



LEADING

A leader's guide to mental health
conversations at work

WELLBEING

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INTRODUCTION

You are exhausted from the continuous juggle of day-to-day business priorities, delivering on urgent work deadlines and supporting an under-resourced team that is cracking under the unrelenting pressure.

You take on more of the team's workload in an attempt to shield your people from some of the more unrealistic work demands and relieve some of their stress burden. But no matter how hard you work at it, you don't feel as though you ever get on top of things. You feel caught in a no-win downward spiral that you don't know how to break.

This book is for leaders who want to do their best but worry about how to better manage the demands of the business with the health and wellbeing of their team. You are not alone – and this book is here to help.

This book is for leaders who are willing to be courageous and embrace the conversational skills needed to better support the mental health and wellbeing of their people at work.

LEADERSHIP MATTERS

As leaders, healthy change starts with us. And it is not just what we say but also what we do that matters.

In the healthy leadership programs I run, I have learned that leading with courage, with vulnerable personal sharing, creates

the psychological safety and trust necessary to have the caring conversations that count. When I lead workshops with my lived experience, there is greater openness within the group – the burning questions are asked, the quality of the conversation deepens, and people listen with curiosity and respond to each other with compassion.

So, to encourage you to lead with courage and model vulnerability, I will share some of my personal, raw stories and why I care so deeply about leaders developing mental health mastery for work.

I started my career as a bright, ambitious young woman during a time when equal opportunity, flexibility, fair work and discrimination laws, policies and protections didn't really exist. During my first year of work I was bullied, harassed, ridiculed, threatened, sexually assaulted and ostracised for being young, female, qualified, competent and different. I started my working career in a tough employment market, and if I could have found a job anywhere else, I would have taken it.

The leaders who I turned to for help with this psychological harm pleaded helplessness and then, behind my back, contributed to the rumour mill that I was trouble. My manager distanced themselves from me because they saw me as a threat to their career progression. I was ostracised by my team and left to figure out how to be safe on my own.

I shut down and focused on survival. I worked twice as hard as everyone else to continuously justify my existence.

My days were spent living in my stress response and on adrenaline, and dreading Mondays. Weekends were spent in a state of mental exhaustion, and expensive health-retreat holidays were dedicated to finding new and faster ways to recover and manage burnout.

When I eventually resigned, it was as one of the company's top performers. The leaders scrambled to create incentives for me to stay. I didn't.

**Ill health is not an acceptable price for
business success.**

MENTAL HEALTH MASTERY IS AN ESSENTIAL PART OF YOUR LEADERSHIP TOOLKIT

Most of us move into leadership and management roles with clarity around the tasks, projects, targets and results we are expected to deliver. There is an investment in training and time dedicated to work-in-progress meetings, either one-on-one or in teams, and performance expectations come with a range of measures for assessing our levels of performance and success.

Less explicit and often more informal, unwritten and unmeasured is an assumption that we will also manage the wellbeing of our team within the cracks of our leftover time. But when we don't manage the interpersonal dynamics well, leave those who are unwell to struggle, allow interpersonal conflict to fester or accept poor performance, we undermine both our own health and performance and that of our overall team.

**High performance is not sustainable unless it is
healthy high performance.**

The leadership wisdom in this book comes from my lived experience struggling with burnout, fluctuating mental health and a relentless drive for high performance. I worked extremely hard and fast-tracked a successful corporate career that took me from graduate trainee in a blue-chip global company to CEO of a multi-million-dollar business in just 15 years.

I overachieved on every commercial performance measure given to me, but I existed in a perpetual state of burnout – and ended up damaging both my mental health and physical health along the way.

There is a better way, and this book will help you find it.

MENTAL HEALTH IS EVERYONE'S BUSINESS

Mental health is something that we all experience, but when we notice someone struggling at work, we hope that Human Resources (HR) or someone else will deal with it. But with one in five of us is experiencing mental illness at work at any one time, we all have a role to play in supporting our colleagues. With work being where we spend so many of our waking hours, the relationships with our direct managers and team members are some of the most significant influences on our mental health and wellbeing.

We don't have to be experts in mental health to have a caring conversation that connects someone who needs help to support. While this book has 'mental health' in the subtitle, the heart of it is about helping you to have better conversations at work – conversations that connect rather than disconnect, that enable you to feel more confident offering timely and appropriate support to team members who may be struggling. It is as simple as starting one small conversation at a time.

Applying the Mental Health Mastery Framework to improve the conversations you are already having will alleviate worry and stress without adding to your workload. And research shows that people who feel valued and supported at work perform better, are more engaged and stay longer.

