wise to wait until one is hired before disclosing, unless one needs accommodations during the selection process. This advice is consistent with research that has suggested that revealing one's mental health problems in the interview—or pre-hire stage—can be riskier than revealing such problems once one has been hired. Such discourse inadvertently places a stronger emphasis on the costs of disclosure rather than its benefits.

Employees naturally engage in such a cost-benefit analysis when considering whether to reveal their mental health problem, and their fears regarding the costs of disclosure are often more salient, impactful, and numerous than its perceived benefits. This perspective is consistent with the principle of *loss aversion*, the tendency to focus more on what one stands to lose rather than what one could gain by engaging in a particular course of action. With an eye toward better understanding the reasons for and against disclosure of mental health problems in the workplace, Elaine Brohan and her colleagues conducted a systematic review of the empirical literature on this topic. A number of the costs revealed in this research were focused on the fear of being stigmatized and then being treated unfairly. This fear might be especially relevant in work contexts where disclosure could jeopardize important outcomes such as promotions, assignments to high-profile work, result in other differential

treatment, or generally create glass ceilings that were previously not there. For some, disclosing a mental health problem might be akin to losing professional credibility. These costs might be particularly salient to employees working in domains whose professional cultures promote 'mental toughness,' such as the aforementioned law enforcement example, professional sports, and military branches amongst other work settings. Fears of rejection, ostracism, isolation from peers at work, and being the subject of gossip, are all reasons reported for choosing not to disclose a mental health problem in the workplace.

The above paragraphs focus on disclosure costs related to social stigma. However, when engaging in a cost-benefit 'analysis' preceding a disclosure decision, some costs are not necessarily based on stigma. For example, a common and important fear expressed by many employees with mental health problems is that the legislation aimed at protecting them is simply insufficient to prevent discrimination from occurring. In these cases, disclosure carries more costs and the benefits (such as receiving accommodations) are uncertain at best. Conversely, an employee might not disclose if there are no verifiable benefits to disclosing but the costs of disclosure are either certain or unknown. For example, the focal employee might believe that disclosure is not necessary if he or she can engage in adaptive behaviors (e.g., an employee with social anxiety might prefer communicating via email rather than by phone), or the job has good fit with the symptoms of the condition (e.g., a job that allows for remote work might provide good person-job fit for someone with agoraphobia). For other employees, disclosure may carry relationship costs: the focal employee may believe that others in the workplace would not want to know of a coworker's mental health status, and that disclosure might be akin to burdening and unnecessarily worrying others with personal challenges. This perceived cost is also expressed by people with physical illnesses, which are not as strongly stigmatized. Finally, some people with disabilities choose not to disclose simply because they have a personal preference for keeping their condition a private matter. Indeed, some of our identities are for public consumption, and other identities are not. This reasoning highlights the deeply personal nature of disclosure, and here the costs are likely based on the concern of sharing private information (whatever that information might be) in a professional setting.

In summary, the decision to disclose one's mental health problem to someone within their organization is a fundamentally personal and complex decision. How one incorporates a mental health problem into his or her identity will determine what he or she believes should be revealed. But the perceived and real costs associated with disclosure can also hold an employee back. Despite the predominant focus on the personal costs associated with disclosure, research has also revealed that there are a number of organizational benefits associated with disclosure.

## THE ORGANIZATIONAL BENEFITS OF DISCLOSURE

In the preceding section, we sought to help managers understand why the decision to disclose a mental health problem is both difficult and fundamentally personal. We now turn to a

discussion on the benefits of disclosure *for organizations*. We stress that these benefits can only be reaped when organizations and workgroups instill a workplace climate welcoming and supportive of mental health, a topic we return to in the final section of this paper.

Before getting into detail regarding specific benefits, imagine the following illustrative scenario. An employee's social anxiety is often exacerbated by her morning commute, when the rush hour crowd of public transportation triggers her anxiety. By the time she arrives to work she is nervous, agitated, and unable to concentrate on her work. To cope, she isolates herself in her office. At the end of the day, she recalls the nervousness and panic she experienced in the morning and is reluctant to go home. She instead procrastinates on social media and arrives home late with little time to do the basic evening routines that help sustain relationships and well-being (e.g., spending time with loved ones, exercising). She goes to bed late and wakes up feeling fatigued, which further aggravates her social anxiety. This triggers a panic attack and she calls in sick to work. What sort of costs are her organization, and her personal well-being, paying in this scenario? And what sort of benefits might occur if she were to disclose her condition whilst being met with a supportive response from her manager?

