

Co-worker experiences of workplace mental health issues: insights from five case studies

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CONTENTS

Abstract	4
Introduction	5
Previous literature.....	6
Methodology.....	8
Findings.....	8
1. Non-disclosure of a mental health issue in a colleague can be challenging for co-workers.....	9
2. Colleagues with mental health issues can be unpredictable, but co- workers are often reluctant to voice concerns.	10
3. There can be a perceived tension between being sufficiently supportive and being able to achieve business objectives.....	12
Discussion.....	14
Conclusions and implications	16
Limitations and future research directions	17
References.....	18
Appendix 1: Participants	20

ABSTRACT

This short paper uses narrative data from interviews with participants in five organisations to explore the ways in which team members experience the mental health issues of colleagues. Evidence is presented showing that workplace mental health issues can impact on team performance in several ways. Firstly, individuals experiencing mental health issues are not always ready or able to disclose these issues to their colleagues. When accompanied by declining workplace performance, this can impact on team trust and cohesion, and can have serious impacts on team performance. Secondly, co-workers often feel pressure to remain empathetic and tolerant in the face of these issues, which can necessitate emotional labour, and may lead to burnout and exhaustion. Thirdly, feeling unappreciated for ‘picking up the slack’ due to a colleague’s mental health issue can lead to feelings of resentment which may eventually mean that the co-worker declines to provide further help.

Employers should try to avoid extended overreliance on other team members for work activity when an employee’s performance is affected by a mental health issue. Acknowledging, and even rewarding, the input of co-workers in these circumstances may help to avoid adverse team impacts. Employers may need guidance to adopt the right initiatives to ensure that, when an individual discloses a mental health issue, the organisation can provide them and their colleagues with the support they need to effectively navigate the problem in the workplace. They may also need clear advice on how to create and maintain a culture of psychological safety that gives mental health the same standing as physical health, to reduce the stigma associated with mental health issues, to encourage disclosure and to promote peer support for employees experiencing these challenges.

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INTRODUCTION

Mental health issues are on the rise (World Health Organisation, 2023). It is increasingly being recognised that as well as having implications for the individuals experiencing them, mental ill-health can impact considerably on employing organisations. At the organisational level, mental health concerns have been associated with lower workplace productivity (Hennekam et al, 2021; ERC, 2020), but the mechanisms through which workplace mental health impacts on productivity are still poorly understood (de Oliveira et al, 2023). One area that has been under researched is the effect that mental health issues in employees may have on their co-workers and on team working.

Team working has long been associated with organisation-level outcomes, and research has empirically linked teamwork effectiveness and both operational (e.g., productivity) and financial (e.g., profitability) outcomes at the organisational level (Delarue et al, 2008). We know that a team's cognitive, affective, and motivational states evolve over time, and that they are linked to psychological safety (the shared belief that a team is safe for interpersonal risk-taking) and therefore to team performance (Dinh et al, 2020). While a small number of studies investigate the impact of mental health-related interventions on team members (e.g., Blake et al, 2021), wider questions related to the team-level outcomes of team members' mental health issues have so far been largely neglected. Given the recent growth in mental ill-health, and the importance of team functioning for organisational success, this is an important gap in evidence.

Employees with mental health issues commonly report, amongst other things, difficulties getting along with others, social isolation, and exposure to stigma. However, the few studies that have addressed occupational functioning under these circumstances have focused on the individual-level experiences of managers and individuals with mental ill-health, rather than on co-worker, team or organisation-level effects (Peters and Brown, 2009; O'Donnell et al, 2017). Cohesion and team commitment are positively associated with team performance, driven by reciprocal support from team members (Neininger et al, 2010). On this account, cohesive teams may perform better than the sum of the individual performers. However, the opposite may be true when a team member is unable to fully contribute, and cohesion and team commitment are compromised.

In this short paper, we draw on narrative data from interviews with individuals from five firms, all of whom work as part of teams, and who have experience of working alongside colleagues with mental health issues, to explore the ways in which mental health issues in a team member can impact on their immediate colleagues.

PREVIOUS LITERATURE

We can discern two strands of previous research that have addressed broader questions related to workplace mental health at the team level. The first explores the attitudes of co-workers towards colleagues with mental health issues. Studies in this area have found that stigma associated with mental health issues can lead to prejudice and discrimination against individuals with mental health problems from their co-workers. Co-workers can view colleagues experiencing mental health issues as more dangerous, less competent, and more unpredictable than those with other (i.e., physical) health problems (Stone and Colella, 1996; Corrigan et al, 2005). They may also resent workplace adjustments being made for these individuals (Russinova et al, 2011) or perceive such adjustments to be unfair or to impact negatively on their own workload (Peters and Brown, 2009). Even co-workers who are notionally in favour of work opportunities for those with mental health issues express reluctance to work alongside them (Shahwan et al, 2022).

