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Ms Lori Catelli  
Department of Education, Employment and Workplace Relations  
GC 54  
GPO Box 9879  
Canberra ACT 2601

## **Re: National Mental Health and Disability Employment Strategy Discussion Paper**

On behalf of its 13,500 HR practitioner members AHRI is pleased make a submission to DEEWR on the proposed National Mental Health and Disability Employment Strategy.

At a time of national labour and skill shortages that pose an increasing threat to many businesses, HR practitioners play a central role in finding solutions to the challenges relating to in-house recruitment, up-skilling and retention of talent. As the professionals within business who execute HR and people management solutions in the workplace, AHRI members are at the 'pointy end' of business decision making and their involvement is mission-critical to the competitiveness of Australian business.

Accordingly, AHRI members have a vital stake in the implementation of government policy in areas such as workplace relations, occupational health and safety, workplace training, and the creation of a workforce environment that is sufficiently flexible to accommodate imperatives such as boosting the participation in employment of those who want to work but who remain outside the workforce. In excess of 750,000 Australians are estimated to be outside the workforce because of a mental health or disability issue, and there is wide acknowledgement that a great many of that number are willing and able to contribute productively and competitively to the Australian workforce.

AHRI recently conducted a survey of its members on this issue and is making a submission to the Government's Strategy Discussion Paper in the hope that it will make an impact in this public policy area to further the achievement of its economic and social inclusion agendas.

### **The survey**

In order to provide an evidence-based submission to the Government's Strategy, AHRI conducted an online survey of its member database during a five-day period in the month of June 2008. In the time available, 325 members responded to the survey questions and this submission is largely informed by those responses.

The survey took the form of 17 questions put in the form of statements about the areas of organisational policy and procedure relating to the recruitment and retention of people either seeking employment or seeking to remain in employment despite a mental health or disability issue.

In addition to question 1-17, respondents were invited to set out in writing their responses to three questions:

- What would you like to see included in the National Mental Health and Disability Employment Strategy?
- Do you have any concerns about the development of the National Mental Health and Disability Employment Strategy?
- What do you think are the main barriers to employing and keeping employees with a disability or mental illness?

## QUESTIONS 1-17

### Question 1

**“The organisation for which I work (“my organisation”) has policies and procedures relating to the recruiting of people with disability and mental illness.”**

**Agree Disagree Don't know**

Of the 325 respondents who answered this question:

- 41 percent (132) agreed with the proposition
- 49 percent (158) disagreed
- 11 percent (35) said they didn't know.

### Question 2

**“A business case has been developed in my organisation for recruiting people with disability and mental illness.”**

**Agree Disagree Don't know**

Of the 325 respondents who answered this question:

- 62 percent disagreed with the proposition
- 22 percent agreed
- 16 percent said they didn't know.

### Question 3

**“My organisation has recruited people with disability and mental illness.”**

**Agree Disagree Don't know**

Of the 325 respondents who answered this question:

- 68 percent agreed with the proposition
- 17 percent disagreed
- 15 percent said they didn't know.

## Question 4

**“My organisation is currently considering targeting people with disability and mental illness as a source of talent to address present or expected skills shortages among its workforce.”**

**Agree Disagree Don't know**

Of the 220 respondents who answered this question:

- 63 percent disagreed with the proposition
- 21 percent agreed
- 15 percent said they didn't know.

## Question 5

**“My organisation invites applications from people with disability and mental illness when drawing up recruitment short lists.”**

**Agree Disagree Don't know**

Of the 220 respondents who answered this question:

- 52 percent agreed with the proposition
- 38 percent disagreed
- 10 percent said they didn't know.

## Question 6

**“My organisation provides support for the people it recruits with disability and mental illness.”**

**Agree Disagree Don't know**

Of the 220 respondents who answered this question:

- 82 percent agreed with the proposition
- 12 percent disagreed
- 5 percent said they didn't know.

## Question 7

**“My organisation receives government assistance to provide support for the people it recruits with disability and mental illness.”**

**Agree Disagree Don't know**

Of the 220 respondents who answered this question:

- 42 percent disagreed with the proposition
- 25 percent agreed
- 33 percent said they didn't know.

## Question 8

**“My organisation receives government assistance when recruiting people with disability and mental illness from the following sources:”**

Of the 207 respondents who answered this question:

- 17 percent received support from federal government
- 10 percent from state government
- 16 percent from employment providers
- 3 percent from other sources.

Nearly 70 percent of respondent organisations either received no support (34%) or the respondents didn't know whether support was received or not (35%).

## Question 9

**“The type of work in my organisation would not be suitable for people with disability and mental illness.”**

**Agree Disagree Don't know**

Of the 326 respondents who answered this question

- 79 percent disagreed with the proposition
- 15 percent agreed
- 6 percent said they didn't know.

