Stress Management Society
from distress to de-stress

International
Wellbeing Insights
People, Culture & Wellbeing

# MENTAL HEALTH AWARENESS

## TRAIN THE FACILITATOR

Be your own Champion

# Contents

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# WELCOME

In today's rapidly changing world of work, **mental health is no longer a side conversation** — it's at the heart of how we lead, live, and look after one another.

You've joined this programme because you care — about people, about culture, and about making a meaningful difference in the workplace, starting with you.

Whether you're here to support your team, your peers, or your own growth, by working to 'Maximise your Mental Health' you are making a powerful commitment, rooted in empathy, awareness, and courageous action.

This handbook is your guide. Inside, you'll find practical tools, frameworks, and conversation techniques to help you:

- **Recognise the signs of strain** and understand what this means for our Mental Health
- **Open up conversations** so that we build confidence around subjects of Mental Health conversations, led by empathy, curiosity and no judgement
- **Apply simple recovery tools** that will alleviate, reinforce and restore
- **Champion a culture of care** by normalising tough conversations, reducing stigma and help all to thrive

Thank you for showing up with care, courage, and humanity. You are now part of a growing global movement to champion mental health in the workplace — one conversation, one colleague, one step at a time.

**Let's begin.**

# GROUND RULES

We introduce ground rules at the start to create a safe, respectful, and focused learning environment—one where everyone feels comfortable to contribute and reflect. These rules set the tone for how we'll engage with each other, helping to build trust and psychological safety from the beginning.

But more importantly, this isn't just about this session. Participants will often be in situations where establishing clear boundaries and expectations is essential—whether they're facilitating conversations, leading sessions, or supporting colleagues. This moment is also about modelling what it looks like to set ground rules confidently and intentionally, so they can apply the same principles in their own contexts.

- **Be Here Now:** Mobile phones should be **off or on silent**.
- **One Voice at a Time:** You can't listen if you are talking over someone.
- **Participation**: Take responsibility for your own learning. What you put in is what you will get out.
- **Honesty**
- **Respect**: Keep an open mind.
- **No Judgement**
- **Confidentiality**: What is discussed in the room stays in the room.
- **Safeguarding**: There is a caveat to confidentiality. If anyone reveals anything that could be a risk of harm to themselves or others, SMS is obliged to alert the authorities.

# THE A.C.T. MODEL

Session One introduces a simple model for opening a genuine conversation about mental health: A.C.T.

Authenticity — be honest, genuine, patient and empathetic.

Connection — be mindful of location, tone and boundaries, and keep trying.

Topic — find something to open the conversation and put the other person at ease.

Before you read on, pause and reflect with a partner:
What does authenticity mean to you?
What does connection mean to you?
What are your go-to topics or subjects for starting a conversation?

# A.C.T. IN PRACTICE

Authenticity
Be honest, genuine, patient and empathetic.

Connection
Be mindful of location, tone and boundaries — and keep trying.

Topic
What can you use to open the conversation and put them at ease? What are your own 'go-to' conversation starters? Acknowledge what they've said, and build on it. Share an open story or a small vulnerability of your own.

A genuine connection doesn't need to be perfect — it needs to be present.

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# THE COST OF MENTAL ILLNESS

## 8 Million
## lives lost every year

(Walker, McGee & Druss, 2015)

**82%**

OF EMPLOYEES ARE AT RISK OF BURNOUT

(Global Talent Trends, 2024)

**3rd**

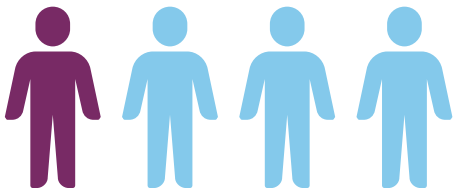
LEADING CAUSE OF DEATH AMONG 15–29-YEAR-OLDS GLOBALLY

(WHO, 2021)