The second strand of prior research considers working relationships between those experiencing mental health issues and their colleagues. Research here identifies the tensions that can arise but also, conversely, the potential ameliorating effects of co-worker support. Workplace tensions are more common for those with invisible disabilities (such as mental health issues) than for those with visible health problems (Teindl et al, 2018). This can discourage people from disclosing their mental health condition, because they fear being ostracised (Dewa, 2014) and this is particularly evident in those who have previously experienced discrimination. Where allowances or adjustments are not made for mental health issues, those experiencing them can struggle to pace their work with that of others, and to interact with them (Danielsson et al, 2017), yet when allowances are made this can provoke biased treatment from co-workers (Quinane et al, 2021). Nevertheless, support from co-workers can encourage disclosure, reduce stigma, and improve job effectiveness (Follmer et al, 2020).

While most research in this area has explored the experiences and attitudes of those experiencing mental health issues, and some work has highlighted the ways in which those with these issues are stigmatised by others, little consideration has been given to the

experiences of co-workers and fellow team members. Consequently, little is known about what this means for overall team functioning or performance. However, while the effects of mental health issues on team working are under-researched, prior studies focused on dysfunctional behaviour in teams do offer some insight into the ways in which an individual-level factor in a team member can be experienced by their co-workers. Dysfunctional behaviour refers to conduct that is intended to impair team functioning. Clearly, an individual experiencing a mental health issue is not the same as one that deliberately engages in destructive behaviour. But the responses of their co-workers can give us some insight into the experience of working alongside a teammate who may not be behaving as expected, or whose behaviour may have changed because of their mental health issue.

The dysfunctional behaviour of a team member can negatively impact the team's affective tone, provoking collectively felt negative emotions which can in turn have a detrimental effect on performance outcomes (Cole et al, 2008). Nonverbal negative expressivity, i.e., displaying negative emotions related to others' behaviour, such as facial expressions and postural cues, can exacerbate this effect. In some teams, behavioural norms discourage such negative expressivity through 'display rules' (Hochschild, 1979), unspoken but pervasive rules that strongly encourage the concealing of specific emotional displays. Where negative expressivity is discouraged, the impact of low affective tone on performance outcomes is reduced. Perhaps unsurprisingly, however, the suppression of emotional displays can itself have unintended consequences. It can, for example, lead to silent anger, which is associated with feelings of demoralisation, resentment and frustration which can impact negatively on performance and team cohesion. It can also lead to muted anger when individuals share their feelings with selected others. While this can be cathartic for the individual themselves, it can provoke transference of the anger to others which can be detrimental to team cohesion and performance (Geddes & Callister, 2007).

Co-worker actions in the face of perceived dysfunctional behaviour from a colleague can take the form of motivational interventions designed to tackle the behaviour, if they believe that change can be effected. This usually implies direct confrontation with the individual. If they do not feel this is possible, co-workers may reject the colleague in question, curtailing interactions, or redesigning work to reduce dependence on the input of the colleague in question to minimise negative team-level outcomes. Where motivational interventions and rejection are not possible, or fail to address the issue, co-workers can also respond to dysfunctional behaviour with defensive responses, particularly when they feel unempowered and unable to influence the situation. These responses can themselves be detrimental to team outcomes and may include external behaviours like emotional

outbursts and revenge-taking, and internal behaviours through which individuals attempt to distract themselves from the problem by focusing on other things. Defensive responses have been found to have powerful negative consequences for team cohesion and performance (Felps et al, 2007).

METHODOLOGY

The Enterprise Research Centre (ERC) has been researching workplace mental health since early 2020, when a baseline survey of 1900 UK firms first provided a novel firm-level data set focused on employer experiences of, and attitudes toward, mental health issues (ERC, 2020). This survey has been repeated each year subsequently and alongside it, a series of depth interviews have been conducted, to explore in more depth the quantitative findings. This paper draws on interviews with participants from five firms in which interviews were conducted as part of the broader project. All interview participants worked as part of a team and had experienced fellow team members' mental health issues in the workplace. All participants received information about the research in advance, relating to the focus of the study, the benefits and risks of participating, their ability to withdraw their consent at any time and the use of their data. All consented to take part in the study. Participants and firms are detailed in Appendix 1. The interviews were carried out by telephone or via Microsoft Teams by the same researcher. They typically lasted around forty-five minutes and were recorded and fully transcribed. Analysis was undertaken using the NVivo 12 data analysis software package. In the summary of themes below, and in the vignettes based on individual interviewees, participants and their firms have been anonymised.

