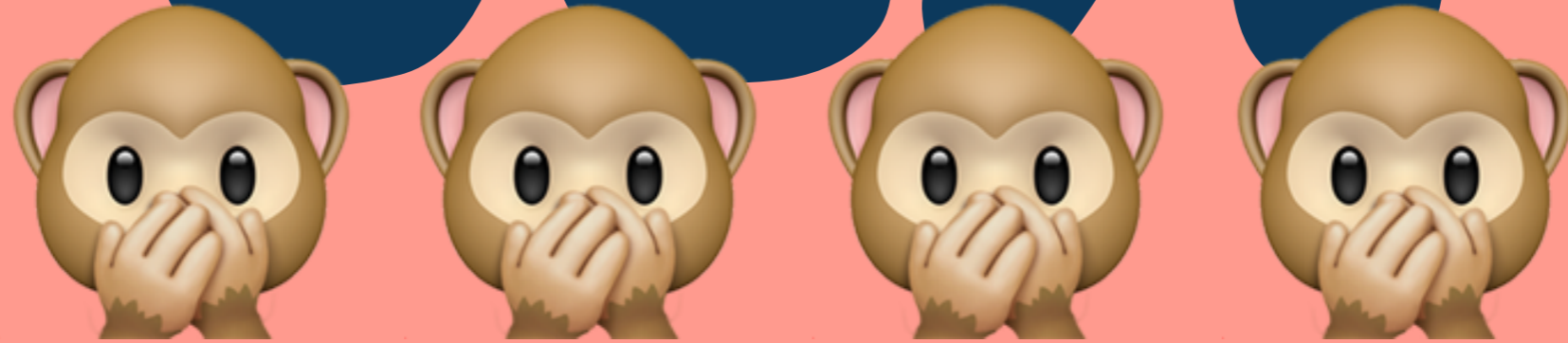


# HOW TO TACKLE MENTAL HEALTH AT WORK

82%



**of employees who had a mental health diagnosis kept their difficulties hidden from workplace management.**



**of those who disclosed a mental health problem at work  
were dismissed, demoted or disciplined in some way.**

1/4



people in the world will be affected by mental or neurological disorders at some point in their lives.



Mental health challenges are real – and they don't discriminate. They occur in every company, in every team and at every level of the organization.

SHIT  
SHOW

MENTAL

HEALTH



# Health-ease / Dis-ease continuum

H  
E  
A  
L  
T  
H



D  
I  
S  
E  
A  
S  
E



Mental health isn't  
black or white  
but a wide range of  
different experiences.



# Bio-psycho-social model

## Biology



Physical factors: genetical predisposition, hormone balance, transgenerational trauma etc.

## Psychology



Psychological factors: personality, attitudes, learned behavioural patterns, coping strategies etc.

## Social



Social factors: political and societal system, work environment, private environment, social support system etc.

**A mix out of all three factors determine our mental health.**



Mental health depends  
on various factors.  
The way we're working  
is one of them.

# STIGMA



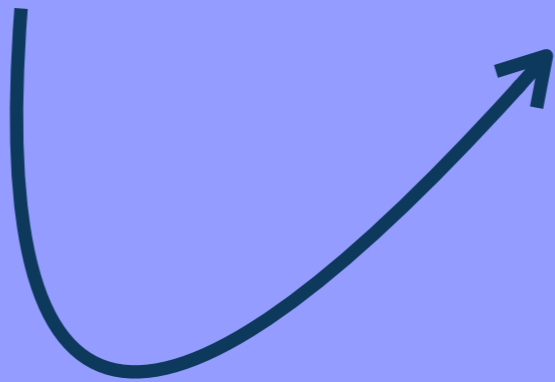
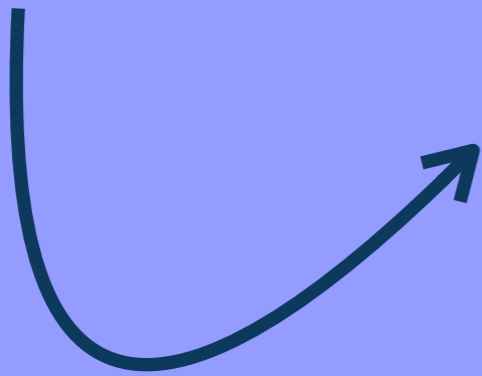
# STIGMA



negative attribute

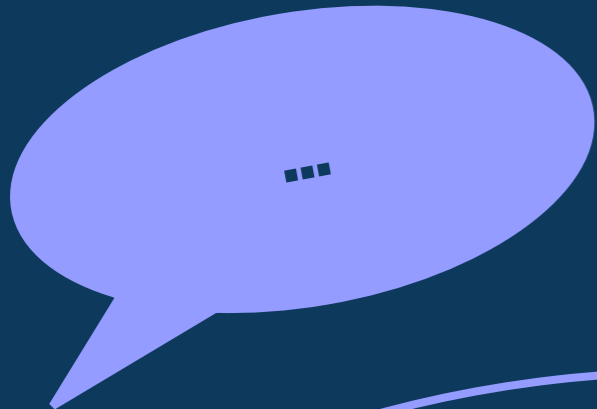
perceived as 'abnormal'

