Mental Health, Accommodations, and Leaves of Absence in Academia

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PURPOSE

The purpose of this study was to explore how academic staff manage mental illhealth and whether they request or receive workplace accommodations or take leaves of absence.

BACKGROUND

People with mental ill-health are often reluctant to ask for accommodations or leaves of absence because of the associated stigma (McDonald et al., 2011). Instead, it is likely that these workers have high rates of presenteeism, which can be costly to employers (Cooper & Dewe, 2008). In an academic context, faculty members have reported high levels of stress, anxiety, and other mental health issues (Kinman, 2001; Winefield et al., 2013). Preliminary evidence indicates that academic staff are unlikely to take leaves of absence (Mantler et al., 2019) but little is known about when and how they receive workplace accommodations or negotiate leaves of absence.

METHOD AND PARTICIPANTS

- Part of research program examining leaves of absence and return-to-work for professional workers in Canada
- Mixed methods study from Nov 2020 to July 2021
- Survey responses from 333 academics working in Canadian universities
- Interviews with 33 academics and 18 stakeholders
- Mean age = 49.4 (SD = 11.7); 73% women
- 57% tenured/permanent, 17% tenure-track, 26% contract

PRESENTEEISM AND LEAVES OF ABSENCE

 Based on the Stanford Presenteeism Scale, which assesses presenteeism as lost productivity, 91% of participants indicated that their mental health had a negative impact on their work productivity.

"I was still functioning. I was still teaching, probably not well. I had let all kinds of contractual obligations go." Participant 4

 Of the 218 participants who indicated they had a mental health issue prior to the pandemic, only 23% took a leave.





Mental Health Issues Over Course of Career



Anxiety (35%)

Psychological distress (28%)

Burnout (22%)

Depression (13%)

"You're evaluated by your peers and your colleagues constantly... there's not a lot of other jobs where you're constantly under the magnifying glass in this way. Stakeholder 15

"It never feels like you are at the end of your to-do list." Participant 5

Key Sources of Work Stress

Heavy Workload & demands (67%)



Digital Stress (31%)



Supervisors Colleagues

"Have I ever taken a leave of

absence? No. Should I have taken a

leave of absence? Solid chance, Yes."

Participant 2

Poor Relations with:

Leaves of Absence

Common reasons for not taking a leave of absence:



- Did not think it was warranted
- Concerns about professional stigma
- Concerns about negative impact on
- Worry about giving extra work to colleagues and guilt (25%)



Academics rarely take leaves of absence because they tend to self-manage

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WORK ACCOMMODATIONS

Formal accommodations-

Of the 218 people who experienced mental health issues

- 41 requested workplace accommodations
- only 25 received an accommodation

"The most contentious piece of an accommodation is getting reasonable medical that actually articulates what they can and cannot do. There's a lack of understanding for what an academic's job actually is." Stakeholder 15

Informal accommodations –

To manage their mental ill-health

- 55% of participants informally made changes to the way they worked
- mostly by reducing the amount of work and using their vacation time

"Yeah, so I took an informal leave of absence, when [partner] was sick, I was off for a few weeks. I wasn't teaching during that time. So that was a fairly easy thing to do." Participant 6

DISCUSSION

This study provides insight into the experiences of academics with mental illhealth. It is rare for academics to take leaves of absence because they are concerned about professional stigma, and they worry that there is no one else to take on their work as their colleagues are equally overwhelmed. It is even more rare that academics ask for work accommodations for mental ill-health, and when they do, they do not always receive them. Instead, academics change the way they work with the result of presenteeism and high rates of impaired productivity that can be hidden because of the relative autonomy of academics. The reduced productivity due to presenteeism, however, may have long term career consequences.

CONCLUSION

Universities need to develop appropriate, and perhaps creative, workplace accommodations that allow academics with mental ill-health to continue working before a crisis occurs. Further, the stigma related to taking a leave of absence for mental ill-health needs to be addressed.

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