People who are well do well.



PART I

**THE STATE
OF PLAY**

UNCORRECTED PROOF

MENTAL ILL HEALTH is largely undetectable. It is not easy to see, and yet it is more common than many of us realise.

When you look at the line-up of people at work in Figure 1, can you pick which two currently have a diagnosable mental illness? One is experiencing mood swings with anxiety, and sometimes has frightening panic attacks. Another struggling with depression finds it so difficult to get out of bed in the morning that they are often late to work or miss work altogether some days.

Figure 1: Who is suffering from mental ill health?



Can you see the two people experiencing mental health pressure? Which person is exhausted and not sleeping due to disruptive caring responsibilities for an active toddler and a parent with dementia? Which person has a family history of substance addiction and is worried about a sibling's overuse of alcohol?

Can you identify the two stressed leaders? There is a supervisor who is concerned about two of their people and shouldering extra workload to take pressure off them, pushing themselves towards burnout in the process. There is also a team leader trying to work out a return-to-work plan for a staff member

who has lost confidence after six months' leave managing a mental health condition.

Our overarching responsibility as leaders is to promote psychological safety, provide a healthy working environment and provide support for people with mental health challenges.

Mental health mastery is no longer a nice-to-have; it is a necessary part of your leadership toolkit.

In Part I of this book, we define what mental health is, cover what your responsibilities are for providing a psychologically safe working environment and identify the warning signs for burnout and potential mental health problems.

You will have the opportunity to do a self-assessment of your starting point when it comes to your confidence and competence in supporting mental health at work. This will help you choose your focus for development with the Mental Health Mastery Framework in Part II.

Mental health conversation competence helps leaders strengthen their relationships with their teams, leading to improved communication, collaboration and overall performance.

CHAPTER 1

PEOPLE ARE NOT OKAY

People are under pressure. Pressure from external events such as the pandemic, country conflicts, natural disasters such as flooding and bushfires, and economic uncertainty are accelerating mental health issues around the globe.

In my discussions with leaders, the best way I have found to bring mental health issues to life is by defining the context with definitions, facts and stories of lived experience.

There was a small team of ten people that worked together in a local office supporting a range of departments across their organisation. They were capable and experienced in their separate fields, but some of them were struggling with mental health issues.

One member of the team, Ella, had been diagnosed with depression a few months ago. She was finding it difficult to concentrate and complete her work on time. Ella was exhausting herself with constant worry about her future and job security.

Another team member, Tom, had been dealing with anxiety for several years. He found it hard to communicate with his colleagues and often avoided social events. His anxiety also made him doubt his abilities and be reluctant to take on new responsibilities.

Meanwhile, Ollie was going through a difficult divorce. Ollie's personal life was impacting his work, and he was finding it challenging to stay focused.

The rest of the team was not aware of the struggles that Ella, Tom and Ollie were living. They knew their colleagues were not performing as well as they used to but attributed it to laziness and lack of motivation.

Mental health challenges are natural and common, not niche. In any 12-month period, 20% of adults experience a diagnosable mental illness. That amounts to one in five people in our teams at work each year who are not okay.

Mental health risk at work is real. Mental health is a growing safety risk in the workplace, with the workplace being cited as a primary source of stress, and more than 90% of Australia's mental health compensation claims are linked to work-related stress or mental stress. The three most common causes of mental stress are preventable and relate to a lack of psychological safety at work. They are:

1. work pressure (31%)
2. work-related harassment and/or bullying (27%)
3. exposure to workplace or occupational violence (14%).

Ignorance is no longer an excuse. Federal legislation in Australia mandates that employers manage psychosocial hazards under

the Work Health and Safety Act. Other countries are reviewing and updating their legislation.

Organisations are now expected to create mentally healthy workplaces and protect the mental health of their employees. As leaders, that translates to a legal responsibility to ensure that we are providing people with a working environment that is not just physically safe but also psychologically safe.

Whitney worked as a project manager for a large organisation. She loved her job and enjoyed working with her colleagues. However, one of her project team colleagues, Noah, had been bullying her for several months. He would make derogatory comments about Whitney's work and appearance and would exclude her from important meetings. Whitney tried to ignore Noah's behaviour, but it was becoming increasingly difficult. She spoke to her manager about her challenges with Noah, and her manager suggested that she needed to learn to be more assertive.