### Disclosure Can Lead to Timely (and Relatively Inexpensive) Accommodations

First, undisclosed mental health problems often represent hidden costs in the workplace. For example, in a 2015 study published in the *Journal of Clinical Psychiatry*, Paul Greenberg and colleagues found that mood and depression disorders alone result in an estimated economic burden of \$210.5 billion per year, just in the United States. A large portion of these costs are attributed to absenteeism – missing days of work – and presentism – being present at work but experiencing reduced productivity. In many situations, knowing just enough details about employees' mental health problems to be able to provide them with a reasonable and satisfactory accommodation can go a long way in reducing these costs. Thus, an important, and very pragmatic, benefit of disclosure is that it gives a manager better information about how to provide instrumental support to the employee such that these types of costs can be avoided.

There are also legal implications associated with both disclosure and subsequent accommodations. In most jurisdictions, employees do not have to disclose intimate details about their conditions, or the nature of the diagnosis to ask for accommodations, but simply that they have a medical condition in need of accommodation. In some jurisdictions, employers might be required to provide accommodations even if there has been little disclosure on the part of the employee, but enough that the employer had reason to believe that the employee had an accommodation need. In situations like these, initiating a supportive discussion where the manager expresses authentic concern about the employee and a desire to help (without exerting any pressure to disclose) is not only important from a legal perspective, but also helps the employee feel more comfortable to disclose, and ultimately receive the help needed. Successful accommodations are often the result of an open dialogue

between employers and employees on the job modifications needed for the employee to be able to effectively perform their jobs.

A concern expressed by some managers related to the duty to accommodate is the mistaken belief that accommodations are expensive. The fact is that most accommodations are inexpensive. The Job Accommodations Network (JAN), a service within the United States' Department of Labor, has been calculating the costs of workplace accommodations for disabilities (including mental health problems) in the United States in an ongoing study since 2004. Based on their results, 59% of companies surveyed indicated that accommodations cost 0\$; the majority of the remaining companies reported one-time costs of less than \$500. Returning to our illustrative example, if the employee felt comfortable telling her supervisor about her social anxiety and the impact it is having on her work behavior, a simple negotiated (and costless) solution could be to allow her to start and end her work day 20 minutes later to avoid the rush hour crowd that triggers much of her anxiety. Other inexpensive accommodations for employees dealing with mental health problems might be brief weekly one-on-one meetings to discuss concerns before a problem escalates, allowing for a compassion animal to accompany an employee to work, additional scheduled breaks, a quiet work space area, or the like. The specific accommodation will depend on the nature of the employee's mental health problem, but for the vast majority of mental health problems, inexpensive and simple accommodations are available.

Importantly, accommodations that are provided early in an employee's tenure are typically less expensive relative to those provided later, once the need for the accommodation has increased. In our illustrative example, if the employee continues to conceal her struggles with social anxiety, it could turn into a more severe mental health problem that requires a formal (and comparatively much more expensive) leave of absence. Many employers focus predominately on the costs of accommodations and forget to incorporate the more severe costs of *not* accommodating a mental health problem, such as the aforementioned absenteeism and presentism, as well as the expenses related to the turnover of talented employees, the selection and training of new employees, and reduced morale and satisfaction. In the aforementioned JAN study, 73% of the companies surveyed reported that accommodations resulted in better employee productivity, 90% reported that the accommodations helped to retain valued employees, 56% reported increased employee attendance, and 38% reported observable saving in workers' compensation and other insurance costs. It is important to remember that to access these benefits, an employee must first disclose enough information about their mental health problem so that a relevant, reasonable, and targeted accommodation can be established.

