Understanding Mental Health and Employment in Context

Annie Irvine
Ben Geiger

CONTENTS

RESEARCH PROJECT SUMMARY

Why did we do this project?

Many people will experience mental health problems at some time in their life. It is important to understand how mental health problems affect people's ability to work, and what helps to keep people connected with employment during times of poor mental health. This research project explored the relationships between people's work and mental health. We asked people to tell us about their experiences of work throughout their whole life, not just the times when they were unwell. This 'life story' approach helped us to understand the links between mental health and work in the context of people's wider life experiences.

Lots of research has already been done on how mental health problems affect people at work. There are also many studies of what helps people get back into employment when they have experienced mental health problems. That research is important – it has improved understanding of what helps people stay in or get back to employment when they have been unwell. But at the same time, government programmes designed to help people with mental health problems to move into work have often struggled to make much impact. More and more people are claiming out-of-work benefits because of mental health. Something is still not working.

We wondered if this might be because research projects and government programmes are focusing too closely on the time when people have *already* become unwell. By this point mental health problems are seen as the main challenge; people's difficulties staying in or getting back to work are looked at only in terms of their mental health. Mental health problems become 'the main story' and are seen as the driving factor in people's difficulties finding or staying in work.

In this project, we took a different approach to exploring the relationship between mental health and employment. Instead of only focusing on the times when people were unwell, we wanted to understand mental health and work within the broader context of people's *whole lives*. People do not usually start out in life with mental health problems and there are many things that shape working lives over time, both *before* and *after* experiences of mental ill health. Our project aimed to look at this bigger picture, to understand mental health *in context*.

To do this, we invited people who had experience of mental health problems to tell the story of their *whole working life*, starting from their very first job, and describing every job they had had over the years, right up to the present time. We asked people how they had found each job, what it was like, why they left each job and what happed in any gaps between jobs. We also listened to details of other events that were taking place in people's lives, alongside jobs and job changes. Many people talked about their early life experiences, including the events and circumstances that had

shaped their journeys through education, before they even entered the world of work.

By taking this 'whole life' approach, we could see that lots of different things shaped how people's working lives unfolded over time. Mental health was just one factor among many things that created barriers to getting into work and staying in work. This brief report presents the main findings of the research and key messages for policymakers and employers to consider.

KEY MESSAGES

- **By listening to the whole story of people's working lives, it is clear that a wide range of life experiences affect people's ability to find and stay in work. This includes difficult events during childhood, disruptions to education, family caring roles, relationship breakdowns, and experiences of violence and abuse.**

- **For many people, these life experiences are already putting up barriers to work, long before mental health problems become part of their story. These complex challenges then continue to affect people's ability to work, in combination with their experiences of mental distress.**

- **Not everybody loses their job when their mental health hits a crisis point. Access to social and financial supports, and the quality and security of people's employment, all shape the way people's work is affected when mental health difficulties arise. This wider life context makes a significant difference to employment outcomes and transitions to benefits.**

- **Social policies need to focus on the root causes of both economic inactivity and mental health challenges; these root causes are often closely connected if not identical. Whilst a focus on mental health is vitally important, welfare and employment policies need to take a much wider view on the personal, socioeconomic and structural challenges people are facing.**

- **A holistic and lifecourse approach to understanding employment barriers, which includes but goes beyond mental health, is essential for government if it is to achieve its aim of helping more people to move off benefits and into sustainable work.**

RESEARCH FINDINGS

What shapes people's employment journeys over their lifecourse?

By asking people to tell the story of their whole working lives, we could see that a wide range of life experiences affected people's ability to get into work and build a stable career path. Difficult events during childhood, disruptions to education, family caring roles, relationship breakdowns, and experiences of violence and abuse were all important factors shaping employment journeys. For many people who took part in the study, these experiences were interlinked and had compounding effects on working lives.

Many study participants had experience of caring roles. These included: being a young carer for an ill or disabled parent or grandparent, caring for an unwell sibling, becoming a teenage parent, becoming a lone parent, having a disabled child, or taking on a caring role for an elderly parent.

"My daughter was born with a rare genetic disorder … The only chance that I could possibly have to work would be if my daughter goes to residential care, but the problem is, if she's poorly or anything like that, it lands to me … I still have demands and a work wouldn't accept. I know they have to be a bit more lenient, if you're caring for somebody. But I think I would be burning the candle at both ends, because I need that time in order to look after her and look after myself." **(female, 40s)**

Lone parents found it difficult to find work that fitted around childcare commitments, especially when they did not have wider family support they could draw on.

