

A guide to breaking down mental health stigma in the workplace by sharing lived experience stories



THE GLOBAL BUSINESS COLLABORATION
for Better Workplace **Mental Health**



OVERVIEW

Every time a lived experience story is shared, it helps to normalize the mental health conversation and break down the stigma that often acts as a barrier to employees seeking support.

Sharing lived experience from volunteers in your workplace is a powerful way to:

- Reduce stigma around mental health illness
- Impart messages of hope, recovery and resilience
- Increase awareness of mental health issues
- Encourage open and honest conversation
- Promote positive help-seeking behaviour

Whether you're a business leader, HR professional or enthusiastic mental health champion, we hope this resource offers some valuable advice to support you in sharing lived experience in your own workplace.

A special thanks to our Founding Partner BHP and Beyond Blue for their significant contribution to this resource.

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Key messages:

The way we speak about mental health matters. The narrative and very language we use can help to break the stigma.

Story telling tips:

While volunteers must all be free to tell their stories in their own individual way, there are ways of approaching storytelling that respect 'personal perspective'.

1



4 STEPS
to sharing
lived experience
stories effectively

3

Supporting the volunteer:

The psychological safety of the volunteer telling their story must take priority at all times, with appropriate support put into place.

Who to involve in the process:

Make sure a range of colleagues (leadership, HR, communications, line manager) are engaged in the process from the beginning to support the volunteer in telling their story.

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Step 1: Key messages

The way we talk about mental health matters. The very words we use can help to break down stigma by educating workforces on mental health, the impact it can have on a person, and how support can be sought to aid in recovery. Here are some key messages you could include in your own communications.

ABOUT MENTAL HEALTH

- Mental health issues are common and can significantly affect how a person thinks, behaves and interacts with other people.
- Like any other medical condition, you need ways to manage mental illness – these can range from medication and self-help, to talking therapies and CBT.
- Mental health issues are not a sign of weakness, and people should never feel ashamed to seek help.
- With more serious mental health issues, such as Generalised Anxiety Disorder, depression, Obsessive-Compulsive Disorder, Bi-Polar Disorder and Schizophrenia, you can't just 'snap out of it' or 'pull yourself together'. These are illnesses, and they usually require treatment.

SEEKING HELP

- If you think you may have a mental health issue and want to take action, start by talking to someone you trust; keeping it to yourself only makes things worse. By talking about mental illness, we can help to raise awareness and reduce stigma.
- Help is always available, and it's really important to reach out as soon as you feel able.
- There's a whole range of mental health professionals and helplines that can offer advice and support if you're experiencing mental health issues.

RECOVERY

- There is no one proven way that people recover from a period of poor mental health. However, there are a range of effective treatments and health professionals who can help on the road to recovery.
- What works is different for everybody. The important thing is finding the right option for you.
- There are also lots of things that people with mental health issues can do to help themselves recover and stay well.

Step 2: Story telling tips

While volunteers must all be free to tell their stories in their own individual way, there are ways of approaching storytelling that respect the 'personal perspective'.

This tends to mean that the storyteller:

- 1** Will have first-hand experience of mental illness, or be linked in some way with other people who have experienced a mental health condition, or the associated mental health community/movement
- 2** Will not automatically and unquestioningly use the language of psychiatric experts – instead reflecting on whether or not this language makes the best sense of their own experience
- 3** Will avoid making themselves look good by making other people who have experienced mental health conditions look bad (e.g. by pitting one diagnosis against another, or making it seem as if they worked harder than other people to 'recover')
- 4** Will not pretend that there is a magic wand, or simplify a complicated situation to inspire others
- 5** Will not adopt judgmental and divisive language such as 'high functioning'/'low functioning', 'dependent' etc. unless there is a very good reason for doing so



Step 3 : Supporting the storyteller

Offering support to the person volunteering their story is critical. You'll find some top tips for how to do this below.



PRIOR TO SHARING THEIR STORY

- It's important that the volunteer is "in a good place" in terms of managing their mental health condition, with a strong support network in place. This may include family, friends or a healthcare professional.
- Prior to confirming their participation as a volunteer, they should meet with your HR team (or equivalent) to confirm this.
- It's also important to ensure their story is appropriate to share, and aligns with the key messages and storytelling tips set out above.

