

Steps to Change Podcast: Rachael Episode

Allen: Hello and welcome to this episode of Steps to Change, the podcast where we explore learning and development topics, organisational behaviour change, and practical ways to inspire people to act differently through the lens of our Steps to Change model: See It, Own It, Change It, and Live It.

On this episode, we're exploring the subject of raising awareness of mental health and the impact it can have on individuals and workplace culture. We'll start by exploring an overview of why raising mental health awareness in the workplace is important, and then dive deeper into how we use our steps to change methodology and partnership with clients to design and deliver work in the subject matter. I'm your host, Allen Liedkie, and I'm joined on this episode by Rachael Smith.

Allen: Welcome, Rachael. How are you?

Rachael: Thank you, Allen. Very well, very excited to be here.

Allen: I'm excited to have you as well, Rachael. So for the listeners out there who may not know you, tell us a little bit about what you do at Steps and your experience in the subject matter.

Rachael: Of course. So, I am one of the Project and Design Managers at Steps and I'm also one of the Mental Health First Aiders as well to having done my training with Mental Health First Aid England. And my experience in this topic is that I've been very much, as soon as we started to explore doing programs around this, it absolutely sparked my interest and I really wanted to be a part of that journey that we were going to do and go on with clients to make sure that we were really producing the best programmes that we possibly could for them. So I wanted to get involved in the design, the research, and absolutely be a part of it.

Allen: And that's exactly why I was really pleased when you were available to join us on this episode, because you have been instrumental in helping us kind of create our experience and grow our understanding in this subject matter, but also just being a really good resource internally at Steps, with being that Mental Health First Aider. So, thank you very much, Rachael.

So, Rachael, before we get into the conversation, I just want to caveat a couple of things about how we approach this work. The first thing is to say that we are not psychologists at Steps; we are very much looking at this through a behavioural lens, which is our area of expertise. But everything that we design with mental health awareness raising programs is backed by psychological research and it is informed by that knowledge that we can bring into the sessions. But just don't want to give any false pretence that we are psychologists walking into this space. So, with that in mind, Rachael, why would clients be coming to us to ask us about what we're doing in this space and to partner with them to create content on raising awareness of mental health in the workplace?

Rachael: Well, I think there's been quite a big shift recently, and certainly, I was reflecting on this and thinking that the pandemic really, I think, raised the awareness of businesses and organisations that your employee wellness is huge and is really, really important. And I think the pandemic really did bring that into focus for everybody, and the conversation started a little bit more.

But looking at statistics that are available, approximately one in four people will experience a mental health problem each year, mental ill-health is responsible for huge losses for businesses around 34.9 billion pounds every year. And I think these are old statistics as well. So, this may have changed a little bit since then. So there's a business case and there's absolutely an employee wellness case for those organisations who want to make sure that they're looking after their employees holistically, which I think there is a shift towards that.

And also, I think there's a shift generationally now. I think people coming into the workforce, there is more of a focus on that for them, that they want to know that they're going to be well looked after. So I think organisations really now are having that conversation because they realize just how important this is. I mean, it always has been important, but I think there's been a shift in the comfort levels of being able to talk about this, being able to raise this in your organisation and whoever are the decision makers, also recognizing that, yeah, this is important. And it's not going to go away. It's here to stay and it's having an impact. But you can do things about this. You can do something. And I think it's really that action moving forward.

Allen: Yeah. And those statistics are pretty stark, right? We can see right there the financial impact it can have on businesses in terms of time off for their employees too as well, like if someone is dealing with some maybe more mild challenges with mental health, if maybe their outputs not as productive or have you... so there's different layers of texture as to why that's affecting the businesses. And I know those stats are from Mind in the UK, but I know that there's similar stats across the world and probably every region that we work in.

And I think that convergence of the younger generation, I guess, thinking that this is, we must be talking about this because they're much more open to it with the kind of exacerbated by the pandemic, as you say, is bringing to light that it's so important to have these conversations. Because the thing that we know about mental health is that if you keep quiet about it, it just gets worse and worse and worse, right? So actually, having the conversation is so powerful to just help people to address those concerns, get the help that they need and start that process of change if somebody's being affected by it.