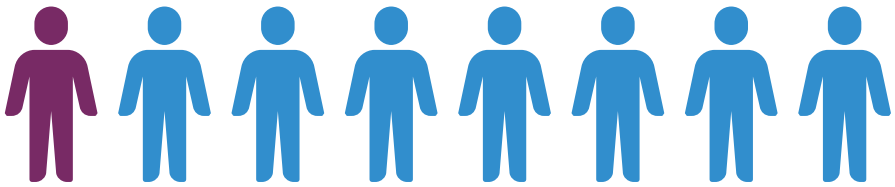
**60%**

OF PEOPLE DO NOT SEEK SUPPORT

(WEF, 2019)



## Up to 25% of Adults
**live with a mental health issue.**
**(depending on region)**



## 1 in 8 Globally
**experience mental illness <u>each</u> year**

**+ 740,000**

PEOPLE DIE BY SUICIDE EACH YEAR,
(WHO, 2024)

**43 SECS**

PER DEATH TO SUICIDE

**14.3%**

OF ALL GLOBAL DEATHS ARE MENTAL HEALTH RELATED

(WEF, 2019)

# THE COST OF MENTAL ILLNESS

The financial cost of poor mental health is just as significant as the human cost:

$1 trillion in global costs every year (World Health Organisation)

$300 billion per year in the US (American Journal of Psychiatry)

€600 billion in Europe — around 4% of GDP (OECD)

£110 billion in economic costs in the UK, including sickness, presenteeism, staff turnover and unemployment (Centre for Mental Health)

Deaths from mental health and substance misuse have more than doubled in some regions over the past 10 years.

The message is simple: investing in mental health support isn't just the right thing to do — it makes economic sense too.

# WHAT IS MENTAL HEALTH?

## WHO HAS MENTAL HEALTH?

Mental health is just like physical health. We **all** have it, and we all need to take care of it. Some days we feel great, other days we might struggle. We can move between thriving, coping, feeling unwell, or even needing time off work.

It's interesting, isn't it? Physical health is often associated with positive, aspirational terms, while mental health tends to bring up challenges and struggles. But the truth is, mental health includes thriving, resilience, clarity, and wellbeing—not just illness.
In today's world, mental health is more important than ever. Many of us feel constant pressure to meet demands, balance life responsibilities, and keep up with societal expectations.

That's why it's essential, both personally and organisationally, to actively promote mental wellness. When we lay the right foundations, we create more engaged, happier, and higher-performing environments—for ourselves, our teams, and our communities.

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# MENTAL HEALTH EVALUATION EXERCISE

Before we begin looking at mental health, it may be helpful for you to think about your own, how it affects your life and to share this with a partner.

## 1. WHAT DOES MENTAL HEALTH MEAN TO YOU?

## 2. WHEN YOU HAVE POOR MENTAL HEALTH — WHAT IS THE CAUSE?

## 3. HOW DOES IT AFFECT YOU:

A. Mentally? (How you think)
B. Emotionally? (How you feel)
C. Physically?

## 4. HOW OFTEN DOES IT AFFECT YOU?

## 5. HOW HAVE YOU BEEN DEALING WITH IT UNTIL NOW?

## 6. HOW COULD YOU DEAL WITH IT?

# WHAT IS MENTAL HEALTH?

According to the World Health Organisation (WHO), mental health can be defined: "*as a state of well-being in which every individual realises his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community*"

That's a bit wordy though, isn't it? Our approach is a little simpler:

"How we **THINK**, **FEEL** and **BEHAVE**".

- **Think** – thoughts about ourselves, others and the world
- **Feel** – emotional state, ability to process emotions
- **Behave** – how we act and respond to situations

So as we mentioned earlier, everyone has mental health, but what do we mean by mental ill health? According to WHO, a mental disorder = "*compromise a broad range of problems, with different symptoms. ... generally characterised by some combination of abnormal thoughts, emotions, behaviour and relationships with others.*

While we can't always control our mental health, we can learn to navigate it with the right tools, support and environment.

THINK FEEL BEHAVE

# UNDERSTANDING MENTAL HEALTH

Mental health is more important than ever and very much in the zeitgeist. Many of us feel under pressure to meet demands, perform life duties and maintain a certain lifestyle.