"In high school, it was struggling because I was doing my GCSEs while I was pregnant. So it was really hard just to concentrate. So I didn't get what I needed, and it was really hard ... My daughter's dad didn't have anything to do with her. So I was a single parent, trying to find work. And it was really hard, really, really hard because there was no childcare when they were just babies. And I didn't have a family unit to be like, 'Oh, you can go see your grandparents'" **(female, 20s)**

Where caring roles arose very early in life, this impacted on people's ability to stay in school, college or university, or to achieve the educational outcomes they had hoped for. Bereavements, which sadly sometimes followed from caring roles, had a further impact on people's ability to manage in work or education.

"I did actually go to uni. I was doing a foundation year ... But my brother became really ill, so I didn't manage to complete it, and he actually died - not that year, but he died a few years later on. So it was a bit of a hard time for me ... See, I could have gone back to uni, but I didn't. And I kind of lost my confidence after I dropped out of uni." **(male, 30s)**

Several participants had experienced bullying at school or within their family. This was sometimes connected with their caring roles. Bullying could lead to poor school attendance, which impacted educational outcomes and sometimes led to early drop-out from school. Some people's parents had experienced difficulties with substance use, domestic abuse and/or mental ill health. This affected the stability and support available to people as they grew up.

"I was in a good high school to start with, but I was getting bullied because my mum was disabled ... and I didn't like that, so I stopped going to school ... When my mum passed away, I ended up living with my dad, which was very awful, because it was just constant drinking, random strangers in and out of the house, which made a massive impact on my schoolwork." **(female, 20s)**

Some study participants had spent time in care, or 'sofa surfing' with extended family or friends. There were also experiences of involvement with youth offending, truancy and school exclusion. Some people had generally struggled with formal educational settings, finding themselves often in trouble and being suspended or permanently excluded. Later in life, some had come to understand these challenges as related to undiagnosed neurodivergence.

"It always seemed to be like I could never settle. I just couldn't settle anywhere. I think it was always 'cos I did rubbish in school, I was always bullied at school. I hated school. Hated school. Never did anything really, no A levels, no GCSEs. I even walked out of my exams. I just hated school. And, I don't know, like every job, it was like I was trying to make friends. And I could never seem to bond with anybody." **(female, 50s)**

"I always was kind of in trouble for different things. I had no goals at 15 or 16 as to where I was going … Just before my exams, I got expelled from school for fighting, and I just didn't even care. I didn't care about grades. I didn't care about anything like that, so I was just like, oh, whatever … So my mental state was- I wasn't thinking about the future." **(male, 40s)**

For some people, long-term physical illness in childhood or adolescence was another factor disrupting educational experiences and early transitions into employment.

Over half of the women in the study had experienced violence and abuse. Controlling relationships, where women were subjected to financial, sexual, physical or psychological abuse, restricted their opportunities for work. Some women had been told by a partner that they were not allowed to work, or had had to leave a job when their partner blocked access to transport and childcare.

"My husband didn't want me to claim benefits, but he also didn't want me to work either … We were struggling financially but he refused point blank to let me go out and work … There was a lot of control in the marriage. So I get why he didn't want me to work, it was his way of controlling my situation. I had to ask him for money." **(female, 50s)**

"I helped him set up the business and I worked with him. I didn't get paid or anything. So I just- I helped, I did all sorts … It was all in his name, and everything. I was there helping all the time, you know. So I didn't get any money. But he gave me money for food and to pay the bills, and that's what I had, and that was it, but nothing leftover." **(female, 50s)**

"I was in a relationship with a man who did not treat me well. Unfortunately that also tied into my business, in that he wasn't just my life partner … we worked it as a family business, for all of us … And then one of the reasons I've taken time out of work recently, and had to scale back the amount of work I've done, is just the aftermath of that." **(female, 30s)**

Some participants had experienced psychological abuse or controlling behaviour from siblings or parents, which again impacted their ability to establish an independent working life and pursue their own career goals. Women spoke about the impact of prolonged abuse on their self-confidence and some felt their cognitive abilities and concentration had been affected by the experience.

Even in a stable and supportive relationship, being the main carer for a young family had curtailed some women's career pathways. Over time this became a source of frustration and could feel constraining.

"We always decided that one of us was going to be a stay-at-home parent … Yeah, it has its challenges… My story is going to involve my husband's jobs, because obviously that's the way that my life is, sort of, led around … So my employment journey, really, is on the back of everyone else's life. I fit around. I've been wanting to do something now since before Covid … and it hasn't happened." **(female, 50s)**

Caring responsibilities also shaped some fathers' working lives. For example, some male participants had changed jobs when they became parents (e.g. to travel less) or had needed to alter their working arrangements when the breakdown of a relationship meant a new division of childcare.

Marital infidelity, breakdown of close friendships or rejection by community networks sometimes had a direct effect on employment, particularly where these social ties were integrated with the work context. For example, relationship breakdowns could impact employment if people worked for the same company as their partner, house-shared with colleagues, or worked in a faith-based community organisation. There were also participants who had experienced serious industrial injury or violent physical assault by someone outside of the family, which affected their capacity for work.