Rachael: Yeah, absolutely. I mean the expression of problem shared is a problem halved really is there for a reason. And yeah, it's so important to have that conversation and to have that awareness as well. And that's also part of the programme and we're sort of moving forward now. But hugely being able to spot the signs, being able to see those and it is of its behavioural changes that will give you a clue that somebody may not coping as well, or that maybe something has changed, or they are experiencing a challenge and it is those signs that if you can pick up on them and that you can address it early, hopefully, that will, as you say, it won't then build and build and build and turn into something maybe more serious that will be harder to deal with.

Allen: Absolutely. And I think one of the things that's interesting when we're talking about this subject with clients is that when we start off in the consultative approach with them, they have a lot of hesitance in this; like, there's a lot of fear of even just beginning to have these conversations in the workplace because they don't know what's going to surface, how people will react to it or all this kind of milieu of things that might come out of surfacing these things. It can be a little bit, scary for clients sometimes. But I think really seeing the end result, the benefit of people engaging in this is absolutely should be mission critical for all businesses.

Rachael: We can't ignore the fact that there is still some stigma attached to this. This is still a relatively new conversation. You know, even some of the language that we have around this isn't yet necessarily yet a shared language because it is still a newish conversation that we're having, go back 30, 40 years.

Certainly, when I was at school, nobody was talking about mental health; that wasn't something that was ever discussed. Whereas now it's part of the vernacular in child's education. Yeah, I think it's really important to say, and it can feel risky, but it's not going to go away. And by ignoring it and not addressing it, that's certainly not going to change. Yeah. And it is important. It's really important.

Allen: So, Rachael, at Steps, we use drama in everything that we do. That's one of our hallmarks, right. It's the crucial part of See It. Why is the drama so impactful and useful for the learners when we're talking about raising awareness of mental health?

Rachael: It's so useful because you see those behaviours that people will exhibit and as it's played out, but you are seeing it in a safe environment to a certain extent and you can see the conversation that may happen and where the pitfalls may be. But again, it's in a safe environment where you're talking about something that is very sensitive and that could be very triggering for somebody. But you know, you can't make mistakes here with each other. And I think that's so important because that's where the confidence is going to be built, because that opportunity to practice having seen the drama, being able to interact with those characters who you know are characters and they're people but they're characters and you are in that safe space again, means that when you leave one of our sessions, you are much more likely to try because you've had the opportunity to practice with less risk involved.

Allen: Absolutely, right. So, we've had conversations with clients, we start to explain the business case for them where we recognize that this is, as you say, it's not going away. So now let's take that overview and start to drill down a little bit deeper into the Steps to Change methodology and look at it through that lens.

So, the first phase that we always start with is 'See It'. But before we even get into the room, of course, we'll have done our research, talking to people within the organisation, just being curious about how this shows up for them, what are some of the signs that manifest when people are dealing with mental health issues or what's the impact on the culture, work, etc. So really just looking at that kind of 360 view of it.

So, we've done all that and we've designed the program and partnership with our clients to make sure that's really resonating for them and hitting all the learning objectives. Just unpack for us, Rachael, what starts to happen in the 'See It' phase within the program when we're in the room or in a virtual session or if somebody's using filmed content or e-learning, what's happening?

Rachael: Sure. I think it's important to say, because you said at the beginning of the conversation that we at Steps are not psychologists, but we do make sure that we partner with a mental health expert on this. Yes, we bring the behavioural aspect of this, and we certainly focus on that, but we do also ensure that we have got that expert knowledge to ensure that everything that we are having the conversation about that we're pointing towards is all the correct stuff that you do. Because this topic that is slightly unusual because there are so much do's and don'ts in this, there are some things that you do avoid to do and that you don't do, which I think is different for some of the Steps programmes.

I mean, as you go into the room, the main thing is stop saying, what is mental health? Because we talk about it, but what does it really mean? What do we actually mean when we say that? And when we're talking about it's our emotional, psychological, and social wellness, and it's how we view the world and how we think, behave and feel. And then it's also our ability to cope with certain situations. Because no matter what happens in life, you're always going to have stressful situations. Sometimes stress is good, but it's how we respond to those situations. And that can indicate whether we've got a level of good mental health or poor mental health, depending on how we react.