It is essential at both a personal and organisational level to promote and support wellbeing and mental wellness. Providing the right foundations will help create a more engaged, happy and high performing culture.

## MENTAL HEALTH RESEARCH

- Mental health problems is a growing public health concern. The likelihood is that we all know someone who is affected by mental ill health – this could be a family member, friend or colleague
- Mental ill health in the workplace: 1 in 6 of us will experience depression, anxiety or problems relating to stress
- In the US, almost half of adults will experience a mental illness during their lifetime – Source: MHFA
- Prevalent not just in the US, but around the world
- Mental ill-health naturally leads to absence, but Presenteeism (turning up to work whilst either physically or mentally unfit) accounts for double the losses of absences
- Working conditions and working environment can have a huge impact on mental health and equally, someone's mental health can have a significant impact to perform well in their job
- As part of an annual Gallup Poll the 2020 was officially the most stressful year in recent history, with a record-high 40% of adults worldwide saying they have experienced lots of stress
- Although work is good for mental health, a negative environment can lead to physical and mental health problems
- According to the National Alliance on Mental Illness (NAMI), mental illness is the leading cause of disability in the United States. Moreover, untreated mental health conditions cost the economy $200 billion every year.

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# UNDERSTANDING MENTAL HEALTH

Why it matters - and why your role matters.

Mental health is about how we think, feel, and behave — how we relate to others, make decisions, and cope with life's challenges. Just like physical health, our mental health exists on a spectrum and can change over time.

Poor mental health doesn't always mean mental illness, but if left unacknowledged or unsupported, it can develop into more serious conditions — and the impact can be profound.

It's vital to understand the scale, impact, and urgency of the mental health challenge facing workplaces globally — and the opportunity we have to respond.

## Global Impact of Poor Mental Health

- 1 in 8 people worldwide live with a diagnosed mental health condition each year (approx. 970 million people)[1]
- Mental health conditions account for 5 of the top 10 causes of years lived with disability (YLDs) globally [2]
- Over 700,000 people die by suicide every year — that's one person every 40 seconds[3]
- The COVID-19 pandemic triggered a 25% increase in anxiety and depression worldwide[4]

## Mental Health at Work

- 76% of workers say they've experienced at least one symptom of a mental health condition in the past year [5]
- 60% of workers report experiencing stress on a daily basis globally [6]
- Mental health-related productivity losses cost the global economy an estimated $1 trillion USD per year [7]
- By 2030, this cost is projected to rise to $6 trillion USD, unless urgent action is taken[7]
- Despite this, only 2% of global health budgets are allocated to mental health[8]

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# RECOGNISING MENTAL ILL-HEALTH

## COMMON MENTAL ILLNESS

People often feel isolated and believe they are the only ones experiencing a mental health problem. In reality, conditions such as depression, anxiety and stress are very common.

The signs and symptoms of mental ill-health can vary depending on the condition, but they generally affect behaviours, emotions and thoughts. These symptoms may also present as physical problems, such as headaches, back pain, nausea or muscle tension.

It is also possible to experience more than one mental health problem at the same time. For example, it is not uncommon for someone with an anxiety disorder to also experience depression, and vice versa. In fact, almost half of individuals diagnosed with depression are also diagnosed with an anxiety disorder.

According to NICE, mental health problems can be experienced at three different levels: mild, moderate and severe.

| | |
|---|---|
| **MILD** | When a person has a small number of symptoms with a limited effect on daily life |
| **MODERATE** | When a person has more symptoms that can make their daily life a lot more difficult that what it normally is |
| **SEVERE** | When a person has many symptoms, making their life extremely difficult |

Source: NICE, ADAA

## SIGNS AND SYMPTOMS INCLUDE:

- Low energy
- Excessive worrying
- Changes in eating habits
- Extreme mood changes
- Withdrawing from friends and family
- Avoiding certain situations
- Feeling irritated
- Reduced concentration
- Depressed mood
- Disturbances in sleep
- Difficulty dealing with daily problems
- Headaches, sweating, nausea