With the project delivery deadline fast approaching, the stress of the situation was taking a toll on Whitney's mental health. She was having trouble sleeping and continually felt anxious. Whitney found it difficult to concentrate at work and was losing confidence from being cut out of meetings and making mistakes on her projects. Whitney felt isolated and alone and didn't know where to turn for help.

As leaders, what we say and do – or don't say and don't do – makes a key contribution to the mental health and psychological safety of our team members.

STIGMA AND STRUGGLING

The biggest barrier people with mental health problems face at work is stigma.

Stigma is defined as a deeply discrediting attitude that reduces individuals 'from a whole and usual person to a tainted, discounted one'. Research shows that either stigma or the fear of stigma can cause people experiencing mental health difficulties to avoid seeking or receiving treatment. Unfortunately, negative attitudes and beliefs towards people who have a mental health condition are common.

More than 50% of people with a common, diagnosable mental illness do not receive professional help. So, people are struggling on their own who don't need to be. And research shows that the earlier someone connects with help, the easier and shorter their healing journey is likely to be.

Ethan had been in his role for five years. He was a diligent employee, always putting in long hours and going above and beyond for his clients. Behind the diligence, Ethan was hiding his struggle with depression. Over time Ethan's mental health deteriorated, exacerbated by the effort it took to pretend to be healthy for his colleagues and work the extra hours to prove his worth.

Ethan was worried that if he revealed his mental illness, his supervisor, colleagues and superiors would think less of him and his career prospects would be negatively impacted.

Ethan was struggling to concentrate at work and found it increasingly hard to get out of bed in the morning.

He knew he needed help but didn't know what to do, and he was worried that taking sick leave would invite unwanted questions.

There is a vast range of reasons why people may not feel comfortable or safe with professional help, or worthy of it. There are also cultural considerations, which are diverse and too nuanced to do justice to here and so are not covered in this book, but there are some great community resources available.

Particularly when we talk about mental health at work, we can group the barriers that people face in reaching out for help into two broad categories:

1. personal reasons
2. workplace reasons.

Personal reasons can be wide-ranging. Examples include:

- fear of stigma and rejection by friends, family or their community
- shame or embarrassment – thinking that they should be able to cope because everyone else seems to be fine
- the fact that mental health problems often build over time, and so someone may not recognise they need help
- lack of education in understanding the signs, options for help and professional supports available
- lack of accessible and confidential professional help options, particularly in regional or remote areas
- the cost of professional help
- poor treatment or experience in the past, either personally or of someone they know.

There are also specific work-related barriers. Examples include:

- fear of stigma and rejection by colleagues, peers, direct reports and managers
- cultural norms and expectations, such as an expectation to adopt a ‘stiff upper lip’ and ‘put your game face on’ or ‘suck it up, buttercup’
- performance management concerns – worry about job security and negative performance ratings
- fear of discrimination – worry about their job being downgraded or being passed over for a promotion they would otherwise be considered for
- feeling isolated
- worrying about being ostracised by their colleagues
- lack of supporting policies and procedures for flexibility, reasonable adjustments and support
- poor workplace treatment in the past, either in a previous workplace or in the current workplace
- financial concerns, such as not enough sick leave or annual leave to take time off without causing financial stress.

As leaders, we can reduce the influence of stigma by recognising that it is natural for people to experience mental health ups and downs – to make it okay for people in our teams to share when they are not okay, and to show empathy, respect and support for people who are struggling.

DEFINITIONS MATTER

We fear what we don't know, and by drawing a map of the terrain and providing shape and context we can take away some of the uncertainty that comes with difficult conversations.

So, before we discuss how to better support people experiencing mental health challenges at work, it is important to improve our understanding of the key terms most often used. Terms such as ‘mental health’, ‘mental illness’, ‘stress’ and ‘burnout’ mean different things to different people. Each of these mental health challenges is also experienced uniquely depending on our individual mix of factors, such as life experiences, biology, coping strategies, support networks, education and access to services.

Before we can provide better health and wellbeing support, we need to appreciate what contributes to good mental wellbeing.

What is mental health?

Many people associate the term ‘mental health’ with poor mental health or mental illness. But mental health actually refers to a positive state. Mental health is defined by the World Health Organization as ‘a state of well-being in which the individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community’.