DURING THE PROCESS OF TELLING THE STORY

- Consider that an emotional reaction could be triggered for the person sharing their story.
- It's recommended that the first time this is done, a supportive internal representative is present (i.e. line manager, HR representative) or external representative (family member, doctor). This individual should be identified in consultation with the storyteller ahead of time.

AFTER SHARING THEIR STORY

- It's possible that co-workers will wish to engage with the volunteer once the story has been shared. It's important that the storyteller considers this, and that adequate support is in place. This should include potential strategies, which are listed on the next slide.
- You should also consider that someone reading the story may be triggered, so always include information on support at the end of the story.

Other considerations

Key elements to consider prior to the volunteer sharing their story

1. Ensure the volunteer is clear on the purpose of the storytelling, and how their story is to be used.
2. Ensure the volunteer has obtained the support of their line manager.
3. Ensure signed consent from the volunteer is obtained.
4. It is recommended that the volunteer discuss the sharing of their story with their family or healthcare professional.
5. Ensure an EAP or alternative support is available to both the volunteer, and any colleagues who may be triggered by the story.



Step 4: Who to involve in the process

In telling their story:

It's important to seek storytellers from different organisational levels, functions, operations, and geographies who are willing to share their personal experience of mental health. This helps to reach and connect with a wider group of colleagues by ensuring there are relatable characteristics or existing relationships between the storyteller and audience.

If the concept of talking openly about mental health is new to an organisation, it can be particularly powerful to begin with a senior volunteer, such as a C-Suite representative, who can share their lived experience story. This can have the effect of 'giving permission' to other employees to speak more openly about their own mental health.

If this isn't possible, try to ensure that the volunteer receives visible support from at least one senior leader during the process of sharing their story.

In communicating the story:

If you have access to communication specialists, involve them in the process early on. They can support in helping to build the communication materials (in line with the guidance set out above), and advise on the best way to disseminate this within the organisation.

For some companies it may work better to share a video, and for others a written story. Above all, it's important that the comfort of the volunteer takes priority (for example, they may not want to be filmed).



Case studies

Founding Partners, BHP and Deloitte, detail their approach to sharing lived experience stories in the following slides.

Each case study includes a 4-step process:



BHP Case Study



BHP is a world-leading resources company, with more than 80,000 employees and contractors, primarily in Australia and the Americas. In a commitment to further improving workplace mental health, BHP became one of the Founding Partners of The Global Business Collaboration for Better Workplace Mental Health. The organisation has seen first-hand how transformative and impactful the sharing of lived experience can be.

FINDING THE STORY

“Scan through internal social networking apps to see if any employees are talking about mental health; ask your team members if they know of anyone who would be willing to share their story. If you don’t find any candidates that way, try publishing an article on your intranet asking for volunteers to share their story.”

Dr Rob McDonald, Vice-President of Health and Hygiene at BHP

Sharing personal stories of mental illness is incredibly powerful, however finding those stories must be done with sensitivity and understanding. In BHP’s case, Chris — the brave employee telling his story — had already spoken openly about his mental health battle through other internal channels, as well as being interviewed by a local newspaper in Australia on the topic of mental health.

BHP was keen to focus on the issue of anxiety during their Mental Health Month, and as Chris had previously spoken about his experience of dealing with anxiety, his story was a perfect fit.

BHP’s specialist communications professional Erin Buckley reached out to Chris with an email explaining what they were aiming for, how the story would be published, and why they’d chosen to invite him to share his story. Erin, together with BHP’s Mental Health Working Group, then decided the best way to communicate Chris’s lived experience with the rest of the organisation; for this, Rob recommends utilising your existing intranet and newsletters.

SUPPORTING YOUR STORYTELLER



“Be very clear about what the intended purpose of the case study will be, along with where and how it will be published. If they haven’t spoken publicly about their mental health before, you may suggest they discuss it with their health professional to ensure it’s the right decision for them.”

Dr Rob McDonald, Vice-President of Health and Hygiene at BHP

As Chris had already spoken publicly about his mental health, BHP felt confident that he knew what he was doing and was mentally prepared to handle it.

However, in another instance Danni, the person sharing her story, had never spoken publicly about her mental illness; BHP therefore encouraged her to speak with her therapist before agreeing to take part, in order to determine whether or not it was in her best interests to participate.