Foundation, Mayo clinic

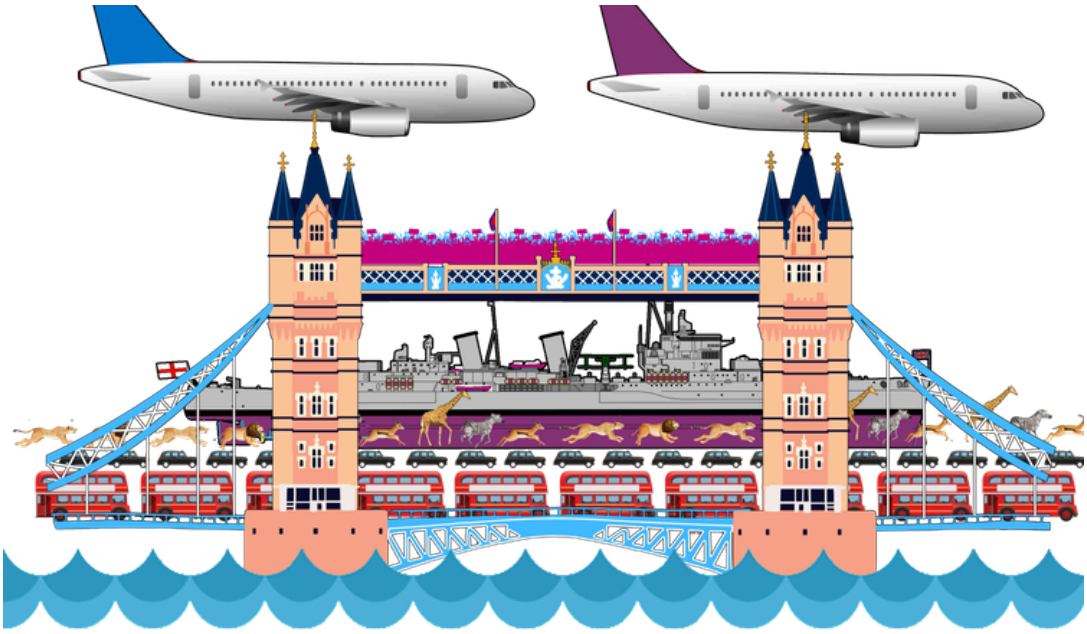
# COMMON MENTAL ILLNESS

## MILD SIGNS AND SYMPTOMS OF POOR WELLBEING INCLUDE:

- Low energy
- Excessive worrying
- Changes in eating habits
- Extreme mood changes
- Withdrawing from friends and family
- Avoiding certain situations
- Feeling irritated
- Reduced concentration
- Depressed mood
- Disturbances in sleep
- Difficulty dealing with daily problems
- Headaches, sweating, nausea

Source: WHO, Mental Health Foundation, Mental Health America

# THE BRIDGE ANALOGY



The Health & Safety Executive defines stress as 'the adverse reaction people have to excessive pressures or other types of demand placed on them'. This links very closely to one of our definitions of stress and poor wellbeing; a condition or feeling experienced when a person perceives that:

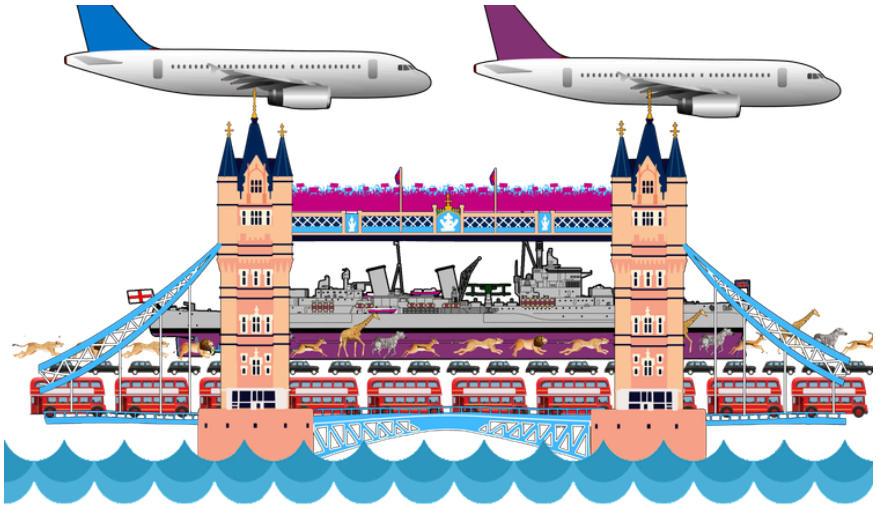
## "DEMANDS EXCEED THE PERSONAL AND SOCIAL RESOURCES THE INDIVIDUAL IS ABLE TO MOBILISE."

International Wellbeing Insights uses 'The Bridge' analogy to approach the topic of mental health, wellbeing and stress. When a Bridge is carrying too much weight, it will eventually collapse. It is possible to see the warning signs before this happens, 'The Bridge' would bow, buckle and creak.

The same principle can be applied to human beings, with excessive demands and challenges placed on our bridges. There may be early warning signs. However stress can creep up on some of us, resulting in an unexpected breakdown.

'The Bridge' analogy can also be applied to a team or organisation as a whole by looking for more general signs such as team deadlines not being met or a decrease in team morale.

# WHAT'S ON YOUR BRIDGE?



1. We don't have a work bridge and personal bridge, it all goes to the same place and we tend to carry it around with us. Take a moment to think about what is on your bridge.

2. What are the signs and symptoms that you display when your bridge is bowing and buckling? Take a moment to think about what that means for your bridge.

# REFLECTIVE EXERCISE

**Why do people not seek help or ask for support when they are struggling with their Mental Health? What is your experience?**

## WHAT HAS STOPPED YOU FROM ASKING FOR ANY KIND OF HELP?

## WHAT WERE THE BARRIERS?

# Guilt vs Shame

Can you think of a time when you felt guilt? And a time when you felt shame? They may feel similar, but they are different emotions.

## Guilt

Guilt is the emotional response that arises when we believe we have done something wrong, failed to act, or fallen short of our own or others' expectations. Unlike shame, which targets the whole self ("I am bad"), guilt focuses on behaviour ("I did something bad"). Guilt can be constructive when it prompts us to take responsibility, repair harm, or make better choices in the future. But when it becomes excessive or misplaced, it can weigh us down with self-criticism and prevent us from moving forward.

## Shame

Shame is the painful emotion that arises when we feel fundamentally flawed, unworthy, or "not enough." Unlike guilt, which relates to a specific action ("I did something bad"), shame attaches to the self ("I am bad"). It often drives secrecy, silence, and disconnection, making it harder to seek support. Left unacknowledged, shame can fuel burnout, perfectionism, and isolation. When met with compassion — from ourselves and others — shame loses its power, and healing becomes possible.

- **Guilt** = about what we did or didn't do.
- **Shame** = about who we think we are.

Guilt usually comes from something you did or think you did wrong — it's tied to a specific action or behaviour. You might describe it as "I did something wrong." Shame, on the other hand, goes deeper. It's the belief that you are wrong at your core, not just that you made a mistake. It isn't always linked to a particular event or behaviour, but rather to a painful sense of personal inadequacy: "I am wrong."

The important difference is that guilt can often be resolved — you can take action to make amends, learn from the situation, and move forward. Shame, however, doesn't offer such a clear way back. It can leave people feeling stuck, overwhelmed, and defined by negative self-beliefs. While both emotions feel heavy and can be barriers to good mental health, shame carries an especially strong stigma and is harder to shift. Many people experiencing mental health challenges struggle with shame, which can make recovery more difficult.