People's life stories showed that disruptions to education caused by early life events, different forms of violence and abuse in adolescence and adulthood, breakdown of close relationships, and the impacts of caring roles of various types, could all *directly* shape and constrain employment pathways and opportunities. At the same time, these intertwined challenges *also* had negative impacts on people's mental health. But the stories shared by study participants showed that this combination of life experiences, circumstances and constraints meant some people were *already* facing significant disadvantages when it came to finding and keeping work, long before their employment difficulties were understood in terms of mental health problems. This wider context of people's biographical experience matters to how work and mental health interact over time.

It is vitally important to understand that, for many people, barriers to work have already started to build up long before mental health problems become the dominant focus. Long-term experiences of practical, financial, social and educational barriers all impact people's capacity for work alongside and in combination with their experience of mental distress.

Where challenging life events have disrupted early transitions into the world of work, people can get stuck in cycles of short-term, precarious work and benefit claims – struggling to get a firm foothold in the world of work. Where life challenges force people off their career pathway later in life, it can be difficult to find suitable work that fits with changed circumstances and aspirations. Mental distress is a very real barrier, but for most people it is only part of the explanation for why it is difficult to get back into employment.

If policymakers do not pay attention to this bigger picture, then attempts to help people who are experiencing mental health problems will miss significant aspects of their broader and more long-term challenges. Approaching barriers to work through a narrow focus on mental ill health is not sufficient for the many people who face multiple, complex and compounding barriers that have developed over their lifecourse.

What happens to people's employment when mental health problems arise?

For everybody who took part in this study, there had been times when mental distress affected their ability to work. However, not everybody lost their job or moved straight onto benefits when their mental health hit a crisis point. Participants' varied life stories showed that the type and quality of their employment, their relationships with employers and colleagues, employers' responses, and the wider social and financial supports around them, made a difference to what happened to people's employment when they became unwell.

The importance of job quality and job security was clear. At times of more intense mental ill health, people who had more secure employment, good relationships with their managers, and access to sick leave, were more able to stay connected to their employment and, in due course, return to their job. People who had permanent contracts and were in relatively senior roles tended to have access to long periods of paid sick leave when they were unable to be at work. Some were well-supported through periods of absence, with employers keeping in touch, providing access to counselling, and making adjustments when they returned to work.

"When I made a serious error at work, this is normally misconduct, but they said, 'Oh, we know you are in a bad position, you can't sleep at night, so you can have one week off with full pay if you want' ... I had a breakdown again this year ... I called my manager, I said I need a break because I don't feel mentally well, and he said, 'Okay.' I asked only for one day off, but he said, 'Oh, I will give you four days, no problem' ... And then he said, 'Oh, if you want, I can call our wellbeing provider,' and he arranged it." **(male, 40s)**

"They were really good actually, really compassionate ... And they tried to encourage me to keep in touch as well, which was good because I did have a catch up with my supervisor when I was off to let her know how I was doing. But she made the point to get in touch with me as well so that was good. I think when I came back, they were okay, they were understanding." **(female, 50s)**

"I'm very thankful that I've found both the business that I'm in and the people that I work for. Because some people wouldn't have been as understanding and there wouldn't be that process in place and that possibility to work from home. I mean, I probably would have lost my job by now. Simple as that. And for some places it would literally have been, well, if you can't get in the office, you can't work. Simple." **(female, 40s)**

Some people with secure employment did not return to their job after going off sick, but were on paid leave for many months, and had input from occupational health and human resource teams, before their job came to an end by mutual decision. People in these situations sometimes received a settlement which meant they had some financial security whilst they looked for another job. This could avoid or delay the need to claim benefits.

> *"I went off sick round about the autumn, and then I actually left probably a little over a year later. So, I was on sick for all of that time ... It was the following year when my contract was ended ... but in a legal way, and I was paid off as well ... It was several thousand pounds. It was a decent chunk."* **(female, 50s)**

In contrast, some people did not receive any employer support when they became very unwell. Effective support seemed to be less available for people in precarious or insecure work, or whose employers did not have well-established human resources or occupational health processes. Some people's jobs ended abruptly when they felt unable to attend work, with very limited attempts by their employer to make contact or offer support. In some cases, people did not even mention their difficulties to their employer, but simply 'quit' or 'walked away'.