And also, focusing on the fact that everybody is very, very different and you are going to be different at different parts of your life as well; you're never just going to be on one flat level, it's going to change and shift. So, I think it's really important to look at that.

For this particular programme, the 'See It' is so huge because there is so much to see. So, one of the things that we start with is spotting the signs. So, what are the signs that people will start exhibiting if their mental health is moving into that not so good, if you are starting to suffer with poor mental health? And there's three main categories that we see because we focus very much around stress and anxiety. That's the area that we focus on because that can be a precursor to other more serious mental health conditions. And stress in the workplace is very, very common. That is something that comes out of our research a lot, that is what people are dealing with.

So, we talk about what are those psychological signs that people might exhibit, the behavioural signs and the physical signs. And it's really important in the scenarios that we do that we show that these don't suddenly they'll present themselves beautifully one day in a meeting where you can go, aha, this seems to be happening. They'll happen over a period of time, and maybe that's one week someone will exhibit these signs and then next week they'll seem absolutely fine again. But it's picking up on that. It's being invested in that person as well to keep noticing to be able to see when these changes are happening; and particularly as a manager or as a colleague to be able to then offer that support. So, once you've seen these signs, what are you going to do? And then we talk about having the conversation as well and seeing how that conversation can play out.

And one of the biggest things that we encounter when we look at this, and I'm kind of moving into the next stage to a certain extent, but is why is it that we don't want to have that conversation? Why

is it people suddenly avoid that? Why is it that if people are recognizing those signs, they go, oh, but it's probably just this, or they're probably just having a bad day and we'll dismiss it, rather than really wanting to face it full on.

What's also quite important in this 'See It' stage as well is because normally we talk about seeing these signs in other people, but it's also important to be able to see if you can spot these signs in yourself. And there are some signs which are easier to see in yourself than others as well. But it's also an opportunity to reflect at this point in the programme, you know, gosh, is any of this happening for me? It did happen to me in that programme you were talking about earlier on when they were listing some of the things and I thought, oh gosh, I think I might do that. And it really made me stop and reflect and take stock of my own wellness and approach to things as well, because I thought, well, hang on a second, I need to recognize that. Before I start trying to help anybody else, I need to make sure that I'm all right as well.

Allen: I think also what's really kind of critical about the 'See It' that plays out in the drama is a couple points. One, we see missed moments of opportunities where someone could have said something but they don't, because I'm sure I have been that person in my life at some point where I was like, oh, I'm too busy, I'm too tired, whatever it may be. Actually, I don't wanna get involved in that, that's somebody else's problem. But actually, we all need to be good citizens in this space and be able to try and show up however we feel the most comfortable. But doing nothing is not necessarily good enough.

But then also, what happens when somebody comes back to work after suffering from some mental health challenges, showing that process and the dynamics that show up in that space? Because there's a lot of stigma or bias towards that or what have you. So, lots of things that we can uncover in the 'See It'.

Rachael: Yeah. And a huge amount of it comes down to fear and not wanting to do the wrong thing, or not wanting to say the wrong thing, on all of these occasions, generally, you don't encounter people who don't want to help. People do want to help and do care, but they just don't know quite how to go about it. And again, because it is a new kind of conversation there is, and people are concerned about what if, you know you say, how are you? And people disclose something that's quite serious. What do you then do with it? It's all of those kinds of things.

And if you're not a psychologist, if you're not trained in that, you might feel should I really be having this conversation because I'm not going to know what to do? Whereas a huge amount of the 'See It', where we are coming from is when you are having that conversation, a lot of it is listening, really is to listen and to have that conversation. But again, as you say, doing nothing is just not an option.

Allen: So, we've played some scenarios out, we've seen how stress or anxiety or what have you can start to kind of influence people's behaviours or mindsets or engagement in the workplace or even at home or when someone returns to work, and you've started to transition really nicely there into the 'Own It' phase, right, when we talk about that fear mindset or it's not my problem mindset.

So, after the participants have seen it, they've had those aha moments and they're connecting the dots to stress driven behaviours, what's happening in 'Own It'? What's really taking place for the participants and why is that an important part of the journey?

