PART III

WORLD ECONOMIC FORUM
Model for Corporate Citizenship

Goals and Principles for Mental Health in the Global Economy

Highlights

Corporate Citizenship Model for Mental Health

Part III strengthens the argument for investments in mental health on grounds advanced by the World Economic Forum statement on corporate responsibility and global health which drew the support of CEOs the world over.

The World Economic Forum created a corporate social responsibility framework which CEOs, boards of directors and executive management teams can use to develop a strategy for managing their impact on society.

CEOs and corporations supporting this framework included McDonald’s Corporation, Merck and Co., the Coca Cola Company, UBS, RIO Tinto and many others.

The World Economic Forum, through its advisers, is currently examining the concept of a “psychologically healthy” organization and the Roundtable has been consulted on this.

Meanwhile, the President and CEO of Hewlett-Packard (Canada) Co., Paul Tsaparis, links corporate social responsibility (CSR) to “solid financial performance.”

Mr. Tsaparis says CSR delivers competitive advantage and quotes in surveys which say that 79% of global chief executives agree that social responsibility is vital to profitability. In fact, he says, goodwill accounts for 71% of total market value.

The Hewlett-Packard CEO says these facts are driving socially-responsible investments and ethical indices such as the Dow Jones Sustainability Group index.

“Given the new level of convergence of personal, business and societal values, there is clearly a new imperative to act,” Mr. Tsaparis said, quoting the founder of his company, David Packard: “HP exists to improve the welfare of humanity.”

The World Economic Forum Framework for Action spells out these steps for developing a social responsibility program. It applies to breaking new ground elsewhere – including mental health and productivity:

Based on the Forum’s model, the Roundtable proposes the following “steps to corporate citizenship, mental health and productivity in the global economy.”
Step One:
Provide leadership, set strategic direction, articulate purpose, promote the business case internally, and use this Business and Economic Plan as a tool.

Step Two:
Define what it means to your company, define the issues, agree on how your company can make a difference to your employees and the wider community, and use this Business and Economic Plan as a source.

Step Three:
Establish policies and procedures, engage in dialogue internally, let your customers and suppliers know about your commitment in this area, use this Business and Economic Plan as a source.

Step Four:
Be transparent, build confidence in your commitment to corporate citizenship and mental health by talking about the subject, encourage your employees to talk about it, engage your unions and other stakeholders, use this Plan as a source.

Step Five:
Agree what and how to measure, develop a reporting system for tracking progress, be realistic, and use this Plan as a source.

Please note:

- Each of these five steps can be fleshed-out as action plans drawing on the substantive content of this Plan and the recommendations (especially) in Part IV.

- Further, the Roundtable will pursue the idea of bringing the World Economic Forum to Canada in 2007 to explore mental health and productivity as a 21st century economic construct.

- There is plenty of international research and data from sources such as the World Bank, World Health Organization, International Labor Organization, Harvard Medical School and others to suggest this has considerable merit.

Concrete Business Objectives
The Corporate Citizenship model spells out the leadership role of CEOs in advancing quality of life on earth and draws links to eight concrete business objectives also identified in the Roundtable’s CEO Survey on Mental Health:

1. Reputation management
2. Risk management
3. Access to human capital (recruitment, retention of talent)
4. Access to financial capital (investor relations)
5. Learning and innovation (market realities)
6. Competitiveness
7. Operational efficiencies
8. Licence to operate

**Principles of Action**

Using the World Economic Forum model, the Roundtable has isolated five principles to guide advancement of mental health and productivity as a new 21st century economic construct. These are:

*The principle of leadership*
- CEO engagement.

*The principle of enlightened self-interest*
- CEOs linking mental health and productivity to legitimate corporate and economic interests and opportunities.

*The principle of transparency*
- CEOs fostering open discourse on mental health and productivity issues.

*The principle of action*
- CEOs sponsoring policies and practices to reduce the risks of unproductive and unhealthy workplaces.

*The principle of research and inquiry*
- CEOs supporting mental health in the workplace research initiatives and under the leadership of the Canadian Health Research Institute – with the Roundtable’s support – Canada has already broken ground on this.

These principles are discussed in detail in the Plan.

**Business Education and Mental Health – (Aspen Teaching Innovation Program)**

Through the leadership of Roundtable Vice-Chair, Maria Gonzalez, the Roundtable participated in a special education initiative in 2005 which sets the stage for a “new generation” approach to mental health and productivity.

A member of the Aspen Institute’s “Teaching Innovation Program,” the McGill University Faculty of Management introduced an MBA program called “Mental Health and Productivity: Sustainable Performance in a Brain-Based Economy.”

Compulsory for its first year MBA students, the session drew a full house of 2nd and 3rd year MBA and PhD students and put mental health into McGill’s business curriculum.
Meanwhile, the Aspen Institute received a presentation on the Roundtable’s mission and new possibilities emerged: building mental health into an international discourse on the economy, education and social progress.

