**TABLE OF CONTENTS**

Message from the National President .......................... 2
A Word on Confidentiality: ................................. 3
We Have a Problem ............................... 4
Stigma ............................................ 5
Tips for Providing Support ................................. 6
Human Rights and Mental Illness .......................... 7
Duty to Accommodate ................................. 8
  Goals of Accommodation Process ................. 8
  Types of Accommodations ................. 8
  Challenges ...................................... 9
A Word on Undue Hardship: ................................. 11
  Example of Undue Hardship ................. 11
The Process ........................................ 12
Ongoing Obligation ................................. 14
Returning to Work from a Leave .......................... 14
Resolution Passed at Canadian Council .......................... 15
Negotiating Mental Health Supports ........................ 16
  Strong Contract Language ................. 17
Complete Letter of Understanding
  Re: Mental Health/Substance Abuse ................. 24
Ideal Letter of Understanding for Health Care Workers
  Re: Recognizing the Importance of an
  Employee Assistance Program ................. 25
  Health & Safety View ................. 26
  Human Rights View ................. 27
Action Plan ........................................ 28
Know Your Resources: ................................. 30
Important Contacts: ................................. 31
Message from the National President

Dear member,

Thank you for engaging in the conversation around mental health. Unifor is proud to be a force for ending stigma and providing support to those living with addiction, mental illness, and personal crises.

The union is committed to providing its leadership, staff, and members with training to assist those who are struggling. Every day, we also advocate for better systemic supports through employer initiatives and public policies to both prevent and address the root causes of mental health issues.

Unions have always worked to protect mental health by addressing underlying causes of stress and anxiety caused by unsafe workplaces, precarious employment, and unfair wages. Now, we are broadening these discussions and making mental health a priority at bargaining tables across the country and making meaningful improvements for members.

Your mental health matters. Together, we can help each other through our struggles and connect workers and their families to the supports they need.

You are not alone.

In solidarity,

Lana Payne, National President
A Word on Confidentiality:

Confidentiality is everything. It means not passing along or divulging anything shared with you in trust by another person. Members need to know that they can trust their representatives and the process should they decide to talk to you.

This means that anything that is shared with you needs to be held in the strictest confidence, except as legally required or where an intention to cause harm to self or others has been disclosed.
We Have a Problem

1 in 3 people in Canada will be affected by a mental illness or injury, either directly or indirectly through family, friends or work colleagues.

1 in 5 Canadians will experience a mental health or addiction problem.

Mental illness, including addiction, is a disease – not a choice.

Studies show that trauma has been found to be the central issue for people with mental unwellness, addiction, substance abuse and co-occurring disorders.

“If not for the continuous support and encouragement from my union leadership and membership, my issues and addictions would have taken me down a dark and tragic path. I am forever grateful.”
Stigma refers to attitudes and beliefs that lead people to reject, avoid, or fear those they perceive as being different.

Negative attitudes (prejudice) and negative responses (discrimination) can make a person feel unwanted and shamed (stigmatized).

According to the Canadian Mental Health Association, 60% of people with a mental illness will not seek help due to the stigma of being labelled mentally ill.

Stigma surrounding mental illness and mental unwellness can interact with other forms of stigma related to race, gender, disAbility and sexuality which can intensify the experiences and/or create barriers to accessing help for people of colour, women, those with a disAbility or members of the indigenous or LGBTQ communities.

To eliminate stigma:

- Acknowledge the prevalence of co-occurring substance use and mental health problems.
- Imagine “walking in the shoes” of a person who faces stigma.
- Be aware of the labels you use, your attitudes and judgements.
- Speak up when you hear or read remarks that fuel stigma.

**noun**

1. A mark of disgrace or infamy; a stain or reproach, as on one’s reputation.
**Tips for Providing Support**

Providing support can be difficult and it may be hard to understand why someone is acting the way they are.

The following are some general tips:

- Remind yourself that the illness is the problem – the behaviour is not their fault.
- Be patient.
- Be empathetic (really feeling the person’s experience) not sympathetic (just feeling sorry for the person).
- Listen and offer support, but avoid pushing advice that has not been requested.
- Union representatives are referral agents and not counselors. Women’s Advocates and Racial Justice Advocates are trained to guide women and/or racialized workers in accessing community and workplace resources.
- The goal is to remove fear and walk the person through the process. We do not want our members to feel alone and having to seek resources on their own.
- Set boundaries so that you are not hindering your own mental health. Take care of yourself too!
- Do not invest more into someone’s recovery than they do.