Rachael: I think part of it is seeing that when you watch the journey, because we do show when people are getting to a point where actually they might be quite distressed, so part of the Own It is that you don't want somebody to get to that point. So, you do want to do something, and you do want to be able to step in and help.

It is again that kind of recognising I think very much what is stopping me having this conversation? Because again, for the most part, people do want to help. But what is it that gets in the way? Is it that fear of saying the wrong thing? Is it not wanting to pry? You know, even saying to somebody when you're at work, how are you? That could be kind of 'is work the place to do that'? Should I be asking people about their home life? There's all of those kinds of things that come in.

And yeah, just really that sort of how far should I go, is it my place, is this my job, is this not a job for HR or any of those kind of things, I think people would experience and consider at this point, I think. But I think anybody who works in a team and has colleagues and can see that this is real and it does exist, and I'd imagine a lot of the time, when people see these scenarios, they will be thinking of somebody and think, oh gosh, I have seen that happen. I might not have known the reason for it, and I might not have known why it was happening, but I have seen that.

And to really own the fact that again taking action is important at this point and that you don't have to be trained in this, but you do, there are certain things you can put in your toolkit now that you can have and you can use for that conversation so that you can go into it confidently and that you can do something and prepare yourself for those kind of conversations as well. So, I think that's very much part of the 'Own It', that shift in knowing that it isn't this great mystical thing, this mental health conversation. It's very practical. It's humans connecting, I suppose, to a certain extent is what I would say.

Allen: I also think that in 'Own It', there is sometimes a realization for participants that they go, oh my gosh, I maybe I'm actually suffering from some mental health challenges and they had never really been able to see that before or identify it, because either they didn't think that that was on the spectrum of mental health challenges: they maybe put it in one bucket rather than seeing the full spectrum. So that can be a really empowering thing for individuals to go out and seek help and sort of address those challenges.

And then we've also got, we sort of talked about this at the opener, that there are some, probably more of a generational thing, this is a broad brushstroke here, but more of a generational thing where maybe people of my generation and older, we just go, well, don't talk about your problems because you don't want anybody to know you have one, because you don't want to give people any concern that you can't show up to work or do your job or perform, right? So that then just feeds a sense of pushing it down, putting it to one side and not addressing it.

So really kind of owning up to the fact you might have a bias towards these conversations. But I just wanna be really clear, it's not necessarily about saying after a session, you need to be able to run out there and have conversations like this, right. Everybody's on a developmental journey and having that awareness and owning where you're at on that journey is part of this learning process. So, we would never advocate that somebody goes so far out of your comfort zone that maybe you do more harm than good, right, those sort of dos and don'ts, you talked about in the 'See It', what's helpful and what's not helpful, but take the responsibility to grow and play your part however you can and recognize that for some people, this is a very important conversation and you can play your role to support it.

Rachael: Oh yeah, absolutely. And I think part of the 'Own It', as well is very much going to be based on people's previous experiences. If you've worked somewhere and you've seen somebody, not be treated very well over a mental health condition, again, yeah, you're not going to speak up about it. And also recognizing in this section as well that there's a level of trust in this, and you have to find the right people to be able to trust and have that conversation and set that tone, set that culture, which when organisations come to us, that is really what they are either starting to do or are on the journey of doing.

And then this is another aspect of it that it's important and it's okay to talk about it as well. And I think that's a huge shift socially and in the workplace as well, that we can now say it.

Allen: So, we've helped the participants at 'See It' through the use of drama and painted that picture of how those behaviours might show up in mindsets and influence, ways that people show up in the world. We then have also talked about the 'Own It', where's the responsibility for the participant to own where they're at on this journey of having the conversation and their understanding of mental health challenges and awareness and how to spot the signs.

So now let's move into 'Change It' as part of the next step of the Steps To Change methodology. So, what's happening in 'Change It' to really support the learner's journey?

Rachael : So looking at the kind of the way that it's split out, the spotting the signs, so having the confidence to realize that those signs over a period of time may work towards something, but also having the knowledge that they will happen over a period of time, that they won't all come at the same time, I suppose engaging in that kind of behaviour that they take and taking note of it, that's really important.