Good mental health or mental wellbeing is characterised by:

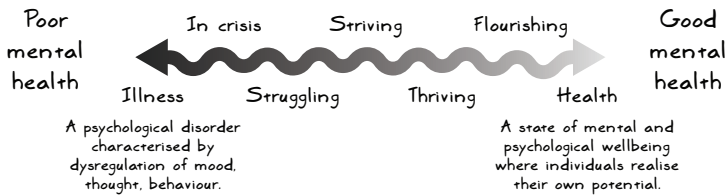
- feeling relatively confident in yourself with positive self-esteem
- feeling and expressing a range of emotions
- building and maintaining good relationships with others
- feeling engaged with the world in general
- living and working productively
- coping with the stresses of daily life, including work-related stress
- adapting and managing in times of change and uncertainty.

Mental health is experienced on a continuum

An individual's mental health can be considered to sit somewhere along a continuum, with good mental health at one end and poor mental health at the other (see Figure 2).

Mental health is not static. An individual's position will shift throughout their life (or even a single day) depending on the situations they face and the range of socioeconomic, biological and environmental factors they experience.

Figure 2: The mental health continuum



It is both natural and normal to have ups and downs and to shift along the continuum from time to time. For example, someone might feel really stressed out when moving house or starting a new job. This is not a sign of clinical anxiety but a one-off, reasonable reaction to the situation they are facing. The stress resolves when the situation resolves.

Poor mental health can be considered a state in which thinking, feeling or reacting becomes difficult or even impossible to cope with. Mental illness refers to a psychological disorder diagnosed by professionals and characterised by dysregulation of mood, thought and/or behaviour.

As leaders, it is important for us to understand that someone experiencing mental illness will, most of the time, function well at work with support and professional help.

Stress is a natural part of life

Stress has the potential to negatively affect our mental health if not managed well.

Stress is how you react when you feel under pressure or threatened. When you are stressed, your body releases stress hormones such as adrenaline. This brings on physical changes in your body that help you respond to the stressful situation.

The body's stress response may also be called the 'fight, flight or freeze' response and is a helpful way your body has adapted to respond to danger. When you experience episodes of stress, the stress hormones your body releases keep you alert and able to face challenges.

Andy was an engineer working on a high-pressure project with a tight deadline. Andy was a hardworking, dedicated employee, but the pressure and stress of the project was starting to take a toll on their mental and physical health. They began experiencing symptoms of stress, such as difficulty sleeping, loss of appetite and irritability.

Andy found it increasingly hard to concentrate and cover the numerous tasks that were becoming urgent. Andy's stress levels were also causing physical symptoms, such as headaches and muscle tension, which made it difficult to think and function well.

The project was completed and successfully delivered to the client on time. Andy felt a tremendous sense of relief and accomplishment, and their stress levels dropped significantly. Andy was able to sleep better, eat normally and feel more relaxed and at ease.

Stress is a normal reaction to everyday pressures but can become unhealthy when it disrupts your day-to-day functioning. While everyone will feel stress at times, each person's experience is different. Knowing what your stress triggers are and how you respond to different challenges in life will help you manage stressful periods.

WORK AND STRESS

Work-related stress has been specifically defined by the World Health Organization as the 'response people may have when presented with demands and pressures that are not matched to their abilities, leading to an inability to cope, especially when they feel they have little support from supervisors and little control over work processes'.

As leaders, we are responsible for ensuring that our people have the clarity, training, support, resources, knowledge, feedback and supervision they require to perform their jobs healthily and well.

A mentally healthy environment is one in which leaders protect, respond to and promote mental health for their people.

Gemma, Andy's manager, recognised the elevated levels of stress in the team and took steps to better balance the workload and provide additional support where needed. Gemma arranged for team members to work in pairs, scheduled regular breaks and supported them to prioritise self-care.

Stress becomes a mental health problem when it lasts a long time, or if you feel overwhelmed and unable to cope with your situation. While stress is not a mental illness in and of itself, prolonged stress may lead to mental health issues or burnout. It is important that you prioritise your self-care and health.

LET'S TALK ABOUT BURNOUT

I was the head of a homewares business and oversaw design, overseas procurement, local manufacturing and distribution across all of Australia's major retailers. I reported to the Group Managing Director and the Board of the parent company, which included my predecessor.

My predecessor was paid a handsome fee to manage the business transition of leadership. He made it clear that he saw this retainer as a core part of his retirement income, so it was in his best interests to publicly undermine my competence with my company and the Board so he would still be needed. This included secret meetings with my Finance Manager, who was resentful that she wasn't CEO. She refused to give me current financials and would only provide accurate financial reports to the Board at our monthly Board Meetings, where my predecessor would routinely humiliate me.

At the end of every working day, I stayed back to work on my own spreadsheets and models, and double-check purchase orders and factory instructions. Weeks turned into months, and I didn't notice when 70-hour working weeks became my new norm.