### Disclosure Can Prevent Unwarranted Attributions of Poor Performance

Another benefit of establishing a work climate that supports disclosure is that acts of disclosure help prevent managers from drawing incorrect assumptions about their employees' behavior, particularly in terms of performance-related beha-

avior. The *fundamental attribution error* in social psychology research denotes the general tendency to perceive others' disruptive or deviant behaviors as a result of their poor intentions or bad character rather than factors that are out of their control. In our illustrative example, when our focal employee isolates herself from colleagues and sits at her desk seemingly not getting her workday started, her manager and colleagues might attribute her behavior to poor character. They might describe her as unfriendly, difficult to work with, inattentive, negligent, and an overall poor job performer; meanwhile her behavior is symptomatic of her mental health problem exacerbated by a situation (her commute) over which she has little control. Such attributions can cause misunderstandings, interpersonal problems, and general conflict in the workplace. In some circumstances a manager might even attribute an employee's behavior to insubordination, which can easily escalate to unwarranted sanctions. Thus, disclosure of one's mental health problem can help prevent one's managers and coworkers from making such erroneous attributions and alleviate some of these related negative interpersonal problems.

### Disclosure Can Benefit the Employee's Job Performance

Research shows that non-disclosure can be psychologically uncomfortable. Especially when employees perceive stigma surrounding their mental health problem, they may experience significant stress and anxiety related to concealing it at work. Not disclosing can be a stressful experience if employees worry that their condition might be discovered by others or if they inadvertently disclose details about their condition (e.g., inadvertently referring to an appointment with a psychiatrist). In cases such as these, employees devote considerable mental capacity to hiding and managing their mental health problem, which can take psychological resources away from job performance. Attempting to hide one's mental health problem can exacerbate the symptoms one experiences. Moreover, the fear of being "found out" as someone with mental health problems might lead employees to avoid coworkers and isolate themselves. In these and similar situations, disclosure may ease this source of stress to the extent that the disclosure act is received positively by others, and reallocate the cognitive resources previously allocated to concealing the mental health problem to other processes, such as work tasks. Thus, the benefits experienced by an employee who decides to disclose his or her mental health problem can spillover to the organization in the form of heightened job performance, creating a win-win scenario.

A related benefit of disclosure is that it helps decrease the effects of self-stigma associated with mental illness on important outcomes beyond work, such as quality of life and general anxiety. Furthermore, there is some evidence that when people are reluctant to disclose their mental health condition, especially if the nondisclosure is related to social or self-stigma, they are also less likely to seek out—and follow through with—treatment. From an organizational perspective, it is in the organization's and its employees' best interest to provide the resources necessary to maximize employees' well-being, so that employees can

seek out, and benefit from, support and treatment. This helps to avoid having to deal with a poorly managed health condition down the road.

### Disclosure Provides Better Information about the Prevalence of Mental Health Problems in an Organization

Finally, disclosure also helps employees and organizations by revealing the prevalence of mental health problems, which are most often invisible. If most employees opt for nondisclosure, it becomes hard to know just how common the experience of mental health problems are in the workplace, thus limiting the degree of attention management could be giving to it. Indeed, while most organizations include demographic characteristics such as age, sex, and sexual orientation in their formal diversity statements, still too many omit disabilities as relevant characteristics for these statements. From an organizational perspective, instilling an organizational climate conducive to disclosure by many employees allows the organization to more thoughtfully include mental health disabilities in their diversity and inclusion policies and practices.

### HOW TO CREATE A WORK CLIMATE THAT ENCOURAGES DISCLOSURE AND MAXIMIZES ITS BENEFITS

The benefits of disclosure can only be reaped if there is a work climate that supports mental health, something that is clearly seen by contrasting the second and third opening vignettes. We are firmly of the opinion that managers are the individuals best positioned within the organization to instill such a climate. Indeed, even if Human Resource Departments develop policies aimed at supporting mental health in the workplace, it is managers who are often responsible for putting the policies into practice. Thus, placing the responsibility for the promotion and maintenance of employees' mental health solely on Human Resource Departments is unlikely to be effective. Furthermore, managers and supervisors work more closely with employees, and are in a more immediate position to be role models and instill workgroup climates.

Below, we offer some considerations to help managers build a work climate supportive of their employees' mental health. By no means do we offer an exhaustive list of suggestions. What we offer is a starting point for managers to consider when reflecting on their work units' climate vis-à-vis mental health. Taking the spirit of these recommendations into consideration will further help managers think of other practices to put in place in their own organizations, given their particular policies and contexts.