But then moving into having the conversation that there are quite a lot of practical things you can do, it's the setup of the conversation. If you have noticed things, maybe making a note of them, do have like a list of things to hurl at them, but to say this has been concerning me. I've noticed this, this is what's concerned me. And also to know that what your organisation has to offer and where the support is, I think that's really, really important as well.

And practicing it, practicing things like, for example, we talk about open questions a lot and say, oh, use open questions. Great. Actually, what does that look like when you're in a room with somebody, where you've got a concern for them or whatever, and you're not quite sure what they're going to say? Having those kinds of things in your toolkit, just having little questions that you know are going to help, being comfortable with that silence, giving the other person that space to speak, that is huge and not feeling like you need to fill it all the time. That's another really practical tool.

There's certain things that we say don't say. For example, if somebody's told you something's happened, again, it comes from a really good place. But a common thing that we often say is, oh, well, at least this hasn't happened or it's not as bad as this, at least this hasn't occurred. And it's not a very helpful thing to say because you immediately diminished what that person is experiencing. And it's not for you to say, well, at least it's not as bad as that. It might be as bad as that for them; so putting your own sort of lens on it as well.

And again, another thing that comes from a really good place is offering advice or saying when I was stressed, I tried yoga or I tried meditation or tried... That's great because that worked for you. But that doesn't work for everybody and it's really important for the person to themselves to find what is going to work for them. So again, giving them that space, showing that you are listening without judgment, really giving them that engagement that they are being heard, but that they can work through this themselves because it's much better if it comes from them. And you may not come up with a solution. It may not all happen in one conversation either. This may be a series of conversations that you have to have and also that you can go into this conversation. And they may not want to speak to you to begin with. People don't just suddenly open up. This could again be, we talk about in mental health, it being a marathon, not a sprint.

Again, it's over a period of time. It's building that trust, it's building that relationship, engaging in that, and showing that you do care and that you are there for that person. And then when they're ready, they'll open up. But if they're not ready, then it won't happen. So, it's all of those skills in this 'Change It' part, taking those back into the workplace with you and really just having that awareness I think all the time.

Allen: Okay. So, we've provided an opportunity for the participants to explore the 'Change It', that's either through skills practice through providing toolkits for how to have the conversation, all the good things that we've just explored, and then we move into the 'Live It' phase. And that's a really important part of the session, but more importantly, how they take the learning outside of the session and put it into practice. So, what are we doing to help individuals and organisations 'Live It'?

Rachael: So, I'd say there's a couple of things. There's some practical things that we're kind of saying to them to go away and use in terms of the 'Live It'. But I think the big thing is get talking about this. So, it doesn't always have to be a one-to-one mental health conversation but start having this, start talking about mental health and any challenges. And really when you say to somebody, how are you, really meaning how are you and how's everything going and how are you getting on?

And that can be in your one-to-ones, that can be in team conversations in quick standbys when you just sit down with somebody at lunch, making that this is part of the conversation and that it's that, this is how we're going to start doing things around here.

But also talking and being quite open that maybe, often we work with them, people who are Line Managers, and there is now an expectation on Line Managers to not just look about what people are doing work-wise, but it is their whole wellbeing as well; they're responsible for that now as well, which is going to be for the good of their team.

So, maybe them opening up and them giving the opportunity to say, actually I'd like this to be something that we all focus now on a team and to get out that discomfort quite early on because people are going to react to that in it very different ways. Some people are going to be absolutely, I definitely want to do that. Maybe some people might be a bit more suspicious of why are we suddenly talking about this when we've never talked about it before, and it makes me feel really uncomfortable. So, recognizing that that's where they are sitting as well.

And for those who think actually this could really do me some good by having this conversation and letting my colleagues know how I am. So when I talked about some of the practical things, we talk about there's the stress bucket that we talk about, which is a bucket that you can draw and you can write down all the things that are worrying you and put them in that bucket, and you then write down the things that have a tap opener so that you can release that stress, what are the good coping mechanisms or the good practices that you have, what are the things that are in your control, what are the things that are not in your control?