Once Danni had the go-ahead and her article was written, it was also reviewed by BHP’s psychology-trained staff to ensure appropriate language was used, and the right level of detail was included: BHP wanted to strike the right balance, which meant sharing a candid story that people could relate to, without making Danni overly vulnerable by divulging too many intimate details about her history or mental illness.

Danni was emailed with the draft article and invited to make any changes she liked; BHP also recommended she share the article with her therapist and discuss whether she was emotionally ready to take this step, and prepared for the attention it may bring.

COMMUNICATING LIVED EXPERIENCE



“When sharing a story of mental health with the wider company, always include a note or link about your Employee Assistance Program, or any other support services available, at the bottom of the case study or article.”

Dr Rob McDonald, Vice-President of Health and Hygiene at BHP

How you communicate lived experience to the rest of the company depends on what channels you have available, and what your people best respond to. BHP chose to share written articles on their Digital Workspace (BHP’s intranet), and through internal newsletters — but they’re also thinking about adopting a video format in the future to resonate even more with their audience.

BHP wanted to give people the chance to share their story in their own words, so the written articles follow a Q&A format. Each participant is emailed with a set of questions and asked to complete any they feel comfortable answering. Some of the completed answers are then used to write an introduction, while others are kept in the Q&A format.

To enable people to interact with and respond to the story, employees were able to comment on the lived experience articles, and give their feedback and thoughts via a survey link at the bottom of each piece. Readers were invited to rate the article out of five; they were also asked to detail the reasoning behind their score so that BHP could make any necessary improvements for future articles.

MEASURING THE IMPACT



“If it’s possible, enabling comments on articles is highly recommended so you can get direct feedback from your audience. This also allows the participant to receive validation for sharing their story, as they often do it in the hope that it will help others who are going through a similar experience.”

Dr Rob McDonald, Vice-President of Health and Hygiene at BHP

BHP can see how many views and likes an article receives on the Digital Workspace: Chris’ story of lived experience had over 13,000 views (by far the largest amount of views an article on the Digital Workspace has ever had), and almost 100 comments (all positive).

This included comments from people who, for the first time, had seen anxiety explained in a way they could relate to. Others picked up strategies from the story to help themselves and their family members; while another was comforted and encouraged by reading a story from one of their peers.

There were also 56 people who completed the feedback survey, and gave the article an average score of 4.7/5.

“Out of the seven articles we published as part of Mental Health Month, three of them were lived experience stories. We received considerably more views for these articles and a great deal of positive feedback. This reaction really highlighted to us just how much our employees value hearing about people’s lived experience, but also how prevalent mental health conditions such as anxiety are within our society.”

Dr Rob McDonald, Vice-President of Health and Hygiene at BHP

Deloitte Case Study



Deloitte operates in more than 150 countries and territories around the world — its approximately 345,000 people provide services in audit and assurance, consulting, financial advisory, risk advisory, tax and related services.

As part of Deloitte's commitment to investing in employee mental health and wellbeing, Deloitte became one of the Founding Partners of The Global Business Collaboration for Better Workplace Mental Health.

The sharing of lived experience has been a particularly powerful part of Deloitte's own workplace wellbeing journey: this year, the organization launched its first global mental health stories campaign — part of its wider 'Can you see me?' campaign www2.deloitte.com/global/en/pages/about-deloitte/articles/global-mental-health.html/#home-hero — with professionals from the United States, Europe, Asia, South America and Africa taking part and sharing their own lived experience when it comes to mental health.

While this is the first global campaign, some Deloitte geographies — including the UK, US and Australia — have previously successfully shared lived experience through story telling. Over the past 18 months Deloitte has also run a Global Mental Health Podcast series for its people, featuring lived experience stories. Building on this, the global mental health 'Can you see me?' campaign <https://www2.deloitte.com/global/en/pages/about-deloitte/articles/global-mental-health.html> has been developed to enable more stories to be shared, both internally and externally.

FINDING THE STORY



“There are some critical elements that are key to a safe and successful campaign - seeking volunteers through colleagues in the talent teams and mental health advocates, outlining clear campaign objectives and sticking to them, and providing psychological safety throughout the process are all fundamentals. As is enabling the volunteer to know that they have influence over the story development.”

