Addressing mental health and organisational performance in tandem: A challenge and an opportunity for bringing together what belongs together

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Addressing mental health and organisational performance in tandem: A challenge and an opportunity for bringing together what belongs together

Mental health is the “foundation of wellbeing and effective functioning for both the individual and the community” (WHO, 2005) and is central to human behaviour across all domains, including the workplace. Organisational performance is a compound concept that reflects the function and outputs of an organisation, from its profitability and productivity to its competitive advantage. By definition, an organisation’s output depends on how effectively it functions, including how effectively its people, or human capital, functions (Neely, 2005). This means that mental health and organisational performance are inherently interconnected (Peccei & Van de Voorde, 2016).

There is a widespread understanding that “good health is good for business” and that health and wellbeing play a role in both individual performance and broader organisational performance, and vice versa (Guest, 2018; Pfeffer, 2019). We see persuasive calls for research and theory into how wellbeing aligns with organisational performance and for integrating both concerns into human resources management (HRM) practices. However, organisations and managers still tend to think of mental health and organisational performance as disconnected (Van De Voorde, Paauwe, & Van Veldhoven, 2012). While businesses and governments treat organisational performance as an established priority, they give lower priority to mental health and address it in an ad hoc manner (Hasle, Seim, & Reislund, 2019; Jensen, 2000).

Overall, theory recognises mental health and organisational performance goals as connected, but practice disjoins them, and businesses and governments tend to prioritise organisational performance at the expense of mental health. This editorial aims to articulate the increasingly relevant issue of the interconnection between mental health and organisational performance, to discuss the possible forces behind it, and to incentivise the reader to explore potential solutions to it. The core proposition of our editorial is that organisations have the power and responsibility to enable inherently healthy workplaces by supporting mental health and organisational performance in tandem, instead of in a disjointed manner.

Why mental health and organisational performance are often considered separately. As such, presenteeism includes both the employees’ reaction of going to work sick instead of staying at home to recover and the managers’ actions to balance employees’ mental or physical health with their performance (work tasks, deadlines, demands, et cetera). Regrettably, when mental health is in focus, the tendency is for “band-aid,” individual-focused wellness solutions (exercise, diet, et cetera) rather than for fundamental changes in work conditions such as job design or organisational-level interventions (Lamontagne, Keegel, Louie, Ostry, & Landsbergis, 2007). For example, sickness presenteeism has been recently described as an individual act that aims to balance the limitations of a health condition against an employee’s performance demands to satisfy that employee’s responsibilities toward both work and health, bringing individual concerns and organisational goals together (Karanika-Murray & Biron, 2019). This results in a lack of practical insight and HR-occupational health dialogue, a weakened
business case, and an unfulfilled potential to truly integrate mental health and organisational performance in theory and management practice (Guest, 2018; Van De Voorde et al., 2012).

There are many reasons why mental health takes a back seat in management and daily operations, including cost and outcomes; management of change versus daily operations. First, because organisational performance is immediate and yields tangible outcomes for businesses and the economy, organisations grant it higher priority and thus overshadows mental health in the competition for resources (Pfeffer, 2019). Organisations often bear the primary and immediate cost of organisational performance issues, whereas employees carry the primary and immediate cost of mental health problems, for example in terms of work-life balance (Karania-Murray & Cooper, 2020).

Second, there are legislative and regulatory environments governing both mental health and organisational performance in different contexts. For instance, in Denmark the Ministry of Employment deals with health legislation while the Ministry of Industry, Business and Financial Affairs is in charge of performance, innovation, and growth. We see the same separation in organisational structure: the HR and occupational health functions of both public administration and private businesses (Jensen, 2000). This separation misses the interdependencies between mental health and organisational performance and opportunities in the intersections between the two.

Third, in preventative interventions, scholars tend to prefer primary interventions, focusing on work processes and daily activities, rather than tertiary interventions, focusing on the individual. However, primary intervention studies fail to consider the work and production system or organisational performance (Westgaard & Winkel, 2011), thus ignoring the links and balance between mental health and organisational performance. Therefore, there is an implicit bias against changes that benefit both mental health and organisational performance in more substantive ways.

Finally, many organisations and managers lack the knowledge or skills for dealing with mental health at work and relating it to organisational performance, especially in small or resource-constrained organisations (European Agency for Safety and Health at Work, 2010). Traditional management training focuses on organisational performance, and although there is often additional training on mental health issues, the two areas area rarely discussed in conjunction. As a result, to support employee mental health, managers typically rely on peripheral training and unintegrated methods as they retain a systematic focus on organisational performance. Managers who seek to better understand and learn how to manage mental health may find this process difficult to navigate and time-consuming (Ipsen, Gish, & Poulsen, 2015).

**Bringing together mental health and organisational performance.** Because interventions are essentially change initiatives, their success and sustainability depends on their comprehensiveness and integration into daily operations (Ipsen & Jensen, 2012; Nardelli & Broumels, 2018). Essentially, any organisational change initiative that aims to improve organisational performance must attend to mental health, and any organisational intervention for mental health reasons must attend to organisational concerns and targets, in order to secure resources and anchor long-term sustainable change. Based on this principle, organisational interventions present important opportunities to align mental health and organisational performance.

Some pioneering organisations are starting to see these opportunities and implement new ways of working and organising work that take both mental health and organisational performance into account (Pfeffer, 2019). These organisations offer some inspiring examples of a combined focus: Companies like Pentia in Denmark (cphpost.dk, 2017), SAS Institute (Pfeffer, 2019), Patagonia (Scott, 2019), Hilton, and Cisco Systems (Fortune, 2019) have implemented initiatives focused on shorter working weeks, longer weekends, less overtime/overwork, and more generous (parental) leave – and these initiatives correlate with improvements in both mental health and organisational performance.
The role of leadership in interventions is increasingly being acknowledged (Taris & Nielsen, 2019). Delivering interventions in ways that are complementary to both mental health and organisational performance may require new leadership approaches and new mental models that acknowledge the inseparability of mental health and organisational performance. One relevant concept in this context is intervention leadership, or “the process whereby a leader (at any level of seniority) tailors behaviours and applies resources to influence the intervention participants, support the intervention processes and achieve the intervention aims” (Ipsen, Hasson, & Karanika-Murray, 2018). Developing intervention leadership that addresses mental health and organisational performance in tandem requires an understanding of the mechanisms and intersections between the two, pointing to future research needs.

More research into the inseparability of mental health and organisational performance is needed if we want to improve mental health and organisational performance. Future research should have three aims: (1) to expand on the case for re-coupling mental health and organisational performance; (2) to describe new structures and processes that can address the need for mental health and organisational performance to consider in tandem; and (3) to examine the mechanisms that describe the interrelationship between mental health and organisational performance. To achieve these goals, collaboration across disciplines, including management, occupational health, work psychology, mental health, and intervention science, is essential. Combining classic principles and recent developments in organisational change with intervention science is a needed first step. By focusing on the complementarity of mental health and organisational performance, we can create a chain of benefits for both employers and employees, but also for families, the workforce, healthcare, and society as a whole. The aim is to bring together what belongs together—to make mental health and organisational performance partners that lead to optimal human and organisational functioning.

**References**

cphpost.dk. (2017). No, not David Brent … this Danish company is Europe’s most fun workplace. Retrieved from cphpost.dk/news/business/no-not-david-brent-this-danish-company-is-europes-most-fun-workplace.html


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