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# DE-STIGMATISATION

A simple and widely used definition of stigma is: ***A mark of disgrace or disapproval associated with a particular circumstance, quality, or person***. In the context of mental health, stigma involves holding negative attitudes, beliefs, and stereotypes toward individuals who experience mental health conditions. There is still often a stigma attached to mental illness, often resulting from the stereotypes and prejudice that result from misconceptions about mental illness.

Stigma is two-fold:

## PUBLIC STIGMA

The reaction that the general population has people with mental ill-health

## SELF-STIGMA

The prejudice which people with mental ill-health turn against themselves

| | PUBLIC STIGMA | SELF STIGMA |
|---|---|---|
| **STEREOTYPE** | Negative belief about a group. i.e. incompetence | Negative belief about self. i.e. incompetence |
| **PREJUDICE** | Agreement with belief and/or negative emotional reaction. i.e. anger, fear | Agreement with belief and/or negative emotional reaction. i.e. low self-esteem |
| **DISCRIMINATION** | Behaviour response to prejudice. i.e. avoidance, with-holding employment/housing opportunities or generally just withholding help | Behaviour response to prejudice (fails to pursue work/housing opportunities) |

It may be helpful for you to think and reflect on your own experience of self and public-stigma.

It's about breaking the silence. Challenge the assumptions and the cultural norms, listen with compassion. Remember: every conversation is an opportunity to make a difference

**PUBLIC-STIGMA:**

For example: men are often more likely not to reach out for help with their mental health. Why do you think this is?

What ideas can you think of to help drive people to start reaching out for help?

**SELF-STIGMA:**

What has stopped you from asking for help?

# DEPRESSION

## EARLY IDENTIFICATION

The World Health Organisation (WHO) defines depression as:

***"a common mental health disorder that is characterised by persistent sadness and a loss of interest and a loss of interest in activities that you normally enjoy, accompanied by an inability to carry out daily activities, for at least 2 weeks"***

- Globally, it is estimated that 264 million people suffer from depression.
- Many people who suffer from depression also experience symptoms of anxiety.
- Depression is cited as the leading cause of disability worldwide.
- In the U.S., depression costs over $51 billion in absenteeism and lost productivity, making it one of the most costly illnesses.
- Depression ranks among the top three workplace problems for employee assistance professionals.

## MILD SIGNS AND SYMPTOMS OF POOR WELLBEING INCLUDE:

- A loss of energy
- A change in appetite
- Sleeping more or less than usual
- Anxiety
- Reduced or poor concentration
- Being indecisive
- Feelings of worthlessness
- Negative thoughts
- Guilt or hopelessness
- Thoughts of self-harm or suicide
- Depressed mood
- Feeling irritable
- Feeling low or tearful
- Losing pleasure and interest in things that were once enjoyable
- Problems with memory
- Being restless
- Often lacking confidence
- Self-critical thoughts
- Lasting feelings of unhappiness

Source: WHO, Mental Health Foundation, Mental Health America

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# BURNOUT

The 11th Revision of the International Classification of Diseases 11 (ICD-11) defines burnout as

***"a syndrome conceptualized as resulting from chronic workplace stress that has not been successfully managed"***

Moreover, according to the ICD-11's definition, burn-out is characterised into three dimensions:

## FEELINGS OF ENERGY DEPLETION OR EXHAUSTION

## INCREASED MENTAL DISTANCE FROM ONE'S JOB, OR FEELING OF NEGATIVISM OR CYNICISM

## REDUCED PROFESSIONAL EFFICACY

Burn-out is a syndrome conceptualised as resulting from chronic workplace stress that has not been successfully managed.

## SIGNS AND SYMPTOMS

- Compulsion to prove oneself; push to work harder
- Neglecting personal needs
- Increased perception of conflict
- Withdrawal from social situations
- A revision of your value system, with self-worth based on your job
- Denial of problems and/or belief that others are lazy
- Obvious behavioural changes noticed by others
- Loss of contact with self
- Feelings of inner emptiness
- Low mood or depression
- Distorted sense of time
- Mental, emotional, or physical collapse

# ANXIETY

## EARLY IDENTIFICATION

The American Psychological Association defines anxiety as:

***"an emotion characterised by feelings of tension, worried thoughts and physical changes like increased blood pressure"***

It is normal for everyone to have feelings of anxiety, but it becomes a problem when it becomes difficult to control. Anxiety disorders are the most common mental illness in the US, affecting 40 million adults in the US aged 18 and older, which is 18.1% of the population every year.