## Question 10

**“Employing people with disability and mental illness in my organisation would be too risky and time consuming, and they would need more training by existing staff.”**

**Agree Disagree Don't know**

Of the 326 respondents who answered this question:

- 74 percent disagreed with the proposition
- 17 percent agreed
- 10 percent said they didn't know.

## Question 11

**“People with disability and mental illness would not ‘fit in’ with the culture in my organisation.”**

**Agree Disagree Don't know**

Of the 325 respondents who answered this question:

- 84 percent disagreed with the proposition
- 8 per cent agreed
- 8 percent said they didn't know.

## Question 12

**“The costs involved in workplace modifications and insurance premiums would make employing people with disability and mental illness in my organisation prohibitive.”**

**Agree Disagree Don't know**

Of the 326 respondents who answered this question:

- 71 percent disagreed with the proposition
- 11 percent agreed
- 17 percent said they didn't know.

## Question 13

**“My organisation has policies and procedures, other than workers' compensation or other legislated entitlements, relating to existing employees who may acquire a disability or mental illness.”**

**Agree Disagree Don't know**

Of the 326 respondents who answered this question:

- 47 percent disagreed with the proposition
- 37 percent agreed
- 16 percent said they didn't know.

## Question 14

**“My organisation has a program, other than workers' compensation or other legislated entitlements, relating to the management of employees who may acquire a disability or mental illness.”**

**Agree Disagree Don't know**

Of the 325 respondents who answered this question:

- 48 percent disagreed with the proposition
- 35 percent agreed
- 17 percent said they didn't know.

## Question 15

**““My organisation provides support, other than workers' compensation or other legislated entitlements, for existing employees who may acquire a disability or mental illness.”**

**Agree Disagree Don't know**

Of the 326 respondents who answered this question:

- 64 percent agreed with the proposition
- 25 percent disagreed
- 10 percent said they didn't know.

## Question 16

**“My organisation receives government assistance to provide support for existing employees who have acquired a disability or mental illness.”**

**Agree Disagree Don't know**

Of the 326 respondents who answered this question:

- 52 percent disagreed with the proposition
- 10 percent agreed
- 37 percent said they didn't know.

## Question 17

**“How would you rate the skills in your organisation with respect to managing employees with disability and mental illness?”**

**Strong Mediocre Weak**

Of the 323 respondents who answered this question:

- 46 percent said “mediocre”
- 36 percent said “weak”
- 18 percent said “strong”.

## QUESTIONS 18-20

Questions 18-20 invited written answers from the survey respondents. What follows is a summary of the respondent comments to these questions.

### Question 18

**“What would you like to see included in the National Mental Health and Disability Employment Strategy?”**

The responses to this question included a heavy emphasis on the provision of education, training and advisory services for employers using positive case studies and role models with a view to focusing on the benefits of employing and retaining people from this cohort and playing down the stigma and negative attitudes attaching to them.

The calls for education were supported by a number of respondents who mentioned the importance of a mass, ‘in-your-face’ general community marketing campaign that would effectively erode negative employer attitudes as community attitudes changed. In addition to mentioning the benefits of employing workers with a disability or mental illness, a number of respondents also wanted realistic advice for employers on the risks to business in going down this path.

A number of respondents said that mental illness and physical disabilities should be treated for the purposes on employment strategy as separate issues because they raised different challenges, especially the challenge of behavioural issues with respect to various forms of mental illness. On the other hand, other respondents simply said they wanted to see training resources for both areas increased significantly so that employers, managers and staff were in a better position to manage employees with a mental illness, some expressly calling for the inclusion of things such as autism spectrum disorders among the disabilities that needed supporting and funding.

On the question of employees with an episodic mental condition, there were calls to fund back-filling when a person is unable to perform for a time, and emergency access to funding to support a staff member who acquires a mental illness in the course of employment.

There were also calls for government funding support for employers who make reasonable workplace adjustments in the act of recruiting a person with a disability.

There was recognition also that 'job fit' was a critical factor in employing people with a mental illness or disability, and that advisory services with a follow-up charter were necessary for success in this area.

There were mixed views among respondents about quotas and targets for business, with some saying imposed quotas were necessary while others said it's more important for employers to buy in freely so that the initiative is not seen as an employer burden and treated accordingly.

There were a number of calls for initiatives such as clear and consistent definitions, cooperative State and Commonwealth buy-in, easy access to a 'one-stop-shop' advisory service, public recognition of employer case studies and legislative changes that re-balance employer risk and limit legal exposure.

