Developing inclusive and healthy organizations by employing designated lived-experience roles: Learning from human resource management innovations in the mental health sector

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Can Lived Experience roles benefit colleagues and organisations in addition to service users?

Take Home Messages

• Employees' mental health issues present challenges for organizations.

• Despite several human resource management interventions (e.g., EAP

programs, mental health training), people with mental health challenges are still heavily stigmatised.

- Introducing lived experience roles into organisations could help bring about a cultural shift and benefit the entire workforce.

- The study found that commitment from organisations' top leaders led to clearer understandings of Lived Experience and this then led to positive individual and organizational outcomes for all employees.

- Role clarity was particularly important in organisations that had low social integration between Lived Experience and non- Lived Experience roles, demonstrating the importance of leadership and effective role design when introducing new Lived Experience roles, especially when the social context is less supportive.

Why is this research important?

- Managers and employees with negative attitudes towards colleagues with mental health challenges prevents organisations from being inclusive and psychologically safe workplaces.
- This is the first study to examine how Lived Experience roles can act as an innovative human resource management practice that changes attitudes towards mental health challenges.
- Employment of Lived Experience roles may help change the view that

mental health challenges are a form of disability, and instead see them as a strength that can have a positive impact on work.
- Employing Lived Experience roles in organisations could reduce stigma, benefiting all employees and their organisations as a whole.

Method

A survey was conducted across the mental health sector in Queensland and had 327 responses from diverse perspectives, including 116 in Lived Experience roles and 211 in non-Lived Experience roles (e.g., psychiatrists, psychologists, mental health nurses, social workers, among others).

Results

Leader commitment to Lived Experience roles allows the entire workforce to develop better and clearer understand about these roles.

Better understanding about Lived Experience roles resulted in employees feeling as if they could be their true selves at work and led to a perceived improvement in service delivery.

Clear understandings about Lived Experience roles was particularly important in organisations where there was poor social integration between Lived Experience and non-Lived Experience roles.

Discussion

Stigma and discrimination towards mental health challenges stops people from seeking help. This can lead to self-concealment and can worsen the situation.

Organisations need to create a culture where employees can be their true selves and feel safe to disclose their challenges to gain social support and achieve positive wellbeing.

Lived Experience employees can act as meaningful role models by being transparent about their mental health challenges and modelling recovery.

Having Lived Experience employees embedded in the organisations would help the rest of the workforce to feel safe about disclosing their mental health challenges and seeking help.

Therefore, the employment of Lived Experience employees can contribute directly to the wellbeing of those employees who have mental health challenges.

Even for employees who have not had mental health challenges and/or hold negative views about individuals with such challenges, having Lived Experience employees in organizations may help change their attitudes towards mental health though social interaction.

Conclusion

Meaningful employment of Lived Experience employees can contribute to a cultural shift in organisations and offer a more effective solution to mental health issues than is currently being implemented.

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