So just even, getting again, if you haven't are not having a conversation with somebody, getting that out of your head and getting it down so that it feels more manageable in a way, but Mind also have a wellness action plan, which you can create again, which is sort of looking at what are the things that are the triggers for you, and what are those behaviours that you've already recognized in yourself that might show that your stress is building? And often it's other people who are going to recognize it before you recognize it in yourself, because that's quite hard. Because like you say, we'll explain things away. We may not even realize that we've shifted that much, but other people are more likely to notice.

So that's at the point. If you've had that conversation, if you know that those might be some of the signs, that's when people can step in and offer that support. Because one of the really difficult things is as well, when someone comes up to you and goes, oh, you look really stressed, or you seem really stressed, what's going? And you're like, how dare you, no I'm not! Again, that identifying, it can make you quite defensive because often we think we're hiding stuff really well and that we're covering, but often we're not. But it may be that you are not ready to have that conversation. So, if you've said, here are my signs that may mean that I need support, then they're there, then people can step in and help you.

Really, one of the most important things within that 'Live It' part as well is that we keep this conversation going that you know it's regular, that it's part of the way that we do things around here, and that it isn't just saved up for one week in May when it's Mental Health Awareness Week.

This needs to be happening all the time throughout the year. This is important. Don't just focus on things that are really important in that week as well. But keep this as part of the conversation.

Allen: You know what really jumps out at me there, Rachael, is this notion of like how do we create that agreed social contract within our businesses that we're all going to the extent that we feel comfortable to do so and able to do so depending on our cups, how full they are or how empty they are, if organisations can agree that we're having these conversations as business as usual, then that can really go in a long way actually to cutting off a mental health challenge from growing into something much bigger.

And if I'm somebody who in agreement with you, you're my sort of mental health buddy, if you will, and I know that's some things that organisations have done to really kind of help break the stigma, make it everyday conversations, as you say. If I know that Rachael and you and I have a contract where you can say, Allen, you're snapping again, maybe you just need to call it a day or go home or take a break or go for a quick walk, if you're able to or just sit down and breathe for a few minutes, or all those different exercises that you can do to kind of try and release that stress valve that you talked about, because your bucket's full. Some of it can be meditation. Some of it can be walking. Some of it could be talking it out. Some of it could be doing some exercise if you're able-bodied or whatever, you're kind of.

Rachael: It's got to be the thing that's right for you. And if we've had that conversation, I would go, ooh, you know, the thing that you find most helpful? Why don't you go and maybe try that now?

Allen: That's it. Yeah.

Rachael: As long as it is a helpful coping mechanism as well, that's important.

Allen: And I think, as we sort of round off the conversation with the 'Live It', it's a marathon, it's not a sprint, as you said. This is ongoing. It's something that is never going to go away. So, the more you can kind of engage in these conversations as business as usual, the more you're going to be prepared and people will recognize that there's a culture where this is not looked down upon. This is not viewed as a negative. This is viewed as just a human experience that we all have because we're humans, together and life can be stressful and difficult and hard, and that's going to show up for us in different ways.

But you have created a culture with your organisation where people can go get that support and go get that help without the kind of fear of repercussion or whatever they think could be a negative impact on that. And as we sort of touched upon at the top of this conversation, have real life impacts on people and be something that can really change direction of travel for someone in a really crucial way.

Well, Rachael, that is about all the time that we have left on this episode. So, thank you so much for joining us. It's been really engaging and thought-provoking. I've really appreciated your insights that you've brought to this episode.

And thank you listeners for joining us. If you'd like to know more about Steps and Steps to Change, make sure to visit our website, find us on LinkedIn, sign up to our newsletter. All of those links will be in the show notes.

If you're interested in how Steps could partner with your organisation to support your needs, you can send us an email or fill out the form online at www.stepsdrama.com. Is there a subject area that you'd like to hear us explore? If so, reach out to us via email or reach out to us on our socials.

As always, thank you to our production team. We couldn't do this without you. I'm your host, Allen Liedkie, and we look forward to you tuning into the next episode, where we'll be discussing Performance Management. Until next time, thank you. And remember, you too can See It, Own It, Change It, and Live It.