> *"I don't know what happened. I had some days off and it was like depression crept up on me really bad. And I was just constantly crying and I didn't understand what was wrong with me because I've always been the sort of person to take it on the shoulders really and shove it off ... So I locked myself away, I quit my job, and then that was the start of it where I was just like going downhill ... I quit myself. It wasn't like I got fired. I quit."* **(female, 20s)**

> *"There was a text message when I was struggling with my mental health ... I think I received some slightly kind of rude text saying, 'If you don't respond to this, we will delete you,' so, effectively sack you. And then I just put back, 'I am ill' ... I had had a discussion with a nice lady on the phone, where I didn't mention that I had mental health problems - I just said that I had health issues ... They claimed that there were jobs that I didn't attend, which I know wasn't true ... I think I just said, 'Look, you need to treat people better. Because this isn't right,' and just left it at that. From a legal point of view, not a lot I can do about it ... They literally just sent my P45 through the post."* **(male, 30s)**

For some participants, there seemed to be little expectation that their employer would respond supportively. In some cases, people did not even seem to consider that it might be worth approaching their employer for support around their mental health or wider personal difficulties.

These differences show another important way in which context matters: the quality and security of people's employment shapes the way people are supported at times when mental health difficulties arise. Where people have a strong or longstanding connection to an employer, when they have positive workplace relationships, and where the employer is equipped and conscientious around human resources and occupational health processes, people may be able to stay in the workplace or return to their job when acute periods of distress have passed. Where relationships with employers are more strained or transient, it seems that less may be done to retain people in employment throughout times of difficulty.

What helps people get back into employment and what hinders?

People's experiences of trying to return to employment, after they had spent periods of time completely outside of paid work, confirmed what has been shown in many previous studies: that person-centred, flexible and holistic support, based on consistent and trusting relationships, which responds to an individual's personal career goals and goes at their own pace, is most effective.

Among those who had returned to employment after a period outside of paid work, not all had used formal services such as Jobcentre Plus or other employment support providers. Some people had found new jobs through general advertisements or word of mouth via family and friends. However, several study participants had engaged with organisations which specialised in helping people with experience of mental health problems to return to work. Positive experiences and successful employment outcomes among participants who had taken part in these programmes showed the importance of holistic, tailored, long-term and relational support. Attending peer support groups and gradually building up to paid work through voluntary roles had also been helpful for several study participants.

"I wanted to utilise my degree, otherwise it would feel like a waste. But at this point in time, it was more, sort of, just any job, I need to build my confidence, I need to be around more people … And that's why I started volunteering … And that helped me build confidence. There was a good manager there who would encourage me to recognise skills and give me chance to try different things and push me enough to stretch me but not to the point of making me feel stressed out or uncomfortable. And then through that, that's when I started looking for something more applicable to my degree." **(female, 20s)**

"Going on the employability course was the best thing I've ever done … When my keyworker first met me, I was a crying, snotty mess, because if he talked to me, I'd burst into tears, because my confidence had been knocked down that much that it just didn't matter. I was just this irrelevant person in this big world. I was a bit of a mess, to be fair. My mental health had taken a battering, I was still getting my head around my physical health … So I was really, really struggling. I was like, 'No, I'm not ready.' But he refused to give up … I kept saying, 'That's not working, I don't know what I'm going to do.' But it was through that, doing lots and lots of different courses with my keyworker, that I then set up my own organisation." **(female, 30s)**

People's experience with Jobcentre Plus was mixed. Some had had very minimal contact whilst they were on benefits, which they were glad of and felt was appropriate to their circumstances at the time. Some had been supported by helpful and compassionate Jobcentre advisers, who had connected them with valuable work preparation opportunities. Other people had less positive experiences of DWP-led programmes, or had found their courses and placements unproductive. Some felt that if they did approach Jobcentre Plus, they would be forced to take up unsuitable work-related activities. This could deter people from seeking support from the Jobcentre.

Finding the right fit

Once in work, important factors in making work sustainable included a good match between skills, preferences, the role and the working environment. Being able to work from home was essential for some people, due to anxiety in social spaces or when travelling. For people who identified as neurodivergent, a good person-job match could be especially important, as some tasks, workplace environments or management styles felt incompatible with maintaining good mental health.

Some people had not been well supported by their new employer when returning to employment after a long break from paid work. If people were expected to rapidly adjust to a new role and environment with minimal guidance or supervision, this could lead them to leave their job quickly. This experience of being unsupported could be distressing and further affect people's confidence.

For some people, making friends and 'fitting in' was very important to whether they felt able to stay in a job. Although not everybody felt this way, some participants wanted to work somewhere that felt homely, where workplace relationships felt family-like, and where people in the workplace cared for one another.

> *"If I don't find anyone that I click with, then I'll want to leave pretty fast, 'cause it's like, well what's the point? It feels horrible here. Or if I find someone who I click with, but then we clash ... So, for example, I clash with a friend at work, and then I don't want to work there anymore, 'cause I don't really want to see that person ... If I had a job where people just literally, like, console each other and just make it feel like it's another home, not a job, I feel like that'd help me go a long way."* **(male, 30s)**

> *"I kind of gave up the agency work, because I found that I didn't really like it. Everybody was, I dunno, a bit cliquey. I found it a bit difficult, going from place to place and trying to fit in with a new group of people every time. I wasn't too fond of that."* **(female, 20s)**

Feeling that it was safe to trust managers and colleagues was important, and this could be hard for people who had experienced abuse or betrayal in the past. Managers and colleagues who were supportive and friendly could help to prevent distress recurring and could help to carry people through periods of poor mental health if relapses occurred.