FINDINGS

Three themes were identified from the participant accounts related to working in a team alongside someone who is experiencing mental health issues. Firstly, participants told us that team members experiencing these issues were often reluctant to disclose their struggles to colleagues. Often, colleagues had already noticed the behaviour changes that can accompany declining mental health. But they felt unable to broach the subject in the absence of disclosure from the colleague in question, which provoked anxiety and frustration. Secondly, participants pointed to the fluctuating attendance and performance levels of co-workers experiencing mental health issues, which often required them to work harder to compensate, but they were also at pains to tell us that they declined to complain about this. This seemed to be linked to an unwillingness to appear unsympathetic or potentially to exacerbate the issue. Thirdly, it was evident that participants perceived a

tension between being supportive towards those with mental health issues and being able to maintain required performance levels for the business. Here, they spoke of the difficulty of ascertaining whether claimed mental health issues are genuine, and of the additional pressures that supporting colleagues with mental health issues presented for co-workers.

1. Non-disclosure of a mental health issue in a colleague can be challenging for co-workers.

Because mental health issues are concealable in a way that many physical health issues are not, people experiencing mental health problems do not always disclose them to colleagues. This may be due to the stigma that persists related to mental health issues, or because they fear ostracism and discrimination. It may also be that they do not believe that they have a problem. However, when working together regularly as part of a team, co-workers are often the first to pick up on the signs that someone is struggling:

But they have to make their own decision about when is the right time for them [to disclose the issue]. You can signpost, you can advise, erm. With a broken leg you've got no other option, you've got to go to hospital. (EM09)

Well, erm, we pick up on little comments things like that [...] It's hard to know sometimes because people with mental health issues obviously don't always come forward that they've got a problem...(WM11)

she was hiding it and actually she was getting worse and it was actually she needed to be out of work [...] we could see probably a year before she was struggling, but it took her a year to actually, by admitting to herself, [...] you can see, you try, and until they actually go, "Right, I'm ready for help." there's not massive amounts you can do (WM03)

Believing that a colleague may be suffering with an undisclosed mental health issue can provoke uncertainty in co-workers, who feel they should be alert to these issues but worry about how to approach them sensitively. Participants spoke of feeling 'awkward', of 'acting differently' and of 'treading on eggshells' around colleagues experiencing these problems.

And it was all a little bit awkward cos we were like, "Well, where do we step, where's the line drawn?" And I said, "Well, you know, I'm not gonna go blundering in there." Erm, but actually she was making a lot of mistakes in the warehouse, and we were just like... you know? (WM08)

But, I mean it all just depends on how open that person is as well. I mean, some people just don't want to talk... And then obviously doing our best to, like, make sure we notice and don't, don't ignore it. [...] ... so it's just trying to notice those key points...[...] And, erm, I think you do act differently around them (WM11)

...from a team perspective, ...it was like, treading on eggshells for a time, it was, you didn't want to say the wrong thing, let's say for example you wrote an email, ... you'd have to think about could she misconstrue it, is she going to be okay when she receive this [...] actually it was like, walking on eggshells at times and that put a real pressure on the team (WM03)

Nevertheless, co-workers can feel helpless and frustrated if a colleague appears to be experiencing mental health issues but, for whatever reason, does not acknowledge it.

... they wouldn't take time off, they wouldn't... They wouldn't seek help, we kept sign posting and then you're waiting for it to all fall apart and it absolutely does. (EM09)

How can I put this? It's, it's a kind of a pain in the neck if someone's not feeling very well because they're not going to be doing their job. (WM08)

... the [workplace mental health] training kind of...it kind of makes yourself aware of how you might be feeling. [...] but you know it doesn't really touch on how to deal with a member of staff who's feeling that way. It just kind of pretty much says that if you're feeling that way ask for help. Which obviously kind of... then that's kind of where it stops so it's a bit like, erm, people don't always want to ask for help. I know if I'm feeling really low the last thing I want to do is to talk about it cos it will just make you feel worse. (WM11)

it's hard when you can see someone who is clearly starting to struggle, that they bury themselves in their work because they think that's what's helping them. (WM03)

2. Colleagues with mental health issues can be unpredictable, but co-workers are often reluctant to voice concerns.

Sometimes, mental health issues can be long-running, and can lead to unpredictable behaviour such as unexpected and unexplained absence, disengagement, and errors, which impact on day to day working for everyone in the team.

