



Commission de
la santé mentale
du Canada

Speaking Notes for

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Acknowledgments as appropriate:

I am delighted to be here today.

I'm quite used to speaking to researchers, clinicians and academics.

But it's really wonderful to see that that the conversation around mental health is finally reaching the boardroom table.

I give tremendous credit to Bill, for envisioning this global conversation. I give him even more credit for making it happen.

I come to you from the Mental Health Commission of Canada. We are a non-profit organization charged with transforming the Canadian mental health landscape through partnerships and collaborations.

Today, I am going to speak to you, specifically, about our work with the business community.

Because I think we can all agree that for far too long, employers have been content to safeguard the physical health of their employees – without giving much of a thought to their mental well-being.

But a mentally fit workforce is crucial to the health of today's knowledge-based economy. And I'm not just talking about a Sunday morning Sudoku (or cross-word).

I'm talking about a paradigm shift. And a welcome one.

It's one we're seeing in Canada – certainly.

There is a hunger among the business community – not just in Canada – but globally, to address this pressing social policy issue.

And that is what the MHCC has tried to do with the creation of the *National Standard for Psychological Health and Safety in the Workplace*.

The Standard, as it's commonly known, is the first of its kind...in the world.

It's a voluntary set of guidelines, tools and resources focused on promoting employees' psychological health and preventing psychological harm due to workplace factors.

It can be adopted no matter where you work: in an office, as a first-responder, in a power plant.

We've seen its application across sectors: from telecommunications and finance, to education and police services.

The Standard aims to enhance productivity, boost recruitment and retention, and improve risk management and financial performance.

It is also crucially important to reducing the stigma that so often compounds mental health concerns.

Like many great ideas, the Standard has really taken on a life of its own.

The desire for this knowledge is so strong that I've been honoured to address audiences in Australia, New Zealand and, most recently at the APEC workshop on mental health in Beijing.

In each instance, *the Standard*, and our work to support it, was a hot topic.

Let me tell you, as someone who got her start as a mental health nurse in Newfoundland, I never would have imagined that I'd be asked to speak on this issue – not just in Canada, but around the world.

-Personal Story –

But I believe, with every fiber of my being, there is *no* health without mental health.

So it's validating, both personally and professionally, to be in a room with so many mental health champions.

To tell you the truth, I knew we were onto something when our very first Webinar on the Standard crashed the system.

We had to cap registration at 1,000 participants.

To date, more than 20,000 copies have been downloaded. Of course it's free – so that helps. (Ha.)

But in all seriousness, we are convinced that it works.

However, we know – particularly in dealing with the business community – that we can't just tell you it works.

We need to show you.

So, in an effort to do that we've undertaken a case study – with 43 employers, big and small, across the country.

Some may be familiar names – like Rogers Communications, Enbridge Inc. and Bell Canada. Others are smaller, local companies.

The case study itself is a model of public-private collaboration. The funding comes from government and from committed private sector partners.

The aim of the study is to identify challenges, barriers and best practices, as well as costs and benefits associated with the Standard.

The metrics of the *Case Study Project* are four-fold.

We are looking at the steps employers are taking on the path to implementation.

We are evaluating employee feedback.

We are monitoring the costs associated with implementation – for example, salaries, programs, materials, consultations etc.

And, finally, we are assessing changes observed in performance indicators – like absenteeism, presenteeism, turnover, benefit utilization, disability rates, incident reports and so on.

-Interesting statistics:

Bell mental health key metrics since 2010

92%

Improvement in Employee & Family Assistance Program use

12%

Fewer short-term disability claims related to mental health

Delivering promising results



Essentially, the Standard is central to prevention and early detection – which are key to successful recovery.

But these goals are only possible in an environment where the topic of mental health is open for discussion.

If workers fear that the admission of a mental health challenge may limit their career, they are more likely to stay silent.

This is an outcome we simply cannot afford. If current patterns continue, by 2041 there could be as many as 9 million Canadians living with a mental health problem or illness.

If that were to happen, governments and the private sector could be looking at costs as high as \$2.5 trillion.

And that is in Canada alone.

Given our global financial situation, none of our countries can continue to assume this kind of financial risk.

In a report released this summer, *Making Mental Health Count*, the Organization for Economic Cooperation and Development (OECD) assesses that the direct and indirect costs of mental illness can amount to 4 percent GDP.

The costs associated with lost productivity due to mental health related concerns are very real. They aren't limited to health care, social services and income support.

Workplaces are also feeling the strain.

In 2011, mental illness cost Canadian employers more than \$6 billion.

We're talking about the days when people aren't able to come into work because they are too depressed or anxious, for example — and those days when they do go to work but aren't able to function properly.

And we're talking about the losses that occur when people are absent for long periods of time, or have to leave the workforce altogether.

Mental illness is the number one cause for short- and long-term disability in Canada.

That is why the business community has welcomed the development of the Standard with such enthusiasm.

And while the feedback has been very positive, we have also listened to those organizations that want to move forward with implementation, but can't seem to figure out where to start.

Of course, that isn't too surprising. Undertaking organizational change isn't easy.

In fact, I can attest to this, personally, as the CEO of an organization that is on the road to implementation.

I am tremendously proud that the MHCC...

– a relatively small organization of 80 staff –

...will be standing on the stage, alongside telecom giant Bell Canada, to receive a Gold Certification in the category of “Mental Health at Work” from Excellence Canada.

This award, conferred by a non-profit organization mandated to recognize excellence in Canadian companies and non-profits, is proof positive that we don’t just talk the talk at the MHCC.

We walk the walk.

That said, our journey hasn’t been without bumps. And, like any organization, we’ve had to overcome some challenges.

So, we are partnering with the Canadian Standards Association (CSA) Group, to produce an easy to use, plainly written guidebook.

It is our hope that this resource, titled *Assembling the Pieces*, will give employers some clear direction about how to get started.

The first step on the road to change is always the hardest.

Once again, I want to thank Bill, for inviting us here today.

Any roadmap towards a brighter future for mental health must acknowledge the crucial role the workplace has to play.

And I am delighted that so many of you have taken the time to learn more about what that journey can look like.

Thank you.