> *"I've built a lot of trust within these four walls of this building, and the people I'd engaged with, and people who became my bosses. And more than that, they're my friends as well. I mean there's the boundaries within the nine to five - they're my employers and that, it's always respected - but I feel I could speak to them outside of that, if there was problems that came up ... I built a lot of trust and stuff around that, and it allowed me to come off the benefit system."* **(male, 40s)**

> *"There's been times where I've felt like leaving the job, but I end up coming back ... 'Cos it's like an arm's just been cut off. Basically it's just become part of me. And when I said to the staff that I'm leaving the job, they were like, 'You can't leave the job. It's part of you. You're part of the furniture now!' ... So I'm like, 'Yeah, I can't leave the job.' So things like that have influenced me to always go back, because I enjoy that job so much ... And it's not just that; it's the people that you connect with as well. So you can connect with different supervisors, staff members, the managers ... I've made really good friends through that job as well, one that can be life best friends and stuff."* **(male, 20s)**

Working part-time was helpful for some people. This could be to keep a good balance between work and rest (preventing the recurrence of stress-related symptoms), or to accommodate childcare or other important commitments, such as faith-based practices. People who had struggled in the past with extreme levels of work-related stress found that taking on a lower-demand role and keeping clearer boundaries between home and work was helpful.

"I work part-time, and I try really hard not to get involved in work on my days off, because I need that time for my wellbeing … I do love my job, but it is very demanding and I have those four days when I do all the things that I want to do or I need to do, and that means I can keep my life in balance … I read and I potter about at home, and it might look from outside as though that's just wasting time, but to me that's the time when I just relax and look after myself really. Because I think that's been the big problem in the past, that I've tried to do too much or I've maybe masked the way I'm feeling by being busy, and that just doesn't work for me." **(female, 50s)**

However, for those who had previously enjoyed working at a more senior level, it could be difficult to adjust to a lower-status role or less stimulating work.

"You've had to take something at a much lower rate, and a certainly less responsible role, you're going back to a clerical grade from a management grade. And all of that impacts and erodes your confidence. And by nature of that, you start to then feel low mood, the insecurities come out, the negative voices come out, and it's a battle to basically try and drown those out and just stay positive and move forward … You can compare yourself to others and think, well they're riding high and at the top of their career, and yet mine's kind of at the bottom. So it's hard and I have to keep trying to ignore that, or silence it, because otherwise it'll just take me under again." **(female, 40s)**

By mid-life, some people were also managing long-term health physical conditions that limited their energy and mobility. This was not necessarily a barrier to employment but – as with mental health – it was essential to have work that was flexible, accessible and could accommodate periods of reduced capacity.

Some people in the study held more than one job at the same time. Interestingly, during periods of

poor mental health two participants had carried on going to work in one of their jobs – which they found enjoyable and fulfilling – but took time off from the other job, which was the source of their heightened stress or anxiety. This shows the critical importance of person-environment fit and the role of compatible and accommodating workplaces, when it comes to work sustainability.

Job changes can be common

Some people were in paid work throughout the research project and many moved in and out of different jobs, sometimes multiple times over the study period. Some participants made job changes voluntarily and proactively, for example, to pursue long-term career goals or if a job with more suitable hours or better pay became available. However, some people's job changes were involuntary, and the role of precarious and insecure work was again clear. Notably, several participants had experienced involuntary job loss for reasons *unrelated* to their mental health, for example, redundancies, business closures or the end of fixed-term contracts.

Barriers to work go beyond mental health

People who did not move into work at all during the course of the research project highlighted a diverse range of challenges they were facing. For some people, ongoing concerns about how work might affect their mental health were important. People needed to find work that would not make stress, anxiety or depression worse. Negative past experiences in the workplace, and concerns about employer attitudes towards mental health, could reduce people's confidence about trying work again.

However, illustrating the role of wider context, other key concerns included:

- availability and affordability of childcare
- a need for part-time or flexible work that fitted around a partner's work schedule
- finding employment that allowed a good balance between work and personal or family life
- feeling underqualified or lacking in workplace experience

- financial or logistical barriers to taking up further education or training
- access to transport, e.g. lack of a driving licence, poor local public transport links
- uncertainty about job goals and a need for more effective careers guidance
- a lack of support and feelings of pressure from Jobcentre Plus
- barriers posed by the 'benefit trap' where people were unsure that they would be better off in work

For people receiving Universal Credit or Employment and Support Allowance, financial considerations were important. People needed to be sure they would be better off in work, compared to what they received on benefits. The benefits taper and the perception that housing supplements would be lost if earnings went over a certain level could restrict the amount of work people felt able to seek.