Yeah, we usually find, erm, either they don't turn up for work at all, erm, which we're experiencing recently. [...] Yeah, sometimes they can just seem disinterested, like, they're bored or you know, they just don't want to do it, don't want to be here. (WM11)

this person's been off for seven, eight weeks now, erm... [colleagues] have been in contact with, with him, erm, some he's responded to, some they haven't (EM09)

what would happen is, they'd get a, they'd get the call that [a shipment has] been delivered to the, you know, the, erm, the other [customer] site ... sent to the wrong place ... And you'd have to arrange for it to be re-couriered back to the right place, or she'd send stuff out without all the accessories in ... she was, she was making... She was actually making more work (WM08)

Consequently, co-workers can come to regard individuals with mental health issues as problematic and unreliable. This is characterised as having negative consequences for the wider team, since 'you've got to be able to rely on' others, because 'you're only as good as the person at the bottom of the chain'. Ultimately, these individuals can be seen to be 'letting the team down'.

I think you've kind of got to be committed to the role, you know, you can't... You've got to be able to rely on them, that they will come in when they say they're going to come in, cos we are such a small team. (WM08)

Erm, I think, I think cos we're in quite a high-pressured environment it does, I mean it does add more pressure on especially if, erm, they've not turned up for work, things like that, (WM11)

... feels like when you're moving house, that you can only... You're only as good as the person at the bottom of the chain... (EM09)

[...] I think it was beginning to wear a bit thin ... because if you like, the individual had a reputation now of needing time, and not performing as people would like. So, I think it wore thin. [...] 'I'm losing Fred again, or Fred's not turned in or Fred's not done what I asked them', and they got a bit het up [...]. (EM41)

[colleagues felt] 'he's not doing what he's supposed to be doing, he's letting the team down, we need him gone'. (WM03)

However, co-workers are often at pains to point out that they are reluctant to complain. It is possible that this is because they don't want to be seen to be responsible for exacerbating the issue, or because they fear they may appear insensitive.

... but it's kind of quickly forgotten, if you know what I mean? It's not brought up or raised within the team [...] we are aware there's an issue so obviously we're not, we're not pushing anything negatively, like, like, erm, HR-wise, if you know what I mean? [...] you need to be a bit more alert of these little things ... But I don't think it's...it's not a negative reaction (WM11)

We were supportive, gave her a little bit of slack, you know, nobody was, sort of, going, "Why's this been sent out?" Not that we would anyway, but, [...], I wouldn't want to, want to make her think she's in more trouble, or that we're, we're taking notes and analysing it. (WM08)

[a colleague who is absent due to mental health issues] hasn't been forgotten and I think that's the really important bit. People sent him Christmas cards, people sent him gifts [...] And in term of the work that's picked up, yeah, other people... Everyone just mucks in, we always kind of muck in to, to get it done. (EM09)

3. There can be a perceived tension between being sufficiently supportive and being able to achieve business objectives.

As noted above, mental health issues in a team member can be associated with underperformance, which impacts on co-workers and on service levels. While we have seen that some co-workers endeavour to be sympathetic and supportive, others can regard colleagues with a mental health issue with suspicion. Their subjective assessment of the veracity of the condition may influence the way in which they respond to the co-worker.

if I came with my arm in a sling and said I can't do any sort of manual work they would be quite sympathetic. If I came in a said, "Oh, my head's all over the place, I can't do any manual work," they might be like, "Erm, but I'm sure you can," (WM08)

So I think it very much depends on the person and what the issue is. You know, you can see when someone is, erm, upset or, or has problems, and then someone who's just lost the enthusiasm for the role and can't be bothered. And I think.....that's a different thing altogether... Because, like you say, it does impact on the rest of the team. They won't tolerate some, you know... (WM08)

... some do not get it and some don't care. That's being brutally honest. Yeah, there is some people who I know think it's a load of rubbish. Mental health. That's rubbish. They are the 'get a grip' people. (EM41)

it can be a negative and a positive, so for positive, the employees can say, "You know what, that's really good, ... I don't have to come to work full time, that's really good, that's really helping me." but also other employees can see it as well and they think, "You know what, that's really good." but then you've got the flipside of that of people going, "Actually, I'm having to cover you while you're gone." or it's- "and actually we're not being as productive if you were here full time". (WM03)