> “Members need to know that they are not alone.”

Our workplaces are not immune to the effects of drug abuse and addiction. It is important that medications like Naloxone be readily accessible in a workplace and that workers are trained in the simple task of administering these medications which can reverse the effects of an opioid overdose.
Human Rights and Mental Illness

In Canada, both Unions and Employers are required to make every reasonable effort short of undue hardship, to accommodate an employee who falls under a protected ground who can claim the legal protections afforded by human rights legislation.

DisAbility is a protected ground.

DisAbilities come in many forms; they can be visible or invisible. It is important to note that mental illness or injury, and addiction fall under the umbrella of disability.

People can use human rights legislation to protect themselves against harassment or discrimination based on the prohibited ground of disability, which includes both physical and mental disability.
Duty to Accommodate

Employers have a duty to accommodate. Accommodation means removing barriers to allow for equal participation and equal access to the workplace.

Three key principles drive the duty to accommodate:

- Respect for dignity (this is done by proper communication and respecting their confidentiality);
- Individualization (no two people are alike and no two accommodations have to be alike);
- Integration and full participation.

Goals of Accommodation Process

The member you are assisting may need accommodation in the workplace so they can continue to do their job. Some people need permanent accommodations, but many people with mental health challenges will only need temporary measures to support them to stay at work or transition back to employment after a leave. It’s also important to remember that mental illness is often episodic. People with depression do not feel sad all the time, just as people with other mental illnesses don’t always experience symptoms. Some members with mental illness may need accommodation for a short period of time and then not need it again for years.

Types of Accommodations

The most commonly used accommodations for people with mental health challenges include the following:

Flexible Scheduling

- Flexibility in the start or end of working hours to accommodate effects of medication or for medical appointments.
- Part-time work (which can be used to return a worker to full-time employment).
- More frequent breaks.
Changes in Supervision

- Modifying the way instructions and feedback are given. For example, written instructions may help an employee focus on tasks.
- Having weekly meetings between the supervisor and employee may help to deal with problems before they become serious.

Modifying Job Duties

- Exchanging minor tasks with other employees.

Changes in Training

- Allowing the person to attend training courses that are individualized.
- Allowing extra time to learn tasks.

Please note that other accommodation measures may be appropriate depending on individual need.

Challenges

Some additional challenges to providing accommodation to individuals with mental illness or addiction:

- Often mental and psychological disorders are invisible;
- Employees needing the accommodation may not communicate the need for an accommodation, as denial or a lack of understanding of their needs is common for people experiencing mental health challenges;
- The stigma around mental/psychological and substance use disorder and dependency often results in individuals not coming forward until the very last moment, including after termination: this does not absolve the employer of the duty to accommodate;
- Addiction and substance use disorders and dependencies are often falsely seen as a choice by employers and co-workers.

Although the above issues can make accommodating an individual more challenging, they in no way reduce the employer’s duty to accommodate, but rather heighten the responsibility to properly communicate with and assist the individual seeking accommodation.
The Union’s responsibility as described by the Canadian Human Rights Commission is to:

- Model positive attitudes toward accommodations;
- Actively participate in the accommodation process; and
- Support and suggest reasonable accommodation requests, unless it would create undue hardship.

"My family was sinking, slowly and quickly all at once, each of us trying to help the other through this painful time. I turned to the Union, I didn't even know how to ask for help, but my Union Rep knew how to listen, they connected me to the resources we needed. Unifor empowers its membership. This is what makes it so powerful."
A Word on Undue Hardship:

Though the primary duty for accommodation is the Employer’s, the union must not impede reasonable efforts to accommodate a worker and cannot formulate work rules that would be discriminatory.

Accommodating an employee with a mental illness or substance use disorder engages the same process as a request for accommodation based on any other human rights ground.

Example of Undue Hardship

The point of undue hardship is reached when all reasonable means of accommodation are exhausted and only unsafe, unreasonable or impractical options remain and where an individual cannot perform the "core" duties of their job.