Emma Codd, Global Inclusion Leader at Deloitte

Deloitte’s global mental health stories campaign shares a diverse set of stories across a wide spectrum of mental health — from clinically diagnosed disorders to experiences of burnout and heightened anxiety — told by professionals of various backgrounds, countries, and levels of seniority. While the primary aim was to share stories of those who had encountered mental ill health themselves — Deloitte also wanted to share stories of those who had experienced it with a family member or loved one.

It was important to demonstrate leadership support for the campaign. Clear objectives were outlined and communication materials created to help leaders engage with their local colleagues and encourage participation. Deloitte found that when leaders actively promoted participation in the campaign, more volunteers came forward to participate.

The health and wellbeing of volunteers was a priority. After volunteering, potential participants were confidentially contacted for an initial discussion to enable them to gain an understanding of the campaign; these discussions also outlined support available, alongside seeking to understand how the volunteer was currently feeling in relation to the mental health challenge they had or were experiencing.

Care was taken to avoid adverse impact on a volunteer’s mental health that sharing their experiences may have.

SUPPORTING YOUR STORYTELLER



To help volunteers to authentically describe their experiences and tell their story in an engaging way, an experienced copywriter interviewed volunteers to draft the stories. Recognising that levels of stigma differed by country, volunteers had the choice to use their real name or an alias when publishing their story.

“I see this as a journey. The option to remain anonymous should always be offered to cater for local context and varying levels of societal stigma, as including an anonymous story may encourage more openness from volunteers in the future. You should also make sure that local support is available to the volunteer before initiating the campaign.”

Emma Codd, Global Inclusion Leader at Deloitte

Close contact was maintained with the volunteers throughout the process to support their psychological wellbeing — signposting locally available support if required — and encouraging the use of an Employee Assistance Programme or equivalent support service if they felt impacted during their participation. Volunteers maintained influence over how their story was created and shared, including being able to withdraw from the campaign at any point in the lead up to the launch.

COMMUNICATING LIVED EXPERIENCE



“When deciding how best to share a story internally, engaging local communications teams enables local context to be incorporated into the campaign — allowing stories to be told in a more impactful way. Flexibility in how volunteers want to describe their experiences is also key: people will use the language and terminology they feel is appropriate, and this freedom enables stories to resonate with others more effectively.”

Emma Codd, Global Inclusion Leader at Deloitte

A recent story telling campaign created by Deloitte <https://www2.deloitte.com/global/en/pages/about-deloitte/articles/lgbt-inclusion.html> — focusing on LGBT+ Pride — had used a mixture of animations and written stories to share the experiences of LGBT+ colleagues with great success. The engagement with this simple and humanised approach led to Deloitte taking a similar style with their mental health campaign: embracing a tried and

tested approach of using both written and animated mediums that they believed would engage both colleagues and external audiences while respecting the stories of volunteers.

Sharing lived experience across an organisation as large and geographically diverse as Deloitte can present a challenge, but the key is in wide support and collaboration. Emma stresses that a cross-organisation team (which — for Deloitte — involved both global and local teams covering talent, communications, multimedia, digital marketing, risk and legal) and engaging with local leadership makes it far easier to roll out a campaign or initiative.

MEASURING THE IMPACT



Emma explained that one of their biggest insights from the sharing of lived experience was the level to which endorsement and encouragement from senior leaders increases the volume of volunteers. The importance of demonstrating ‘permission’ to participate — and an everyday culture where people trust their leaders and feel they are being treated with respect at all times — shouldn’t be underestimated.

The experience also showed that people perceive mental health as a broad spectrum, rather than being focused solely on clinically diagnosed disorders; this is enabling Deloitte to have a broad discussion of mental health that resonated far and wide.

Deloitte tracks engagement metrics, total views, feedback and comments to gain a more detailed understanding of the effect that its global mental health stories campaign has throughout the wider business and with external audiences.

With thanks to those companies who participated



THE GLOBAL BUSINESS COLLABORATION
for Better Workplace Mental Health

To find out more visit betterworkplacemh.com

We are the first global business-led initiative of its kind designed to advocate for — and accelerate — positive change for mental health in the workplace.

Please note that this guide should not be used as a substitute for expert/professional advice.