For co-workers and team leaders alike, there is a need to balance being sufficiently supportive with getting the job done. Managing workplace mental health issues in the workplace can add pressure to an already pressured work situation, with multiple expectations from a range of stakeholders. For co-workers and managers, prioritising and addressing mental health issues in team members requires time and confidence.

so it's about supporting the individual and doing what we can to support the team and individual and just thinking creatively about what we can do to provide that support. Can we delay work, can we bring additional support in? And sometimes temps do help, but sometimes temps also can provide additional challenges [...] [there is] this double-edged sword where they want to be supportive, but they want the work doing (WM08)

some site managers are under a lot of pressure themselves and they lose a [colleague] who they've got bespoke jobs to do during the course of the week. It's a, gradually the pressure is on for them ... there's a lot of pressure. [...] They've got grouchy old contracts managers, there's directors having to go, there's clients having a go. And... they gotta deal with Fred who's, just not feeling up to it today (EM41)

we try and encourage the positives more than the negatives, but sometimes the negatives are actually true you know, if you're not here 100% of the time, then the productivity will go down by 50% if you're only here 50%, and actually that has a knock-on effect on the revenue for example, it shouldn't but it does (WM03)

DISCUSSION

Our data highlights challenges related to the disclosure of mental health issues within teams. It identifies the emotional responses co-workers may experience in the face of a colleague with mental health issues, including frustration, anxiety, and helplessness. It reveals the tensions that co-workers and team leaders alike may perceive as they struggle to be sympathetic while dealing with the team-level impacts of unexpected or protracted absence or erratic performance in a member.

Mental health issues can be concealable in a way that many physical health issues are not. Prior research has established that mental ill-health can also attract stigma in the workplace. It is understandable, therefore, that individuals may elect not to disclose their mental health issues to colleagues, for fear of repercussions. Our data suggests, however, that team members working alongside people who are struggling with their mental health are often aware of the problem, even if their co-worker does not disclose it. However, they are also often unsure about what to do, and may worry about whether, or how, to raise the issue directly with the individual. If this situation persists, co-workers can become frustrated with a colleague's lack of disclosure or their perceived reluctance to seek help. Perhaps unsurprisingly, we also see evidence in our participant accounts of a decreasing willingness to trust a team member who is not performing as required – as WM08 puts it, *'you've got to be able to rely on them'*. When co-workers can no longer rely on a colleague, trust may break down. The relationship between intrateam trust and team performance is well known, and intrateam trust has been found to have a direct and critical effect on team working and outputs (de Jong et al, 2016). Our findings suggest that a co-worker's declining performance due to a mental health issue, or their reluctance to seek help for the issue, may impact on intrateam trust, which may, in turn have negative consequences for team performance.

That co-workers express feelings of frustration also resonates with prior research examining the effects of dysfunctional behaviour in a team context, which identifies defensive emotional responses. As noted above, the literature focuses on intentional behavioural changes rather than those brought about by a mental health issue. Nevertheless, our data shows that co-workers may respond in a similar way to behavioural issues related to mental health challenges, possibly because they feel unempowered to deal with the situation. As prior studies have found, these responses can have a negative impact on team working and team performance (Felps et al, 2007).

As well as feelings of frustration when a colleague declines to disclose or seek help for a mental health issue, co-workers' accounts evidence feelings of being unprepared and unequipped to deal with these issues. This is manifested in feelings of apprehension, as they worry about whether their colleague will turn up to work and if they do, whether they will be able to perform. We also observe expressions of anxiety about what, if anything, they should say to their colleague, and whether they may exacerbate the issue by discussing it. Yet participants sometimes also drew attention to their own disinclination to complain. This seems partly linked to worries about exacerbating the issue, as discussed above. But it may also be seen as a response to dominant discourses which have proliferated in recent years, and certainly since the COVID-19 pandemic, related to openness about, and acceptance of, mental health issues. As WM03 puts it, *'there's so much in the press now about mental health [...] I think the whole of the world is getting to the point that in fact, it is okay to talk, I think that perception of trying to hide [mental health issues] and [they are] a bad thing is going'*. It is possible that participants feel now, more than ever, that it is important to be seen as tolerant and empathetic in the face of these issues. Prior ERC research has highlighted the 'emotional labour' that line managers can undertake as they endeavour to present themselves as competent yet caring when dealing with workplace mental health issues, in the face of the expectations that they perceive from others (Wishart, 2022). Our findings suggest that this is not restricted to managers and that members of the wider team working alongside someone experiencing mental health issues may also feel the need to present themselves in a certain way, in line with expectations they perceive from others.