## Question 19

### **“Do you have any concerns about the development of the National Mental Health and Disability Employment Strategy?”**

The responses to this question were overwhelmingly along the lines of “about time” and “long overdue” combined with a cautious delight that something was finally being done, but concerned that it might all end up “half-baked”, be “lip-service only”, fail to provide training and challenge stereotypes, and “make no difference”.

That said, other respondents expressed the view that businesses are not charities and they would be very concerned if affirmative action targets were set that were invasive and created resentments. A number expressed concern about the possible imposition of an auditing and reporting regime that could become a record-keeping nightmare. Others made the point that proper matching of jobs with applicants was critical and difficult, and that it needed support if it were to work, adding that it is important that vulnerable groups are not penalised for refusing to take non-meaningful and inappropriate work.

A number of respondents reaffirmed the need to treat mental illness and physical disabilities differently and that a one-size-fits-all approach will not work. Against a view expressed by a small number of respondents that people should be more open and honest about their illnesses, one respondent made the point that he/she had worked for many years with a mental condition and had relied successfully on medication without ever considering the option of disclosure for fear of becoming a victim of the stigma that attaches to the condition.

A number of respondents saw the need for exceptions in some industries and professions, and raised the potential exposure of small business, saying that a business case needs to be made that equates the hiring of a person with a mental illness or disability with the hiring of any other competitive candidate and

not become another cost for a small business. Against that, some respondents were more ready to call on big business to take a lead and set targets for which they were accountable. One respondent called for some adjustments to the laws with respect to termination so as to encourage employers to opt in.

There were calls in some quarters for large scale culture changes within organisations to make success in this area a possibility and some HR respondents saw the difficulty of selling a business case to executives who had no direct accountability for the issue. One feared lest it be seen a just another “HR do good” initiative rather than a constructive, commercially focused business strategy. These types of respondents also made clear that initiatives will fail if simply left to managers who only take a bottom-line perspective and expect all employees “to hit the ground running” rather than look at the long-term potential of employees. To counter this, employer education and training needs to be made available.

## Question 20

### **“What do you think are the main barriers to employing and keeping employees with disability and mental illness?”**

Overwhelmingly, the barriers were expressed in words such as “ignorance”, fear of the unknown”, “perceptions”, “lack of empathy” and “lack of education”, though others referred to more concrete realities such as “behavioural problems”, “consistency in their work”, “customer service standards” and “education costs”.

Some HR respondents also recognised that for many employers, supervisors and their staff, the idea of taking initiatives in this area is akin to taking on a liability rather than an asset, and that HR managers would need considerable assistance to sell a prospect to their internal clients who may well come to the idea with a pre-conception that people with mental illness or a disability are all “freaks”.

Poor past experiences, however, is seen as a barrier in a number of cases, including placing other employees in danger. The element of risk to the business in terms of training, time, cost and safety were cited as common barriers by respondents, including workers’ compensation assessments.

The idea of matching job to applicant came up again as a barrier, especially if the focus is less on the skills that the applicant possesses and more on the disability that has been disclosed. One respondent made the cogent remark that this type of situation “may disempower those it seeks to assist by focusing on areas of weakness”. As an illustration of that, another respondent revealed that the workplace from which he/she came “is specialised and 95% of staff are at least degree qualified”, suggesting an unwarranted assumption that someone with a disability or mental illness could not have a university degree. There were a number of comments that mentioned the problem of focusing on an individual’s disability as opposed to a specific ability.

Employers being unaware of the assistance that is available to them is cited as a barrier. Many seem unaware that reasonable workplace adjustments, for example, qualify for government assistance, a view supported by the responses to question 8 which revealed that 69 percent of respondents either received no government assistance (34%) or didn’t know whether any government assistance was available (35%).

Another barrier mentioned is the lack of role models and publicly available success stories of people with a disability or mental illness who are doing a productive day’s work in accordance with the job description without restrictions on what they can and can’t do.

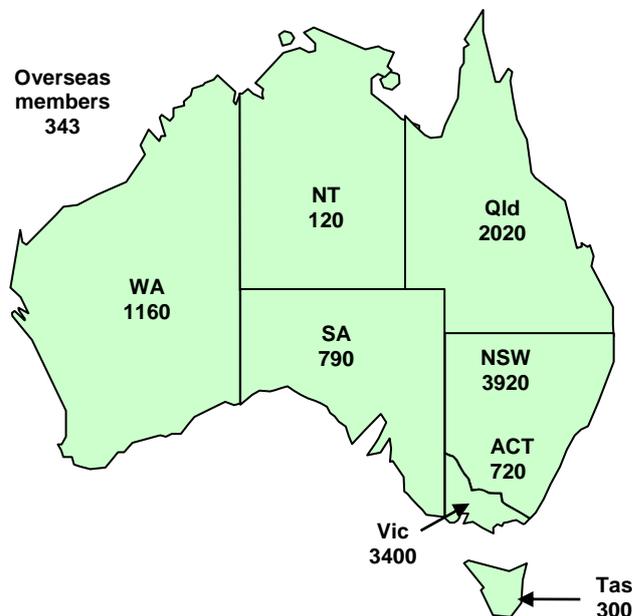
## ABOUT AHRI

The Australian Human Resources Institute (AHRI) is the only association dedicated to the representation of human resource and people management professionals in Australia. AHRI has a financial membership of approximately 13,000 and a broader stakeholder base in the order of 25,000.

