

# A sense of contentment

## Interview with Dame Carol Black

**Anna Ryland**  
British Safety Council

Dame Carol Black has been a senior policy advisor on work and health to three British governments, as well as a passionate campaigner for enabling people with health conditions to return to work. She was the driving force behind two of the most influential reports that have shaped the current agenda of health in the workplace: *Working for Healthier Tomorrow* (2008) and *Health at work – an independent review of sickness absence* (2011).

She will be a keynote speaker at our annual conference on 5 October (p41).



### What has been the impact of those reports

I believe that my work has changed the visibility and prominence of a topic which crucially affects the health of our economy and society. My 2008 report was a fairly high-level review, bringing relevant key influences together for the first time and giving a very clear picture of the barriers to people being healthy and in work. It addressed everyone who could change that agenda: GPs, occupational and other health professionals, as well as employers and HR specialists, trade unions and Government. It set the direction of travel and recommended that we get rid of the sick note and have a new medical certificate called the Fit Note, to be in electronic form.

It recommended early intervention as an essential component of encouraging return to work. The early intervention pilots paved the way for the later national Fit for Work Service that emerged from my second report with David Frost, which took an in-depth look at sickness absence. In this report we explored in much greater detail the reasons why people were not in work.

Our conclusions led us to recommend a national occupational health-centred intervention service. We were particularly keen to help the 75% of workers, largely in small or medium-sized companies, who currently have no access to occupational health services. We also recommended that employers be incentivised to help their employees with vocational rehabilitation interventions. Government was also asked to look in much greater detail at the different levels of sickness absence in the public and private sectors. Both reports continued the same theme, but they were prepared at a different level of detail.

### What were the most lasting aspects of these reports

They have changed the environment. They started a journey which is still continuing. We now have a new medical certificate in an electronic format. The challenge is to convince the medical world to adopt it since research suggests that only about 15% of GPs use it fully. It's too early to say whether the Fit for Work service will have the effect we envisaged, but the

government is looking to see how it can maximise its effect. Some other things that came out of my first review were very useful, like the Council for Work and Health, a multi-disciplinary council doing good work and campaigning. There was also a call for occupational health professionals to develop their specialty to suit the modern world of work, and they are following our recommendation.

Overall, employers have responded extremely well, having realised that they can boost their bottom line by improving the health and wellbeing of their staff. Originally, this issue was unfortunately perceived as soft and fluffy. We need to demonstrate to employers that having a healthy and well workforce will lead to better productivity.

**More than 30% of employees in Britain are over 50 years' old, 23% are over 60 and this figure is set to rise to 31% by 2020. You have said that since people live longer, they should work longer. Some would argue that their professional lives are very stressful and wish to retire relatively young, while still in good health.**

### What solutions would you recommend to this dilemma

We are living longer; if we're expecting a welfare state to support us, then a significant proportion of the population has to work to pay for those people who can't be in work. It is not unreasonable to think that people need to be well enough to work for longer, assuming we wish to continue our present societal arrangements. If people are stressed, there is often something wrong with the place where they're working: something wrong with the management of that workplace. It's not a problem for the government but for employers, who should not be providing bad jobs that leave people so stressed that they don't want to be at work.

There are many ways of making work good work, for example giving people more flexibility about their working pattern. Some good companies are already doing this, and some of their employees over 65 work part-time. I feel very strongly about developing a workforce capable and wanting to work longer. If we want employees to be well



Carol Black at Newnham College, Cambridge.

enough, both mentally and physically, to work beyond 67, then we need to start when they're young, even at school.

It's no use telling somebody at the age of 62, "you should be fitter and I want you to work to 72". That is after the horse has bolted. An early start should enable young people to become sustainable workers, and acquire a good lifestyle that will serve them well later on. As individuals progress through their working lives, employers need to be willing to upskill them or, if necessary, change their skill set. Flexibility about working hours and place of work is ever more important. This approach requires employers and employees not to be frightened of change.

**Health in the workplace. Whose job is it: employers, or employees, should it be a shared responsibility**

I think it's shared, but if employers would like to see greater productivity and greater engagement from their staff, then they need to create an environment in which employees can flourish. It needs to be a place with positive mental health, not somewhere where people feel stressed, anxious and disengaged. This starts at the top with the chief executive, who needs to set an example and not just tick a box and say, "of course, it's alright for

you to create a healthy workplace". CEOs need to be part of the creation of good workplaces where people feel engaged. I think you have to get the board engaged too, having somebody responsible for reporting to the board about the health and wellbeing of staff. All line managers should be trained in people management, including mental health awareness. Companies could have mental health first aiders, i.e. peer to peer support, or decide to do mindfulness, or to create spaces where people can go and relax for a few minutes when stressed.