The recent study conducted during the pandemic shows that 1 in 3 adults are depressed or anxious due to COVID-19.

Anxiety disorder is an umbrella term with there being different types of anxiety disorder, including

**Generalised Anxiety Disorder**
**Post-Traumatic Stress Disorder (PTSD)**
**Panic Disorder**
**Health Anxiety**
**Obsessive Compulsive Disorder (OCD)**
**Specific Phobias**
**Social Anxiety Disorder**

Anxiety disorders share some common signs and symptoms, but these along with the treatment method and severity of the anxiety disorder may vary

## SIGNS AND SYMPTOMS

- Constant feelings of panic and fear
- A feeling of being "on edge"
- Actively avoiding certain situations
- Feeling irritable
- Reduced concentration
- Difficulty sleeping
- Feeling restless
- Heart palpitations (strong, faster, irregular heartbeat)
- Shortness of breath
- Headaches
- Tense muscles
- Excessive worries
- Fears and worries that are out of proportion and overwhelming
- Difficulty controlling your worries
- Feeling self-conscious about everyday social situations
- Fixating on others judging you or being embarrassed
- Feeling dizzy or nauseous
- Difficulty going about everyday life
- Sweating
- Feeling panicked—panic attacks
- Not doing the things you once enjoyed

Source: American Psychological Association, NHS, Mental Health Foundation, WebMD, ADAA

# STRESS

## EARLY IDENTIFICATION OF STRESS AND STRESS-RELATED PROBLEMS

It isn't always possible to prevent stress, so a key action in order to minimise risk is to identify stress-related problems as early as possible, so that action can be taken before serious stress-related illness occurs (thus preventing a costly outcome for all concerned).

One of the difficulties with stress is that people experience it in different ways. It would be unwise to overgeneralise when advising on how to identify stress in others. However, because stress can have adverse effects it will usually present in forms that are out of the ordinary for the individual.

There will be changes in the stressed person; emotional, physical, behavioural, or a combination of all three.

The key thing is to look out for negative changes of any kind. Bear in mind that the negative changes are also likely to have knock-on effects e.g. reduced performance at work.

Of course, we all experience 'bad days', so we are really talking about situations where people display these negative changes for a period of time (e.g. 5 days in a row).

## CERTAIN FACTORS AT WORK MAY INDICATE A POTENTIAL PROBLEM

- More accident prone
- Forgetting things
- Showing a negative change in mood or fluctuations in mood
- Avoiding certain situations or people
- Becoming withdrawn
- Looking haggard or exhausted all the time
- Inability to think creatively
- Arguments and disputes between people
- A tendency to suffer from headaches, nausea, aches and pains, tiredness, and poor sleeping patterns
- Indecisiveness and poor judgement
- Using very negative or cynical language
- Showing a prolonged loss of sense of humour
- Becoming increasingly irritable or short-tempered
- Self-harming
- Problems with drinking or drug use

# ENGAGE IN CONVERSATION

Starting a conversation about someone's mental health can feel daunting, but it is one of the most powerful things a Mental Health Champion can do. Use the A.C.T. model as your starting point: be Authentic in your concern, build Connection through active listening, and choose the right Topic and moment.

## BEFORE YOU START

Find a private, quiet space where the person feels comfortable. Choose a time when you are both relaxed and unlikely to be interrupted. Remind yourself that you don't need to have all the answers - your role is to listen and support, not to diagnose or fix.

## DURING THE CONVERSATION

Ask open, non-judgemental questions, such as 'How are you really doing?' or 'I've noticed you haven't seemed yourself lately - do you want to talk about it?' Listen more than you speak and give the person time and space to respond. Reflect back what you hear to show you have understood. Avoid minimising their experience or rushing to offer solutions. Take any mention of self-harm or suicide seriously, and ask directly, calmly, and without judgement.