Example: A relatively minor risk that an employee is prepared to assume will not constitute undue hardship. Serious risk to the health and safety of others will constitute undue hardship. When a request for accommodation involves a cost, that cost would have to substantially affect the viability of the organization for the accommodation to be considered undue hardship.

When an individual has already been accommodated for treatment due to addiction, a second request for accommodation after relapse is not generally considered undue hardship. Arbitrators accept that there is a high probability of relapse for those in recovery.

In the same sense, arbitrators and judges often determine that it is not undue hardship to keep an employee after a violation of a “last chance letter” (a.k.a. return to work letter related to mental illness or addiction). The rationale is that actions by someone who has a mental illness or addiction are often beyond their control (i.e. outbursts or relapse).

If it is accepted that a member’s actions were beyond their control, we should fight to have any discipline be removed from their record.
The Process

An employee may approach a member of the Union or management, and request some type of accommodation.

If the employee approaches the union it is important to:

• Ensure that the individual knows confidentiality will be respected;
• Make sure they understand that coming to you was the right thing to do and we will do our best to assist them;
• Refer the employee to any EFAP benefit there may be in the Collective Agreement;
• Explain to the individual that the accommodation process has to involve the Employer and that the Employer will be reminded of the need of confidentiality; and
• Encourage the member to see a doctor who can determine if they need some time off, or accommodations so they can keep doing their job: they will require medical documentation to trigger the accommodation request;
• Make sure the individual is ready for you to approach the Employer.

Approaching the Individual

Even when an employee has not come to the Union or Management for an accommodation there may be instances where you may feel there needs to be a discussion with the member, usually brought on by:

• Concerns raised by other members;
• Concerns raised by the employer; or
• Issues that were highlighted during a discipline or grievance investigation.

It is important when approaching the individual that you:

• Keep their concerns confined to the workplace issue;
• Ensure confidentiality in the discussion;
• Provide information on EFAP and remind the individual that EFAP is also confidential. If they do not have an EFAP program, refer to Know Your Resources in this book to determine where to find community resources;
• Let the person know that there could be an accommodation if needed; and
• Try to set up a follow-up meeting.

Do not make accusations or try to diagnose the problem or issue even if you think you know what it is.

Co-workers

Often co-workers will come to the Union with questions or concerns about someone else’s accommodation. They may have legitimate concerns about safety or they may have illegitimate concerns based on gossip, stigma or jealousy.

The key to communication with other members is to remember to maintain the confidentiality of the individual and remind others all individuals are entitled by law to this privacy. Period.

Since the member may be confronted with these same concerns or questions, ask them how they would like these issues addressed.

Approaching the Employer

When approaching the Employer it is important to:

• Go directly to the Human Resource person who has the responsibility and authority to make decisions (only tell people who need to know, when they need to know);

• In some cases, the employer may have to be reminded of their legal responsibility to provide accommodation;

• The purpose of the request is to support the member, and a lack of information could hamper the accommodation process: this means that it may be necessary to provide supporting documentation from a doctor or other professional;

• Request only information that is relevant to the work situation so that appropriate plans for accommodation can be made: it is not necessary to disclose to the employer the nature or history of the illness;

• Ask the employee what they want.
Ongoing Obligation

The duty to accommodate is ongoing. It does not stop the day that a worker’s accommodation is denied or approved. Things are subject to change: the accommodation request can change over time (for example: someone who may have only been able to work 4 hour shifts due to a mental illness, may now be able to work 6 hours). In addition to that, workplaces change. For example: growing workplaces can have more opportunities, jobs and/or shifts available. Retirements can also provide openings.

We want to make sure that members’ names remain on the seniority list even if there is no available work or sick benefits available to them. Their names on the seniority list could have value in the future.

Returning to Work From a Leave

It is important that members know they have the union’s support. Each accommodation is specific to the needs of the individual. The best way to ensure a member feels supported is to ask the member what they need from you.
Resolution Passed at Canadian Council

At the first Unifor Convention, delegates recognized the importance of bargaining these issues. Delegates voted overwhelmingly in support.