When the global financial crisis hit, our product orders were cancelled by the major department stores and our sales dried up literally overnight. I didn't have anyone at work who I could trust to talk things through with, and I knew that I would have to figure out how to navigate this on my own.

Every day for 18 months, I absorbed the stress and questions of 100 good people worried about the lack of work and their job security. Every decision I made became the difference between someone having enough work or losing their job. I took on my people's stress as my own.

I wasn't sleeping, with my overactive mind stuck in a 24/7 problem-solving cycle. Living with exhaustion, getting out of bed each morning was a battle. Existing on cortisol and adrenaline, I made it through each day with litres of caffeine and sugar.

I was easily irritated, quick to tear up over silly things and struggling to manage intense mood swings. Most weeks I was at the doctor with colds, stomach pains, skin inflammations and unrelenting headaches. I spent a small fortune on medications, supplements and blood tests, yet each month the tests came back as being in the 'normal range'. I knew that what I was feeling wasn't normal, but I didn't know what was wrong with me. It took two years of living like this before I found a holistic doctor who diagnosed me with burnout, adrenal exhaustion and leaky gut syndrome.

It took another two years before my mental health and physical health stabilised. And I have spent a further ten years studying, researching, experimenting, learning and teaching both myself and others how to achieve both healthy and high performance.

**Burnout is not an acceptable price for
high performance.**

Burnout is more than exhaustion

Many people describe themselves as 'burnt out' when they really mean 'exhausted'. So, let's take a moment to properly define it.

The World Health Organization classifies burnout as a syndrome ‘resulting from chronic workplace stress that has not been successfully managed’.

There are three components to burnout:

1. **Energy depletion or exhaustion:** mental, emotional and physical
2. **Distancing or disconnection:** this may be mental disengagement, cynicism, lack of trust, negativity or possibly apathy
3. **Reduced performance or efficacy:** a loss of productivity and effectiveness (you are not getting things done in the way – or at the speed and quality – you usually would).

While burnout is not classified as a mental illness in and of itself, examples of health outcomes associated with burnout include depression, insomnia, type 2 diabetes, susceptibility to colds and cardiovascular diseases.

But burnout doesn’t just negatively impact the health of the person experiencing it – it also adversely affects their ability to do their work and adds pressure to the rest of their team. Burnout outcomes at work include withdrawal behaviours such as absenteeism and turnover, decreased job performance, decreased job satisfaction, loss of engagement and commitment, and more interpersonal conflict with colleagues.

Solving burnout is a joint responsibility

While burnout has traditionally been viewed as an individual’s problem to manage, the reality is that burnout won’t be solved without leaders proactively managing for a healthy working environment.

Liam enjoyed the challenge of his job and became known as the go-to person for creative problem-solving of complex challenges for the team. He enjoyed being needed by the team, which boosted his self-confidence.

Over time he felt increasingly stressed and exhausted from the pressure of keeping up with his own work while providing the team with extra help.

Liam ignored the early signs of burnout and continued to push himself, not wanting to let others down. He began to develop other signs of burnout, including:

- physical symptoms: he experienced frequent headaches and muscle tension, and found himself getting sick more often and struggling to get a good night's sleep
- emotional symptoms: he felt emotionally drained and became irritable and impatient with his colleagues
- reduced productivity: his work began to suffer as he struggled to concentrate and found himself making mistakes
- lost motivation: he lost his positivity for problem-solving and enthusiasm for his work, and began to question if he was in the right job.

Liam realised he couldn't continue like this. He reluctantly spoke to his manager and shared his concerns about the workload and the toll it was taking on his mental and physical health.

His manager reassured him that he was a valuable part of the team. Together, they agreed on his core work priorities, agreed on a plan for how to better manage the team

problem-solving requests as they came up and identified tasks that could be delegated to others.

To support his wellbeing, they agreed that he would start 30 minutes later each morning so he could attend a class at his gym, and they ensured that time was built into his schedule for a lunch break each day.

They scheduled a fortnightly check-in to see how this was working for him and make adjustments if needed.

How you communicate, prioritise work, provide autonomy, proactively manage workloads, support flexible working practices, and respect and model boundaries to working hours and wellbeing adds or detracts from a mentally healthy working environment.

Lily prided herself on being the top performer in her team – someone who could handle any challenge that came her way. But lately, she had been feeling overwhelmed and exhausted. The demands of her job seemed to be never-ending, and she felt like she was constantly playing catch-up.