**Wellbeing at work has become a fashionable concept. Larger companies have introduced initiatives, such as subsidised meals, fresh fruit, or bicycle schemes.**

**Do these initiatives help to advance the health at work agenda**

First of all, I don't think that fresh fruit and bicycle schemes are enough by themselves. They are not key to people's wellbeing. What is crucial to people's wellbeing is whether they have control of their work, whether they are valued, trust their employer and are listened to. It is nice to put fresh fruit out, it is very nice to have a bicycle scheme, but if

that's all you do, you will never embed wellbeing in your company.

People can be physically healthy and have no sense of wellbeing, and can be physically unhealthy – suffer from, for example, rheumatoid arthritis or diabetes – and still have a sense of wellbeing. For me, wellbeing is a sense of contentment that is often associated with good health, but not always. Every company must think about 'total health'. It combines conventional health and safety, occupational health, and the promotion of health and wellbeing. If companies don't supply the whole package, the things that will usually suffer and drop off are wellbeing and the promotion of health.

**Mental health in the workplace is quickly climbing the national agenda. New CIPD research shows that one in three people have experienced mental health issues while in employment, yet many employers don't want to talk about this.**

**What is being done at government level**

The stigma of mental health problems still exists, although to a lesser extent than before. Many people believe that their professional development and career progression will be compromised if they admit to suffering or having experienced mental health issues. One of the ways to stop this is for the chief executive and senior managers in a company to talk about it, rather than push it under the carpet. Real progress can be made if somebody fairly high up in the organisation, who has experienced mental health problems, is willing to discuss it.

The training of line managers in mental health awareness and the introduction of peer-to-peer support through mental health first-aiders can be really helpful and important. There are many good initiatives out there, for example the Mindful Employers' Charter to which employers can sign up, committing themselves to making a mentally healthy workplace. There is the



City Mental Health Alliance between big companies and organisations in the City of London, which have pledged to talk about mental health, develop toolkits and collect data in order to create positive mental health.

You have been a policy advisor on work and health to three governments.

### **Q To what extent have government policies been successful in bringing about positive change in this area**

All three governments have been travelling in a similar direction, which is to have as many people as possible healthy and in work. They have delivered this in somewhat different ways. Very pleasingly the present government has recently formed a new Work and Health Unit, which is a partnership between several government bodies led by the Department of Work and Pensions and the Department of Health.



As individuals progress through their working lives, employers need to be willing to upskill them or if necessary change their skill set. Flexibility about working hours and place of work is ever more important. This approach requires people not to be frightened of change



Among the most significant developments were the Fit Note, early intervention schemes, the Council for Work and Health, DWP's efforts to engage employers in the health and wellbeing of their workforce, support for mental health in the workplace and policies to extend working lives.

### **Q What will the employer's role be in 10-20 years' time in relation to worker health**

Truly modern employers will provide the environment that creates good work and the opportunity for people to be healthy and actively participate in that workplace. They will understand what good work and good workplaces are, and respond to the changing world of work.

**Dame Carol Black is Principal of Newnham College, Cambridge, one of the few remaining single-sex higher education institutions in the UK. On the morning of our meeting in Cambridge at the end of June, she presided over the first of two graduation ceremonies.**

### **Q What advice would you give to your female students who are about to begin their professional lives**

You have to be able to build resilience, to take failure, brush yourself down and keep going. Almost everybody I know has had really bleak moments, so your ability to be resilient, prepared to take a risk, speak up and have a go, is crucially important. Men have a go, they take risks and if they fail at the first attempt, they just move on to the next thing. This is the attitude a woman needs to adopt to be successful. Since 47% of the jobs in this country are done by women, it is no longer a man's world.

Before donning the Principal's velvet beret and scarlet gown once again, and dashing out to the afternoon graduation ceremony, Carol confessed:

I have seen a lot of human misery and suffering in my work. That's why every day before I go to bed, I want to think that there's been something, however small, that day that would make me glad to be alive.

### **CIPD report. Focus on mental health in the workplace 2016**

[tinyurl.com/h882xzm](http://tinyurl.com/h882xzm)



Total health combines conventional health and safety, occupational health, and the promotion of wellbeing. Photograph: iStock/Dean Mitchell

## **Carol Black – career landmarks**

- **1959** Read history at Bristol University
- **1963** Gained a Diploma in Medical Social Work
- **1964** Voluntary service overseas (West Pacific)
- **1970** Graduated in medicine from Bristol University
- **1981** Became a consultant rheumatologist at West Middlesex Hospital, London
- **1989** Moved to an academic post at the Royal Free Hospital, London, establishing an international centre for research on connective tissue diseases including scleroderma
- **2000** Became medical director of the Royal Free Hospital
- **2002** Became president of the Royal College of Physicians and received a CBE for her clinical and research work
- **2005** Received a DBE for services to medicine
- **2006** Appointed national director for Health and Work
- **2008** Authored the *Working for Healthier Tomorrow* report
- **2012** Co-authored *Health at work – an independent review of sickness absence* with David Frost
- **2012** Became Principal of Newnham College Cambridge
- **2015** Asked by the PM to conduct a study into the impact of addiction to drugs or alcohol, and obesity on employment and sickness absence and the system of health-related benefits.