The topic deserves a place on that agenda on its merits, and that it is now receiving the attention of leaders in these fields generates new momentum for mental health in the workplace.

The NQI healthy workplace movement combined with Aspen’s Teaching Innovation Program creates a strong platform upon which to put mental health and productivity securely into these agendas for the future.

The Roundtable draws upon the World Economic Forum’s ground-breaking statement of corporate citizenship endorsed by top CEOs in 2002.

In an economy of mental performance, human capital is not a narrow economic construct; it is a form of capital that companies need in order to drive innovation into every sector of the economy.

The World Economic Forum’s Global Corporate Citizenship Statement serves as a useful framework for corporate unity and action to promote mental health and productivity.

In preparation for the World Economic Forum’s 2003 annual meeting, CEOs were polled worldwide on the role of corporate citizenship in world affairs and these themes emerged:

- The powerful role played by CEOs as a champion of corporate values and builder of consensus is more central and critical than ever.
- The strong link between corporate citizenship and corporate governance and the importance of monitoring the company’s wider social, economic and environmental performance.
- Collaboration among CEOs and companies on such matters.

**Mental Health Goals**

The Roundtable’s Charter for Mental Health in the Global Economy was signed by several business leaders in 2003. Its goals inform this Business and Economic Plan.

1. Prevent the disabling effects of depression, anxiety and substance abuse in the labour force through improved early and effective treatment of these disorders and an integrated model of disability and performance management.

2. Reduce production losses associated with employee absence and on-the-job downtime due to unchecked or advanced mental disorders especially among employees with longer terms of continuous service.
3. Promote greater awareness and vigilance among managers, employees and health professionals of the heightened risks of disability and death among employees with chronic disorders including heart disease.

4. Support efforts to create a national strategy for suicide prevention by the Canadian Association for Suicide Prevention.

**Research: Mental Health in the Workplace**

Michael Schwartz, Senior Vice-President, Group Benefits
Great-West Life Assurance Company, articulates a model for the management of mental health in the workplace

**POLICY FOCUS**
Management accountability

**LEADERSHIP**
CEO, senior management

**EDUCATION / TRAINING**
Managers/employees

**POLICY SPONSORSHIP**
Management/union

The Roundtable supports the Canadian Institutes of Health Research long-term research agenda for mental health in the workplace.

To anchor the Principle of Research and Inquiry, we present here employer priorities for this unprecedented national initiative.

- Demonstrate how absenteeism and productivity losses due to diagnosable mental illnesses and sub-threshold conditions such as burn-out can be continuously reduced through workplace and clinical measures.

- Identify those common elements in workplaces that contribute to chronic job stress as a health risk.

- Document those changes in management practices most likely to reduce harmful stress in the workplace.

- Produce a cost/benefit analysis of positive “wellness” changes in the workplace that will promote employee mental health in the normal course of operations.
• Identify disability management procedures that are customized around mental illnesses.

• Document how employees lose work time due to the progression of untreated mental illnesses and identify workplace interventions that will help arrest and halt this progression.

• In particular, develop an early intervention standard and methodology for use by non-medical personnel or lay managers in the workplace as a step toward early detection and referral.

• Design an integrated prevention, detection, diagnostic, treatment, recovery and return to work system suitable for the management of mental health in the workplace. (*In this context, employers and insurers need a frank appraisal of what it will require to improve access to qualified care.*)

• Develop recovery and return to work timelines to guide treating physicians and disability case managers in the management of employee disability.

• Identify how to avoid relapse once an employee has successfully returned to work from disability leave – assuming appropriate job accommodations are in place.

• Develop a workable hypothesis to demonstrate how employer investments in group drug plans may reduce short-term disability due to depression.

CIHR Priorities Include:

• Focus on the prevention and treatment of mental illnesses, promotion of mental health, evaluation of clinical best practices, disability management, research relating to specific population segments, strategies to address stigma and –

• Development/evaluation of measurement tools for each of the areas noted above both at the level of organizations and society.

• Identify the impact of government and corporate policies on short and long-term disability rates and outcomes.

• Identify the effects of organizational practices on mental health and related workplace risks and positive/protective workplace factors.

• Clarification of medical illness (“diagnostic entities”), sub-threshold conditions (stress and burn-out) and physical/mental co-morbidities including bio-psychosocial risk and protective factors.
Postscript: Medical Mental Health Care for Canadians

The question of “what works, what doesn’t work and do we know the difference” in terms of the diagnosis and treatment of mental illness represents a perplexing ambiguity for employers.

The scientific and medical professionals need to help employers and insurers understand what constitutes the “diagnosis” of mental illness and how subjective self-reporting of patients is balanced with objective criteria guiding diagnosis, treatment and recovery determinations including return to work clearance.

Employers are concerned that positive strides in the workplace will not have the desired effect if access to qualified primary medical care and specialist care – that is, psychiatrists – is provably limited.