"I'd like to have a full-time job, where I'm working like 40 hours a week or something like that ... But everyone always says- I mean my housing officer spoke to me and said just don't do anything more than 16 hours. So I think that she knows what she's talking about in terms of what's actually worth it. I haven't taken a calculator and worked it out myself, but she's not the only one. There's other people that have told me that full-time work isn't worth it here. Not worth, 'cos too much of your wage goes on the rent." **(male, 30s)**

"I've been applying for jobs like cleaning jobs, the simpler things. I think it was 16.5 hours that I was going to go for, so it doesn't fully affect our Universal Credit, so we've still got a little bit of support." **(female, 20s)**

However, for some participants, the need to find a good person-job fit was more important than the amount of money they would earn. Even if they were financially better off, some people felt

it would be extremely difficult to stay in a job that was not a good fit for them, as this would exacerbate their mental health difficulties.

Some people had struggled to access effective employability or careers guidance that could help them develop a clearer and more supported pathway towards stable employment. There were both younger and older participants who said they were not even sure what kind of work they wanted to do, or what might be suitable or possible for them at this stage in life.

"I really don't know what to go for ... A lot of my issues have been connected to frustration and feeling stuck, and not being able to find a pathway into sustainable employment – and things related to education. It's all kind of linked in a bundle." **(male, 30s)**

"I want to do something that's useful. I want to be a positive power in the community. But I don't know how to engage in that, particularly right now, I don't know. I'm not old ... I want to be out there doing something. But what it is, I don't know." **(female, 50s)**

"Since I last worked, a lot of things have changed and, you know, for me, it's quite a scary ... I don't even know what I would want to do, to be fair. I'm not one for working in a shop, I'm not as young as I used to be, my mobility is limited ... So things have changed. So yeah, it's- I don't know." **(female, 50s)**

This signals the importance of boosting the quality and availability of adult careers guidance, to help people develop a sense of 'vocational identity' and longer-term career direction. Effective careers guidance is relevant both to younger people who have had disrupted school-work transitions, and to adults who have had to respond to changes in work and personal circumstances later in life.
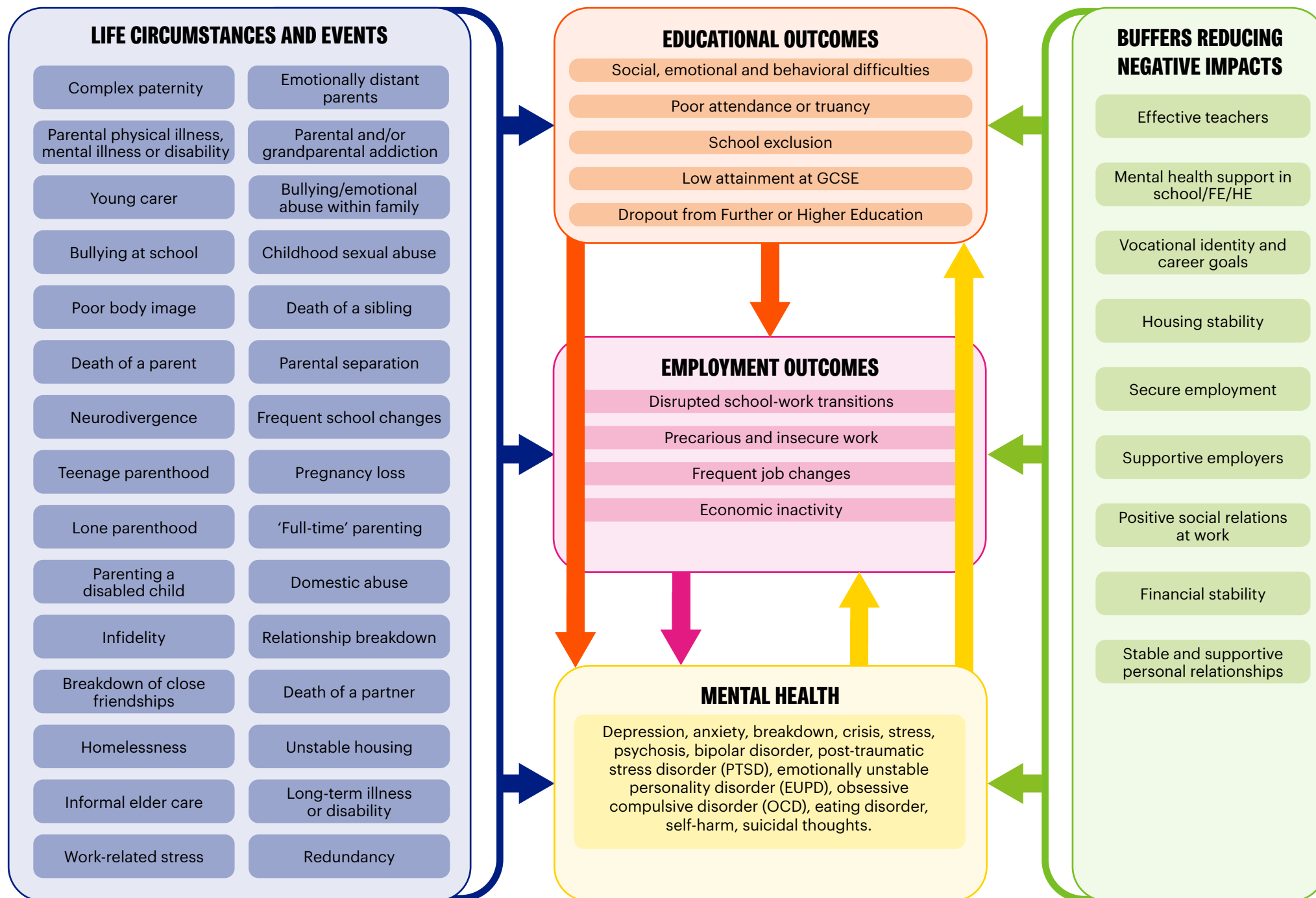
MENTAL HEALTH IN CONTEXT: A 'WHOLE LIFE' APPROACH TO UNDERSTANDING MENTAL HEALTH AND EMPLOYMENT