In our view, the fundamental objective for any manager wanting to instill a supportive climate within his or her unit is to help reduce the social stigma of mental health problems, and to help support employees, such that they are assured that disclosure can help provide important benefits (such as more specific accommodations), while limiting costs to the employee. Doing so should help employees with mental health problems develop the trust and comfort to disclose their problem and work with their manager to identify the

most appropriate form of support needed. Managers are in an opportune position to achieve this goal, to the extent that they engage in effective leadership behavior. Research shows that managers are more successful in influencing the climate within their unit when they are deemed to have the courage to follow through on moral convictions, show confidence in their staff's ability to accomplish inspiring collective goals, encourage their employees to consider novel ways of accomplishing their work, and invest time and interest in helping each of their employees reach their potential. Such leadership qualities typify what scholars and practitioners have described as "transformational leadership." This form of leadership has been shown to be instrumental in motivating employees to transcend their self-interests and contribute to the realization of common goals. One such common goal can be the mental health of all unit members. In the passages below, we provide a few suggestions on how the principles of transformational leadership can be applied by managers striving to instill a work climate supportive of mental health.

### Championing Mental Health as a Common Goal

Managers must find a way of presenting the mental health of all unit members as an inspiring common goal—and a priority—to achieve. One promising way of doing so is to share emotionally engaging stories of employees living with mental health problems. Some stories could highlight work climates that deterred any inclination to disclose and seek help for a mental health problem, where employees were essentially left alone to deal with their problem and suffered greatly as a result, both in terms of their health and in terms of their work contributions. Such stories could be balanced with others exemplifying climates where disclosure was supported and where reasonable accommodations were made, helping to ensure that the employee with a mental health problem could fulfill his or her work responsibilities. To the extent that they already have a strong record of accomplishments, it could be particularly inspiring for managers to share their own experience with a mental health problem, how they have tried to cope with it, and especially how support provided by others (or their lack of support) had an important impact on their ability to cope with the problem and contribute at work. There is evidence that leaders are more easily idealized when they have the courage to stick to their moral convictions. Doing so shows integrity. In this case, disclosing a personal experience with mental health problems would exemplify courage in adhering to one's conviction that mental health should be discussed and supported. Such disclosure would likely gain the admiration of several employees, particularly those experiencing mental health problems. In turn, the leaders' own disclosure could make it easier for employees to disclose their own condition. Being idealized for one's courage in upholding moral convictions, particularly when those convictions address collective interests, is one of the key elements of being a transformational leader.

We are not suggesting that only managers who have lived with a mental health problem and have had the courage to disclose it to their staff will be idealized. They can also be idealized to the extent that they behave in ways that are consistent with their stated value regarding mental health, especially when it would be easier or self-serving to do

otherwise. Examples include keeping employee mental health disclosures confidential, defending the career-related interests of employees living with a mental health problem, and making operational decisions that clearly take into consideration the mental health of all unit members.

To help inspire unit members with the idea that mental health should be a collective goal, managers could consider offering their staff education or training on mental health problems. Doing so could not only reinforce the importance of supporting the mental health of all staff members, but could also help demystify mental health problems, thus weakening their stigmatization. An example of such training is the "Mental Health First Aid," first developed in Australia and now available worldwide. The aims of this course are to provide training to increase mental health literacy as well as to empower trainees with the skills required to deliver first aid during a mental health crisis. A manager who allows staff members to take such training during regular work hours, and who joins staff in the training sessions, would be showing that he or she is convinced of the issue's importance. Moreover, education, such as that provided in these courses, is an effective way to reduce stigma.

### Involving Staff Members in Generating Creative Solutions

Transformational leaders often encourage their staff to consider new ways of accomplishing the work or of overcoming important challenges. Such intellectual stimulation is typically appreciated by staff members, can help them feel "part" of the solution, and can thus bolster their commitment to realizing the common goal. In order to more easily support mental health within the unit, managers could invite all staff members to a brainstorming session aimed at identifying how the unit could support and accommodate flexible work practices, while also ensuring that the unit can fulfill its work goals. In doing so, managers could include the discussion of mental health needs along with other support needs (e.g., childcare, eldercare). This approach would help find creative solutions for supporting employees without inadvertently singling out individuals with mental health needs. Research suggests that such participative approaches hold promise in helping to ensure that individual members of the unit can satisfy their personal needs without interfering with their work obligations. Some suggestions made during brainstorming could potentially stem from previous training on mental health. Giving employees a voice is one way of ensuring that they consider the procedure with which accommodation decisions are made as fair. The latter is important because managers are not at liberty to disclose information about accommodations made for specific employees, as we explain in greater detail below. Thus, ensuring that employees believe in the fairness of the accommodation process will help prevent any negative feelings and thoughts from developing.