The team had a micromanaging and demanding leader who often dumped requests on them with little notice. Lily had been shielding the team from the unreasonable requests coming their way by taking on more and more tasks herself.

Even though she didn't have the time or energy to do all these tasks, Lily was convinced that she was protecting the team from stress and burnout. But as her workload piled up, Lily found herself mentally drained, struggled to cope and became a bottleneck for team decisions.

THERE ARE BOTH WORK CAUSES AND PERSONAL CONTRIBUTORS TO BURNOUT

I invite you to read through these checklists and rate on a scale from 1 to 5 where you currently see yourself for each item. A rating of 1 represents a major problem for you, 3 is neutral and 5 represents a source of strength for you.

Let's start with the work causes of burnout:

- 1. A mismatch between job demands and resources:** you experience excessive job demands without the training, resources or tools to successfully complete the work.

Rating _____

- 2. Excessive workload:** you experience regular overwork and excessive hours.

Rating _____

- 3. Lack of autonomy:** you lack control over the key decisions that affect how you do your work, or you don't have access to the people who need to provide you with information or guidance. This may also occur when you experience excessive micromanagement from others.

Rating _____

- 4. A purpose and values misalignment:** you don't feel a sense of integrity around what you are being asked to do; you are being asked to do things that are contrary to what the organisation stands for; or you don't feel that your role contributes to a meaningful, bigger picture.

Rating _____

- 5. Unhealthy working relationships:** you don't feel valued or like your efforts are recognised or matter. People aren't treated fairly – there is bias, favouritism or mistreatment tolerated by others.

Rating _____

There are also personal characteristics or lifestyle challenges that can make us more or less susceptible to burnout at an individual level:

- 1. Worriers or ruminators** mentally run through different scenarios and courses of action with multiple contingencies for if things go wrong.

Rating _____

- 2. Perfectionists** set unrealistic demands and expectations for themselves and are often described as having high standards or standards that are higher than are requested of them.

Rating _____

- 3. Introversion** means you are the kind of person who derives energy from your own company, and you are overdoing extroversion practices at work such as group meetings and teamwork projects.

Rating _____

- 4. Poor or out-of-balance health practices** means you have insufficient or inconsistent sleep, movement, nutrition, socialising, work-hours patterns and routines.

Rating _____

5. Lacking trusting personal relationships is when you don't have at least one close, trusting relationship at work and one close, trusting relationship outside of work where you can work through work-related problems and challenges.

Rating _____

Note down your burnout sources of strength and your burnout areas of vulnerability.

What do you need to address to reduce your susceptibility to burnout?



OUR MENTAL HEALTH MAP

We fear and avoid what we don't understand. Facts and clear definitions matter.

At least one in five people right now are not okay, and half of those people are not accessing the professional help that could alleviate their suffering and support them to find a path for healing.

As leaders, it is important that we support people in having good mental health at work. This means providing a healthy environment and playing an active role in managing the work causes of stress and burnout before they get out of hand.

When we see someone struggling, we need to reach out and make the effort to connect. We don't need to know what their specific reasons are for struggling or not feeling safe enough to reach out for help; we just need to know that stigma and barriers exist – and be prepared to make the first move.

How many times have you said the following?

'If you need help with anything, just sing out.'

'If you need help with that project, just ask.'

'My door is always open if you need anything.'

Instead of putting the onus on your people to break through their fear and blocks, as a leader you need to proactively check in and offer the support they need.



LEADING WELLBEING TOOLKIT

Here are some tips for creating a healthy work environment:

- **Create a positive and inclusive work environment:** Encourage teamwork, idea sharing, the debate of multiple options, positive and constructive feedback, and offers of help.
- **Foster open communication:** Create rituals in meetings where people can discuss concerns and challenges and get help. Schedule regular individual check-ins to discuss workload, progress and any wellbeing issues.
- **Encourage breaks and boundaries:** Encourage the team to take breaks, set reasonable expectations for workload and deadlines, and provide support to prevent regular overwork.
- **Support social care and self-care:** Prioritise lunch breaks, support time for exercise, provide learning opportunities, be flexible with time for personal appointments and organise team social catch-ups.
- **Give recognition and rewards:** Express appreciation for individuals and the team on a regular basis. Acknowledge effort, experimentation, learning, helping out and progress. Celebrate achievements both large and small.
- **Provide support for mental health and wellbeing:** Build team mental health literacy, try out the EAP and share with your team how it helps, engage the team in wellbeing challenges that all can take part in, and support health messages and awareness campaigns.