Resolution No. 5

Union Employee and Family Assistance or Abuse Programs

WHEREAS Unifor recognizes union members and members of their families can be troubled by a wide range of issues including but not limited to depression and other mental health issues, grief over personal loss, family break-down, debt, effects of violence or bullying, addiction or substance dependency, behaviour-based addictions and other issues of a similar nature; and

WHEREAS Unifor categorically rejects the notion that such issues are so-called “self-inflicted injuries”; and

WHEREAS Unifor recognizes that a troubled worker or family member is far more likely to make a recovery and build a new life if help is available from the employer and the union and if such help respects the dignity and confidentiality of the individual; and

WHEREAS Unifor recognizes the constructive, non-punitive and proactive (early intervention) union-based Employee and Family Assistance or Substance Abuse Programs have proven their worth many, many times over in terms of lives saved and families assisted; and

THEREFORE BE IT RESOLVED Unifor commits to bargain in every one of its collective agreements, minimum protective or non-discrimination language with respect to employee and family assistance issues and where bargaining strength makes it possible to do so, will attempt to bargain additional language that builds union-based EFAP programs.

Respectfully Submitted By:
Local 88

Amended per Canadian Council Resolutions Committee

/bmklope343
Negotiating Mental Health Supports

When looking to support a member with mental health issues, it is important that you look at the whole collective agreement. Most collective agreements already have language protecting against discrimination and even if the collective agreement is silent, the Human Rights Act or Code contains these protections. However, we want to ensure that we bargain the language in because governments change.

It is important that we approach collective bargaining from a human rights and mental health lens. There is always room for improvement and most agreements do not have sufficient language and benefits because the need for mental health and addiction is growing.

Let's consider the sections where you can find provisions that protect and assist members:

Protection:

- Discrimination/Anti-Harassment/Human Rights language
- Health and Safety language
- Violence against Women language
- Grievance Procedure

Assistance:

- Employee Family Assistance Benefits
- Health Benefits
- Women’s Advocate
- Modified work language
- Leaves of absence: Bereavement, sick leave
- Short Term DisAbility benefits (weekly indemnity)
- Long Term DisAbility benefits

Employment Standards legislation, which varies in every jurisdiction, can contain minimum protections for workers. Take, for example, sick leave days. In most jurisdictions these protections are enforceable even if not in the collective agreement. Workers also have access to Employment Insurance sick leave benefits.
In addition to the above, every collective agreement should have provisions that provide protection and assistance.

The key to negotiating good mental health and addiction language is taking a look at what a workplace currently has in place. If it’s not in the agreement (i.e. policies or third party counselling that is provided) then put it in the agreement.

**Strong Contract Language Ensures:**

1. **Members are not punished.** Mental illness and addiction are not the fault of the worker and should be dealt with in a non-punitive manner.

   *A member, who comes to the local with a problem, may be coming at the most desperate time in their life. For that member, at that moment in time, the EFAP contract language is the most important part of the collective agreement.*

**Model language:**

*The Union and the Company jointly recognize mental illness, addiction disorders and substance abuse are not the fault of the individual needing help and can be successfully treated. It is in the best interest of the employee, the Union and the Company to encourage early intervention and treatment. Such assistance includes, but is not limited to, identification of the problem at the earliest stages, motivating the individual to obtain help, referral of the individual to appropriate treatment and rehabilitation facilities and continuing education of employees, the Union and management representatives to recognize and deal constructively with such circumstances in a non-punitive manner.*
2. **Representation (EFAP Reps or a Joint Committee or a Chairperson)**

**Model Language:**
The Company and the Union acknowledge the contribution that a Local Unifor EFAP Representative can make towards workplace education, EFAP and substance abuse information and support, and referral in individual cases.

*It is agreed that the EFAP representative selected by the Union will be allowed reasonable time off to assist an employee experiencing challenges related to mental health and substance abuse in order to ensure that appropriate information, referrals, follow-up and transportation to treatment are available to every employee in need.*

**Sample Language:**
(Excerpts from contracts negotiated by Unifor members)

**EFAP Rep**
One (1) EFAP representative, appointed by the bargaining committee, will serve as a resource to those individuals looking for assistance. The EFAP representatives are not intended to replace professional counselling services. The EFAP representatives will keep all matters brought to its attention in strict confidence.