More than 10,000 AHRI members and professionals across the nation attend seminars and other events conducted by the Institute each year. Topics covered at AHRI events include workplace relations, occupational health & safety, training and development, recruitment and retention, remuneration and benefits, HR information systems, job design and international people management.

AHRI has a presence in each state and territory as shown below -

### AHRI members by state and territory (as at February 2008)



Institute members occupy positions as HR and people managers within the top 100 companies and within small-to-medium enterprises. AHRI members also include small and single-person consultancies as well as practitioners from large consulting and law firms, in addition to academics from a range of institutions and related disciplines. AHRI's governance structure is that of a not-for-profit entity owned by a consortium of members. It is an independent organisation overseen by a board with representation from business, government and the elected membership in the states and territories.

AHRI has a strong international presence, being the only Australian organisation recognised by the World Federation of Personnel Management Associations. The AHRI National President sits on the board of the World Federation as an Asia Pacific member. The board includes representatives from our counterparts in the USA and the UK, the two largest HR institutes in the world, in addition to countries such as Singapore, Canada and the Philippines. AHRI has also been successful in winning a major tender for the Dubai government and is currently training 400 of their employees using Australian HR best practice frameworks.

The annual AHRI Convention is the peak HR and people management event in Australia. It attracts first-rate international speakers of the order of Jim Collins, Gary Hamel and Kjell Nordstrom, in addition to eminent Australians such as Paul Keating, Geoffrey Blainey, Janet Holmes a Court, Ian Harper and Ita Buttrose. Keynote overseas speakers at the 2008 AHRI National Convention include Lynda Gratton, Lyn

Heward, Daniel Pink and Allan Pease, as well as Mick Keelty, Ian Kiernan and Christine Nixon from Australia. The AHRI Convention attracts in the order of 3000 attendees annually. AHRI also conducts annual awards for excellence in people management which in 2006 and 2007 included an Innovation Award co-sponsored by the Australian Government.

Through the auspices of AHRI, Australia recently won a mandate from the Board of the World Federation of Personnel Management Associations, meeting in London, to host the World HR Congress. AHRI is at present selecting a city to stage that event and will confirm its selection with the WFPMA in September.

AHRI conducts formal education and, since the establishment of a national HR accreditation system in 2004, AHRI accredits HR-related courses in Australian universities. The institute also runs specialist professional development seminar events in all states and territories that attract in the order of 4000 attendees during the course of a year.

AHRI disseminates information to members through its highly regarded *hrmonthly* magazine, the refereed *Asia Pacific Journal of Human Resources*, and a fortnightly *e-News*.

In recent times, AHRI has conducted research either independently or jointly in a number of areas. In 2007 AHRI commissioned Deakin University to conduct longitudinal research using the AHRI database to better inform members and the general public about the impact of the then Work Choices legislation within Australian workplaces. Despite some resistance within Government to the commissioning of that research project, we persisted and a report of the first findings of the study was released in August 2007 and received considerable nationwide media attention.

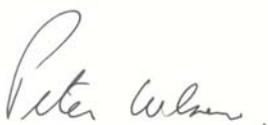
AHRI also participated in an international HR competency study with the University of Michigan in 2007. Approximately 1200 AHRI members contributed to that research conducted by Professors Dave Ulrich and Wayne Brockbank, which resulted in AHRI's model of professional excellence which now guides the development of the institute's education offerings and other intellectual property.

Through undertaking other research, notably AHRI's quarterly *HRpulse* surveys, the Institute is fully conscious that the business expectations being placed on HR practitioners are increasingly demanding. Accordingly AHRI is continuing its efforts to lift the skill level of the profession and, where gaps emerge, provides seminars and professional development activities to improve the knowledge base and the standing of the profession in business.

As one of the professions central in the delivery of solutions to the economic and social inclusion agenda of the Federal Government, AHRI is pleased to make this submission on the Mental Health and Disability Employment Strategy

AHRI looks forward to the opportunity, as appropriate, to further discuss with the Government the Strategy.

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