Tensions are apparent also, as participants tacitly acknowledge that sympathy can wear thin, particularly when they themselves are required to work harder or longer to compensate for a co-worker's reduced performance due to their mental health issues. A recent study suggests that lack of effort, reciprocation and gratitude from a recipient of help in a work situation can provoke resentment in the helper and can make the helper fearful that their own performance will be negatively affected. This can lead to *helping discontinuation*, where the helper stops providing assistance (Chou et al, 2021). This perhaps offers some insight into another way in which team working may be affected by the mental health issues of a team member: resentment could lead to a decrease in overall team performance as co-workers eventually decline to 'pick up the slack' if they feel that their additional efforts are not noticed or appreciated.

CONCLUSIONS AND IMPLICATIONS

Our findings suggest that workplace mental health issues may impact on team performance in several ways. Firstly, an individual's failure to disclose an issue to co-workers (who may have potentially already noticed it), and in cases where there is declining workplace performance, can provoke anxiety and tensions which impact on team trust and cohesion. Secondly, although they may feel aggrieved about a colleague's erratic performance due to mental health issues, co-workers often feel pressure to remain empathetic and tolerant, which can necessitate emotional labour, and which may lead to burnout and exhaustion. Thirdly, feeling unappreciated for picking up the slack due to a colleague's mental health issue and resultant lowered performance can drive feelings of resentment which may eventually mean that the co-worker declines to provide further help, or may adopt other defensive responses. This may have serious implications for team performance.

These findings suggest that employers need to encourage disclosure of mental health issues, and where possible to provide support to those experiencing the issues. They also need to be cognisant of the effects these issues can have on co-workers. Avoiding extended overreliance on others to pick up the slack would seem to be an obvious response, but at a minimum, acknowledging and possibly rewarding the input of co-workers in these circumstances would be a positive step, and one which may help to avoid resentment and the associated teamworking effects.

More broadly, while it is very encouraging that dominant discourses seem to be inspiring more openness about, and tolerance of, mental health issues, it is important that workplace policies and systems reflect this. Employers may need guidance to adopt the right initiatives to ensure that, when an individual discloses an issue, the organisation can provide them and their colleagues with the support they need to navigate the problem. Signposting employees to external resources for advice on how to approach colleagues experiencing mental health issues may also be appropriate. Providing training for line managers in dealing with mental ill-health, and arising workplace issues, is also an obvious step to take. This in turn ought to help ensure that team functioning can be maintained in the event of a mental health issue in a member.

In addition to professional input, prior research points to the potential ameliorating effects of co-worker support for people experiencing mental health issues in the workplace. This can diminish fear of disclosure of mental health issues, reduce stigma and improve job performance. Encouraging employers to create an open, inclusive culture in which all

employees feel valued is a good first step in creating the conditions necessary for a mutually supportive environment. As noted by the CIPD (2023), this means ensuring a culture of psychological safety, where good working conditions and open conversations are prioritised, and mental health and physical health are given equal standing.

LIMITATIONS AND FUTURE RESEARCH DIRECTIONS

This report is based on narrative data from participants in five business organisations which offers rich insights, but which is not intended to be statistically significant. Additional narrative studies could establish whether these findings can be extended to other kinds of organisations.

As noted above, the effects of mental health issues on team working are not well understood, but this study suggests a material impact. A more in-depth study of the specific implications of these effects for team-level productivity warrants further exploration. Finally, this report addresses the experiences of co-workers working alongside a colleague with mental health issues. Future research could fruitfully explore the experiences of those experiencing mental health issues in the context of their immediate work team, to offer insight into their perspective on disclosing their mental health issue, and their experiences of relationships with fellow team members while managing mental ill-health.

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APPENDIX 1: PARTICIPANTS

CODE	JOB	SECTOR	COMPANY SIZE
WM03	HR Adviser	Logistics	Large
WM08	Marketing Manager	Manufacturing	Small
WM11	Administrator	Veterinary Practice	Small
EM41	Health & Safety Manager	Construction	Medium
EM09	Head of HR	Charitable trust	Medium



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