*The EFAP representative will be allowed time away from the regular job when needed.*

*The Company will provide time off with pay for a Substance Abuse Representative to transport individuals to assessment and treatment centers where required.*

**EFAP Committee**
The Company and the Union share a deep concern about the problems which exist in our society today. Therefore, the Company agrees to an Employee Assistance Program. In addition, two (2) representatives, the Union Chairperson and a designate from the Company, will update and modify the program as required by mutual agreement.

These EFAP representatives will meet on a regular basis and will promote its functions with a view of encouraging employees to bring up possible problem situations in an effort to get appropriate assistance as soon as possible.
The EFAP representatives will serve as a resource to those individuals looking for assistance and are not intended to replace professional counseling services.

The EFAP representatives will keep all matters brought to its attention in strict confidence.

The Company will provide time off with pay for a Substance Abuse Representative to Communicate with the membership.

The Company will provide time off with pay for a Substance Abuse Representative to transport individuals to assessment and treatment centers where required.

**EFAP Representative**

The Company and the Union acknowledge the contribution that the Local UNIFOR EFAP Representative can make towards workplace education, EFAP and substance abuse, counselling and referral in individual cases.

To ensure that this level of contribution continues, it is agreed that the EFAP representative will be allowed reasonable time off at those times when an employee comes forth with a mental health or substance abuse problem to assist the employee with counselling, referrals, follow-up and to transport individuals to assessment and treatment centers where required.

The EFAP Representative will not leave his/her duties without obtaining permission from his/her Supervisor. Such permission shall not be unreasonably denied.

**Penny Fund for a Local Rep**

**Amalgamated Local Substance Abuse Representative**

Effective upon ratification of this collective agreement, the Company agrees to pay ____ ( $) cents per compensated hour per employee to a fund to be established by the Local Union. The purpose of this fund will be to allow the Local Union to put in place for a full time Substance Abuse Representative who will work out of the Local Union office. The Substance Abuse Representative will deal with substance use and abuse intervention, counselling, referral and follow-up for individual cases as well as ongoing workplace education.
The Substance Abuse Representative will undergo any and all necessary training that is required to enable her/him to perform their duties in the proper manner.

Should the Substance Abuse Representative come from the workplace covered by this collective agreement, she/he shall be granted a leave of absence, with full accumulation of seniority and pension service for the duration of time that she/he performs the job of Substance Abuse Representative.

3. **Training**

**Model Language:**

The Company will ensure that the Union EFAP representatives will be given the opportunity to attend the Unifor 40 hr Worker Referral Assistance Program courses (level 1 and 2) conducted at the Unifor education training center in Port Elgin, at no cost to the individuals or the Union including travel and lost time during their regular working hours where applicable.

The employer will also allow and cover all costs including registration, travel, meals, lodging and lost time for one (1) person selected by the Union to attend the Unifor bi-annual EFAP addictions conference.

And the Company agrees to cover all expenses to provide all members of the Union Bargaining Committee, the health and safety committee and the EFAP committee with the UNIFOR one day EFAP training one time during the life of the Collective Agreement.

**Sample Language:**

(Excerpts from contracts negotiated by Unifor members)

**One Day Training**

Union representatives will participate in the Unifor one (1) day training. All expenses will be covered by the Company including registration, travel, meals, lodging and lost time.
40 Hour PEL Training
The Company will ensure that the Union EFAP representatives will be given the opportunity to attend the Unifor 40 hr Worker Referral Assistance Program course conducted at the Unifor Education Training Centre in Port Elgin, at no cost to the individuals or the Union including lost time during their regular working hours where applicable.

Other Training
In addition, it is recognized that the Substance Abuse Representative will be able to deal more effectively with matters related to substance abuse if they are provided with appropriate training. Therefore, the Company will allow reasonable time off with pay to the Substance Abuse Representative to attend courses which form part of the Addiction Intervention Association’s Alcoholism and Drug Counsellor certification program, and will assume instructional fee costs and reasonable accommodation and meal costs associated with the taking of such courses.

Workplace Rep Training
The Company agrees to cover all expenses to provide all members of the Union Bargaining Committee, the health and safety committee and the EFAP committee with the Unifor one day EFAP training one time during the life of the Collective Agreement.

Training Through Bi-annual Conference
The employer will also allow and cover all costs including registration, travel, meals, lodging and lost time for one (1) person selected by the Union to attend the Unifor bi-annual EFAP Addictions Conference.