loss of equal rights  
& discrimination





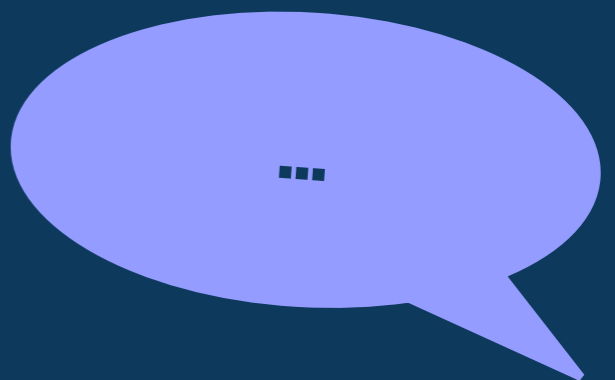
# STIGMA



People with mental health issues are less capable and competent.

If people can't handle the stress at work, they need to get a different job!

Mental health is private and has no place at work.





One in four people in the world will be affected by mental or neurological disorders at some point in their lives. But as common as mental health problems are, it is still difficult to talk about them.

While society is generally promoting the conversation about mental health, studies show that employees don't want to and don't know how to

talk about it at work. And although talking about mental health, of course, should always be a free decision, a more general fear to open up can have a negative impact on people affected and their colleagues.

But luckily, there are ways to fight the stigma. Choose your anti-stigma fighter and let's start the conversation!

# Choose your fighter!



1

**Make it safe to talk about it**



2

**Bust the myths**



3

**Fact-check your work ethic**



4

**Watch your language**



**Make it safe  
to talk about it**



An atmosphere where people feel safe and supported, so they can open up about mental health at work, is something we can all create together. Start, for example...

- ... by reaching out to a colleague who you feel might not be doing so well. You can, for example, start the conversation with: „Hey, lately you seem a bit worried/stressed out to me. Am I right about this? If so, please know that I'm always here to talk.”
- ... by seizing the power of check-ins. Use check-ins to foster real connections with your team, for example by ranking your mood on a daily basis. You can find some possible check-in questions here: [Check-In Generator \(de\)](#), [Check-In Generator \(eng\)](#)
- ... by starting to talk about your own mental health, if you've got the impression that your work environment is already a safe enough space for this. This applies above all to leaders and senior management: You are the role models leading the movement.



# Bust the Myths

Many of us are biased when it comes to mental health. To bust harmful myths, it's best to listen to and learn from people affected. But there are also a lot of helpful resources out there. Check out, for example...

- [Dr. Diane McIntosh](#), *This Is Depression: A Comprehensive, Compassionate Guide for Anyone Who Wants to Understand Depression*, 2019
- [Lori Gottlieb](#), *Maybe You Should Talk to Someone: A Therapist, HER Therapist, and Our Lives Revealed*, 2019
- [Thomas Klein](#), *Zwischen Schein und Sein: Mein Weg aus der Depression*, 2010 \*
- [Matt Haig](#), *Notes On A Nervous Planet*, 2019
- [Mariana Leky](#), *Erste Hilfe*, 2014 \*
- [Esmé Weijun Wang](#), *The Collected Schizophrenias*, 2019 \*
- [Benjamin Maack](#), *Wenn das noch geht, kann es nicht so schlimm sein*, 2020 \*



**Fact-check your  
work ethic**

Normalizing negative stress and overwork often leads to the assumption that people who can't cope are 'weak' or in lack of willpower. To prevent this from happening, it helps to come together as a team and formulate a shared understanding of how you want to work together. This can be in the form of a 'team agreement', where you can make arrangements such as:

- What is our 'core working time'?
- What communication tools do we use for which occasion?
- How often do we take breaks? Might we even make a team commitment to take breaks regularly?
- What is important for each team member to feel comfortable and work productively?
- How do we want to speak to each other?



**Watch your  
language**

Stigmatization often shows up in the way we talk about people and the words we use to describe them. Certain ways of talking about mental illness can alienate members of the community, sensationalize the issue and contribute to stigma and discrimination. Here are some suggestions on what to say – and what to avoid saying.

Do say            A person is 'living with' or 'has a diagnosis of' mental illness

Don't say        'mental patient', 'nutter', 'lunatic', 'psycho', 'schizo', 'deranged', 'mad'

Do say            A person is 'being treated for' or 'someone with' a mental illness

Don't say        'victim' or 'suffering from' a mental illness

Do say            A person has a 'diagnosis of' or 'is being treated for' schizophrenia

Don't say        A person is 'a schizophrenic', 'an anorexic'

Do say            Antidepressants, psychiatrists or psychologists, mental health hospital

Don't say        'happy pills', 'shrinks', 'mental institution'



# Thank you!

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