### Taking the Time to Offer Individualized Support

Transformational leaders take the time to discover the unique needs and concerns of each of their staff members in order to help them realize their full potential. An

employee seemingly experiencing a mental health problem is an opportunity for the manager to show such individualized consideration. Inquiring into the well-being of the employee and using active listening could give that employee the comfort to disclose. Upon disclosure, it is paramount that the manager manifest authentic empathy and encouragement by stating an intention to work with the employee in finding the best possible form of support. Following through on that intention is critical, lest the employee's trust in (and idealization of) the manager be lost. Moreover, given the grapevine of informal communication within organizations, it is quite likely that such a breach in trust would be shared within, if not beyond, the manager's unit, thus thwarting his or her effectiveness as a leader.

Working with the employee in devising the most appropriate accommodation, particularly when done informally, can be viewed as an idiosyncratic deal, or *i-deal*, which is a special arrangement between an individual employee and his or her manager that meets both parties' needs. Often, *i-deals* involve the provision of greater flexibility at work, which employees with mental health problems can benefit from, such as flexibility in when the work gets done (scheduling flexibility) and where the work gets done (location flexibility). Although *i-deals* can be beneficial to the focal employee and the manager, trouble may occur if the employee's coworkers perceive the *i-deal* as an indicator of preferential treatment. Perceptions of injustice can be avoided to the extent that coworkers believe that they stand to get such *i-deals* as well. It also stands to reason that *i-deals* will more easily be tolerated when the manager has already championed the collective goal of supporting mental health within the unit and has invited all members to voice ways by which such a goal can be met. *I-deals* may well have been one of the suggestions made. With that said, it is imperative that managers protect the confidentiality of an employee's mental health status, even when other employees seem to question the justification for unique accommodations made.

It is actually illegal in several jurisdictions to breach this confidentiality. When pressed, it is sufficient for a manager to inform coworkers that special arrangements have been made to ensure a particular employee's personal needs are met in a way that does not sacrifice the unit's interests, and that he or she hopes that coworkers can be counted on to be flexible and supportive.

## CONCLUSION

In closing, we hope to have shed light for managers on the personal nature of disclosure, and made salient some benefits related to disclosure. Creating work climates that support the personal and complex decision to disclose can help organizations and its managers by becoming better at developing supportive policies that facilitate the success of people living with mental health problems in the workplace. Often, the policies that are developed to help employees with mental health problem have the added benefit of meeting the personal needs of other employees as well. For example, flexible schedules also benefit parents of young children, employees engaged in elder care, and employees receiving treatments for physical illnesses. By encouraging practices that have such universal benefits, managers can further destigmatize mental health problems. Furthermore, because of their role, managers are in a unique position to develop workgroup climates that are supportive of diversity and inclusion. By responding authentically and supportively to disclosure, managers can increase the emotional connection their employees have with their workgroup, and, by extension, the organization, something known as affective commitment. Finally, creating climates in which disclosure and its benefits are more prevalent helps individuals work to the best of their abilities, which is beneficial for both individuals and organizations.





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in a work setting. Fifty percent of the sample responded in reference to a mental health-related condition. The results describe the common barriers respondents confronted or perceived prior to their disability disclosure, the most common reasons for their disclosure, and the nature of their experiences following their disclosure.

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To learn more about the Job Accommodation Network and the resources provided to employers based in the United States, interested readers can visit <https://askjan.org/>. In particular, the results of the study showing the low costs and significant benefits of accommodation are available as follows: Job Accommodation Network (Original 2005, Updated 2007, Updated 2009, Updated 2010, Updated 2011, Updated 2012, Updated 2013, Updated 2014, Updated 2015, Updated 2016). Workplace accommodations: Low cost, high impact. Retrieved February 14, 2017, from <http://AskJAN.org/media/lowcosthighimpact.html>.

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