4. Benefits
Model Language:
RE: EFAP (COUNSELLING AND ADVISORY SERVICE)
The company has agreed to provide all employees and their dependents with a voluntary counseling and advisory service. The program will be made available through (EFAP Provider) and will provide professional, personalized, confidential counseling and advice in the following areas:

A 24-hour crisis line will be made accessible where an EFAP counselor can be reached toll free.
The plan will cover but not be limited to:

- Gambling
- Substance abuse / Alcohol dependence
- Marital/Family counseling Elder and Child care issues
- Work/Career counseling
- Financial counseling
- Stress management
- Bereavement
- Mental health
- Anger management
- Work/life balance

The program will provide coverage over the duration of this agreement.

The program will provide coverage for employees and their dependents as defined below:

- “Dependents” include the employee’s legal spouse and children who are Canadian residents.
- “Children” means: employee’s unmarried dependent children under age 21;
- Employee’s unmarried children under age 25, if they are full time students and depend principally on the employee for their financial support whether or not they live in Canada; and
- Employee’s unmarried, dependent children of any age who are unable to support themselves because of a mental or physical handicap.
- “Spouse” means – employee’s legally married spouse, or common-law spouse or same sex partner of at least one year.

Sample Language:
(Excerpts from contracts negotiated by Unifor members)

Cost of Treatment
The employer and the Union agree to work collaboratively in ensuring members with mental illness and addiction are offered the appropriate resources while recognising the full extent of the (insert province) Human Rights Code for the purpose of accommodating such circumstances.
The employer additionally agrees to absorb the costs, if any, of a recognized treatment program that might be necessary to assist the member in the successful treatment and recovery from mental illness and addiction.

**Sick and Accident Pay**

*Short Term Disability or Weekly Indemnity*

It will continue to be understood that where appropriate, employees will be allowed to apply for, and receive sickness and accident benefits, provided they are medically authorized and in a rehabilitation facility or on an approved leave of absence in order to aid in their rehabilitation. This includes the period while waiting for treatment, or if they are waiting to be admitted into a residential treatment centre.
Complete Letter of Understanding

Re: Mental Health/Substance Abuse

During the 20__ negotiations the Union expressed a concern to the employer about the increased frequency of members and their families experiencing crisis concerning mental health and addiction. The parties recognize that mental health and addiction issues remain a pressing social issue affecting not just members, but their families and the community.

Additionally, the parties agree that addiction and mental illness are not choices and the path to mental wellness and recovery requires support.

The employer and the Union agree to work collaboratively in ensuring members experiencing challenges with mental health and addiction are offered the appropriate resources while recognising the full extent of the (Insert Province) Human Rights Code for the purpose of accommodating such circumstances.

The employer additionally agrees to absorb the costs, if any, of a recognized treatment program that might be necessary to assist the member in the successful treatment and recovery from adverse mental health and addiction abuse.
Ideal Letter of Understanding for Health Care Workers

Re: Recognizing the Importance of an Employee Assistance Program

The Union and the Employer are jointly concerned with the health and welfare of all employees and their families. The Employer and the Union also recognize that a wide range of personal problems or disorders may adversely affect an employee’s abilities and work performance. In addition, and particularly important, is a recognition that while providing care, workers are often faced with loss and suffering.

The work of helping others requires providers to open their hearts and minds to their residents – unfortunately, this very process of empathy is what makes caregivers vulnerable to being profoundly affected and damaged by their work.

Vicarious trauma, compassion fatigue, burn out and other emotional stresses may result in illness; family problems; substance abuse or other life related problems.

The parties agree they will jointly endorse an EFAP, bargained with the local Union and funded by the Employer, which will provide confidential, professional assistance to both full-time and part-time employees. The Employer will also provide training to staff annually to combat the risks of developing compassion fatigue.

The parties will work jointly to develop a policy speaking to the need to identify problems and factors in the workplace that may cause or exacerbate challenges and which offers constructive solutions to addressing them at their earliest stages and provide positive corrective intervention(s) as needed. Further, the parties will identify factors in the workplace which may cause some of the problems referred to in this letter and deal with them in as constructive a manner as possible.
Health & Safety View
(Unifor Local 2458 and Gateway Haven Home Long Term Care)

The parties both agree that a psychologically healthy work environment is a desirable objective for both the employer and its employees.