## ENDING THE CONVERSATION

Thank them for trusting you. Agree on next steps together - this might mean signposting to a Support Resource, encouraging them to speak to their GP, or simply checking in again soon. Follow up with a further conversation in the days that follow.

# THE FEELINGS WHEEL

The Feelings Wheel is a simple but powerful tool that helps people move beyond generic words like 'fine', 'stressed', or 'bad' to more precise, nuanced emotions. Starting from a small number of core feelings - happy, sad, angry, fearful, disgusted, and surprised - the wheel expands outward into more specific emotions such as content, lonely, frustrated, anxious, overwhelmed, or hopeful.

## HOW A MENTAL HEALTH CHAMPION CAN USE IT

Help someone put a name to what they are experiencing, which is often the first step towards feeling more in control of it. Encourage more open, specific conversations rather than surface-level check-ins. Build your own emotional vocabulary and self-awareness, so you can better recognise and manage your own feelings.

## USING IT IN A CONVERSATION

Ask the person to look at the wheel and point to the word (or words) that feel closest to what they are experiencing right now. Avoid judging or correcting their choice - there is no right or wrong answer. Use their chosen word to guide the rest of the conversation, for example: 'You said you feel overwhelmed - can you tell me more about that?' Revisit the wheel at different points in a conversation, or over time, to notice how feelings shift.

A printable copy of the Feelings Wheel is included in your facilitator materials for use in group sessions and one-to-one conversations.

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# MY ACTION PLAN

## KNOWLEDGE IS POWER… ONLY IF YOU APPLY IT OR TAKE ACTION

Write down a plan with points of action, what do you aim to achieve as a result of this workshop?

### WHAT COMMITMENT WILL YOU MAKE TO BREAKING BARRIERS SURROUNDING MENTAL HEALTH?

### WHAT COMMITMENT WILL YOU MAKE TO HAVING MORE OPEN CONVERSATIONS?

### WHAT ROUTINE OR RELATIONSHIP WILL KEEP ME ACCOUNTABLE TO MY CHANGE?

# RESOURCES

- Mind
- www.mind.org.uk
-
- Samaritans
- Call 116 123 (free, 24/7) - www.samaritans.org
-
- Hub of Hope
- www.hubofhope.co.uk
-
- Befrienders Worldwide
- www.befrienders.org
-
- Crisis Text Line
- Text SHOUT to 85258 (UK) - www.crisistextline.org
-
- Australia
- Lifeline Australia - 13 11 14 - www.lifeline.org.au
-
- New Zealand
- Need to Talk? - Call or text 1737 - www.1737.org.nz
-
- United States
- 988 Suicide & Crisis Lifeline - Call or text 988 - www.988lifeline.org

# ABOUT INTERNATIONAL WELLBEING INSIGHTS

Big ideas, inspiring stories, robust ethics and strong principles and a values driven approach have been at the heart of our organisation since our inception.

We believe that wellbeing isn't just a perk — it's the foundation of a thriving, high-performing, and sustainable workplace. Our mission is simple but powerful: to empower organisations and individuals to take control of their wellbeing, creating cultures where people don't just survive but truly thrive.

We've been at the forefront of workplace wellbeing since 2003, helping organisations worldwide build happier, healthier, and more resilient teams. But we're not here to tick boxes or promote one-off initiatives — we're here to drive meaningful, lasting change.

Our mission is to maximise physical, mental, emotional and social health as well as improve relationships, performance, productivity, creativity, morale, recruitment and retention by creating a resilient workforce and equipping them to cope with change and adversity.

**For more information, see www.wellbeing.work or call +44 (0) 203 142 8659 or email info@stress.org.uk**

# NOTES

# NOTES

We provide a range of services across the UK and internationally.
We are always happy to discuss how we can support you.

We look forward to supporting your wellbeing journey.

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