The life stories shared by study participants showed clearly that we need to recognise the impacts of wider life events on employment pathways and to put mental health into context. Circumstances and events across the life course impact on mental health and employment both *independently* and through their *interrelated effects*. As Figure 1 shows, circumstances and events at different stages of the lifecourse have direct impacts on educational outcomes, on employment outcomes and on mental health. There are then further two-way interactions between education, employment and mental health. To understand people's experiences, opportunities and outcomes in the labour market, we cannot look only at mental health in isolation.

Key: ➡ ➡ ➡ ➡ Impact on   ➡ Protect against

LIFE CIRCUMSTANCES AND EVENTS

Complex paternity	Emotionally distant parents
Parental physical illness, mental illness or disability	Parental and/or grandparental addiction
Young carer	Bullying/emotional abuse within family
Bullying at school	Childhood sexual abuse
Poor body image	Death of a sibling
Death of a parent	Parental separation
Neurodivergence	Frequent school changes
Teenage parenthood	Pregnancy loss
Lone parenthood	'Full-time' parenting
Parenting a disabled child	Domestic abuse
Infidelity	Relationship breakdown
Breakdown of close friendships	Death of a partner
Homelessness	Unstable housing
Informal elder care	Long-term illness or disability
Work-related stress	Redundancy

EDUCATIONAL OUTCOMES

- Social, emotional and behavioral difficulties
- Poor attendance or truancy
- School exclusion
- Low attainment at GCSE
- Dropout from Further or Higher Education

EMPLOYMENT OUTCOMES

- Disrupted school-work transitions
- Precarious and insecure work
- Frequent job changes
- Economic inactivity

MENTAL HEALTH

Depression, anxiety, breakdown, crisis, stress, psychosis, bipolar disorder, post-traumatic stress disorder (PTSD), emotionally unstable personality disorder (EUPD), obsessive compulsive disorder (OCD), eating disorder, self-harm, suicidal thoughts.

BUFFERS REDUCING NEGATIVE IMPACTS

- Effective teachers
- Mental health support in school/FE/HE
- Vocational identity and career goals
- Housing stability
- Secure employment
- Supportive employers
- Positive social relations at work
- Financial stability
- Stable and supportive personal relationships

By taking a lifestory approach, people in this study were able to tell us about numerous transitions into and out of work, including those that took place before, during and after they had begun to experience mental health problems. Their stories revealed the wide range of social, relational, economic and structural factors that shape people's employment transitions over the lifecourse. They showed how difficult childhood experiences, violence and abuse, caring roles, relationship breakdowns, and the disruptions that these can cause to education and employment, all shape early and later working lives.

Crucially, the life stories showed how these life events operate in simultaneous and complex relationship with mental health; the factors that shape people's working lives over time are often *the same set of factors* that lead to mental health problems. However, if research and policy only focus on the role of mental health problems, we miss this important context and complexity. **To design social policies that can effectively support more people to achieve sustainable working lives, we need to look at mental health in context.**

The diversity of participants' lifestories showed that different sets of life experiences can set people off on more or less stable and secure career journeys. The stories also showed how the outcomes for people's work, when they became unwell, were shaped by the security of their employment, the 'safety nets' it provided, and the quality and strength of relationships with managers and colleagues.