In keeping with that objective, the parties wish to work together in order to identify psycho-social hazards in the workplace that may cause or contribute to mental health conditions, and look for ways to eliminate them or reduce these effects. The parties are committed to raising awareness around mental health issues. Raising awareness is a key step towards ending the stigmas associated with suffering from a mental illness and creating a safe and comfortable workplace environment for everyone.

Understanding the above, the parties agree to work together during the life of the agreement in the hopes of engaging managers and employees on mental health issues and their effect on the workplace. This will be a standing discussion item on the Labour Management Committee agenda.

It is also understood that ....
Human Rights View
(Unifor Local 200 and Diageo Canada)

Certain Disabilities under the Human Rights Code, such as mental illness, may not present obvious external symptoms and as such may be considered “invisible disabilities”. It is in the best interest of the Employee living with an invisible disability, the Union, and the Employer to encourage early intervention and treatment to assist Employees toward diagnosis and effective treatment. The Employer and the Union recognize that Employees suffering from invisible disabilities are entitled to the same accommodation efforts and requirements as other disabilities under the Human Rights Code. Further, the Employer and the Union recognize that invisible disabilities can have stigmas attached to them and the parties jointly commit to take appropriate actions to minimize such stigmas in the workplace. As with all disabilities and perhaps in some ways more so with invisible disabilities, confidentiality is important and information related to invisible disabilities should be shared on a need to know basis only. The Employer and the Union agree that, depending on individual circumstances, invisible disabilities may call for creative solutions and empathetic approaches when considering accommodation in the workplace and they agree to work in good faith to achieve these ends.
Action Plan

Bargain:

- What is in YOUR Collective Agreement? What language do you have now and what do you need to bargain? (Use this booklet for Model and Sample Contract Language).
- Do you have an Employee Family Assistance Program in your workplace? If so, pick up the phone or go online and learn more about the program.

Education:

- Are all workplace reps in your local trained on these issues? Can you identify and assist our members in getting the help they need?
- Arrange for yourself and members from your Local to enroll in the Unifor Worker Referral Assistance Program - Level One and Level Two
- Ask your local to sponsor a Mental Health First Aid or Applied Suicide Intervention Skills Training (ASIST) course - better yet, bargain it for your Workplace Leadership (stewards, OH&S, Women’s Advocate, etc.) You can find out more by visiting the Mental Health Commission of Canada website.

Lobby:

- Make your voice heard and demand governments put funding and resources into mental health support and action.

Connect:

- Look for ‘OPEN AA or NA’ meetings, attend one. Open meetings are available to anyone interested in the program of recovery. Consult www.aa.org or https://na.org/ for meetings and protocol for ‘Open Meetings’. If a meeting is called ‘Closed’ it means it’s restricted to people who have a desire to stop using.
- Attend an ‘Al-Anon’ meeting, https://al-anon.org/
- Make contact with your Unifor Regional EFAP Committee.
Get the Whole Local Involved:

- Encourage your Local Committees to address mental health. Consider the amazing work that Committees can do from their own perspectives.
- Ensure that union events are in solidarity with those in recovery by avoiding making alcohol the draw. Consider having a dry event.
- Look out for and attend ‘Recovery Day’ events in your area, usually held in September. If there isn’t one in your area, organize your own!

Watch What You Say:

- Eliminate language like “are you crazy?” or “he’s a drunk” from your vocabulary. This only adds to the stigma.
- Replace, “How are you doing today?” with ‘What was the best part about your day?’
Know Your Resources:

Take a moment to find out what resources are in your community and record their information below. Get familiar with Social Services in your community.

Dial ‘211’ or go to www.211.ca. This is a search engine that provides all the available resources in your community and surrounding area.

Call the service providers directly, introduce yourself and ask questions so that you have an understanding of services you are referring. For example, knowing that a food bank needs proof of loss of income before they can provide service is useful when you make a referral.
Important Contacts:

Community Food Bank: _______________________________________

Local Women’s Shelter: _______________________________________

Addiction Treatment Centre(s): _________________________________

Addiction Support Services (such as AA, NA): _______________________

Mental Health Services: _______________________________________

_________________________________________________________

______________________________

________________________________________________________

________________________________________________________

________________________________________________________

________________________________________________________