Early childhood experiences could sow the seeds for how employment pathways would play out over later years. Many participants had experienced multiple adverse experiences beginning in childhood and continuing to unfold throughout their adult life. For some people, early life circumstances made it very difficult to even get a first solid foothold in the world of work, long before their barriers started to be understood in terms of mental health problems. For people stuck in cycles of insecure or poor quality work, who did not feel closely attached to their employer, or who had only ever experienced short-term and transient jobs, it seemed that both *employer and employee* were less likely to take steps to prevent their connection breaking down entirely at times when mental health or other personal difficulties affected work capacity.

In contrast, people whose early life had brought fewer social, relational or economic challenges had a better chance to complete education and get established in a career. When mental health difficulties arose later in their working life, although the impact was still significant, people tended to have more steady foundations of financial security, stable housing and family support. Their employers tended to have more robust systems in place for supporting and responding to periods of mental ill health. If people did lose their jobs, these social and economic 'buffers' could avoid or reduce the amount of time people needed to spend in the benefits system.

Although these two broad depictions mask huge amounts of variation in individual participants' stories, they reflect the core message that context matters to employment outcomes, and this wider life context must be considered alongside a medical focus on mental distress. When it comes to understanding and addressing economic inactivity, this study shows that people's wider life circumstances, the pathways they have travelled from childhood to adult working age, and the personal, social and economic context this has shaped around them, all play a critical role in their employment options and outcomes when mental health problems arise.

CONCLUSIONS AND POLICY IMPLICATIONS

The government is currently seeking ways to help more people with experience of mental health problems to stay in work or to move off benefits and into employment. A focus on mental health is vitally important. But this study shows that we also need to take a much wider view on the challenges people are facing. Rather than seeing mental health problems as the only issue or assuming mental health is the main cause of people's difficulties in achieving sustainable employment, we need to recognise mental health as one of multiple interwoven factors. Policies need to address this wider range of social, structural and interpersonal factors at the same time as supporting people's mental health.

There are times in many people's lives when mental distress poses a significant barrier to work. At these times, people may need a period away from paid employment. Access to therapeutic support to manage and recover from these experiences will also be important for many. However, this study shows that supporting people to achieve fulfilling and sustainable employment over the long term needs a much broader approach than thinking of barriers only in terms of mental health and responding only with medical or psychological treatments. To understand and address barriers to sustainable employment, policies cannot consider mental ill health as a factor in isolation. Policies aiming to reduce the rise in incapacity benefits need to recognise the role played by employment structures and job security, by family lives, caring roles, education and training. Policies need to create the framework for more effective careers guidance at all ages, and a welfare system that supports rather than hinders sustainable work transitions.

Crucially, social policies need to focus on the root causes of employment and mental health challenges – often one in the same things – including inclusive education, prevention of violence and abuse, support for carers of all ages, and alleviating poverty and its many related harms. More resources need to be dedicated to providing appropriate, affordable and flexible childcare and well-functioning transport infrastructures. And there is a need to continue to encourage and support employers to provide inclusive, flexible and secure work opportunities for all.

WHO TOOK PART IN THIS RESEARCH?

Twenty-three people took part in this research. All had experience of paid work, experience of mental health difficulties, and experience of the UK benefits system. Participants included 16 women and 7 men, aged between 24 and 58 years old.

The research was carried out from February 2023 to October 2024 and involved three waves of in-depth interviews. In the first interviews, people told their stories of how their working lives had unfolded over time. The 'biographical narrative' interview approach allowed people to tell their stories of work, welfare and mental health on their own terms, in whatever way made sense to them. In the two follow-up interviews (each around 6-8 months apart), we discussed more recent changes in work, health, benefits and other life events. Almost all participants took part in all three interviews, with just two people unable to meet for a second and/or third conversation.

In this project, we used a broad definition of 'mental health problems' and people took part based on their own understanding of this term. In participants' own words, mental health problems included: depression, anxiety, breakdown, crisis, stress, psychosis, bipolar disorder, post-traumatic stress disorder (PTSD), emotionally unstable personality disorder (EUPD), obsessive compulsive disorder (OCD), bulimia, binge eating, self-harm, and thoughts or actions towards ending one's life. Some participants had experience of addiction or substance use, and some had diagnoses of ADHD and/or Autism alongside mental health problems. A small number of participants also lived with long-term physical health conditions.

During the period of the research study, some participants experienced acute episodes of distress, involving crisis intervention, psychological therapy and/or medication. Some navigated stressful events in their life, which exacerbated anxiety or depression. Others remained in generally good mental health over the study period and therefore spoke mainly about past experiences. Ongoing transitions were common; many people experienced changes in their work situation over the course of the study, for example, moving between jobs, having periods off sick, or moving between employment and benefits.

ACKNOWLEDGEMENTS