

**Episode 91:**

**The Working Mind for the Trades**

**Host:** Ken Rayner

**Guest:** Derek Baranowski, Charles Boyer, and

Kathy Martin



**Announcer:**

It's time for the IHSA Safety Podcast.

**Ken Rayner:**

Welcome to the IHSA Safety Podcast. I'm your host, Ken Rayner. We know that mental health is a growing concern in high-risk workplaces, which is why IHSA is partnering with Opening Minds, a division of the Mental Health Commission of Canada, to deliver a new training program designed to reduce stigma surrounding mental illness in trade sector workplaces. On today's episode, we're joined by Charles Boyer and Derek Baranowski, from the Mental Health Commission of Canada, and IHSA's Kathy Martin, to discuss this new program. Welcome everyone. Great to have you here.

**Charles Boyer:**

Thank you, Ken.

**Kathy Martin:**

Thank you, great to be here.

**Derek Baranowski:**

Hi, Ken.

**Ken Rayner:**

Hey, great to have you all here. Okay, Charles, let's start with you first. How about giving us an introduction to the Mental Health Commission of Canada and its division known as Opening Minds.

**Charles Boyer:**

Thanks, Ken. Absolutely. The Mental Health Commission of Canada is a national non-profit corporation. We've been going since 2007, and we're a registered charity. It was formed through the thousands of voices of people with lived and living experience. And this has really inspired the founding of this National Mental Health Commission. And the goal is to engage as many people as we can across Canada. The key challenges we're trying to take on are breaking down stigma, creating mental health strategy, and sharing the best-informed evidence, to shrink the gap between what we know and what we don't.

Opening Minds is a division within the Mental Health Commission of Canada. It is a non-profit social enterprise. We provide training and talk about the tools to take on mental health, change negative attitudes, and reduce the stigma related to mental illness. We have thousands of facilitators who deliver our programs, and we've trained over one million people. And that number is just accelerating as we keep going.

The two main courses that we offer are *Mental Health First Aid* and *The Working Mind*, which are available in person and virtually. They're tailored to different industries, workplaces, classrooms, and organizations—no matter their size.

**Ken Rayner:**

Excellent. Yeah, I appreciate that. I've taken Mental Health First Aid and that was certainly very helpful for me, in terms of being able to recognize when people are maybe needing some help in a way. To approach them in a way that's respectful and kind, and one that we can point them in the direction of help that's needed. So, I appreciate all the work that the Mental Health Commission of Canada does, Charles. And you talked a little bit about this new program called *The Working Mind*. It sounds like a really important resource for employees and workers in today's workplace. Can you tell us a little bit more about it?

**Charles Boyer:**

Absolutely. I'm glad you mentioned *Mental Health First Aid* to kick us off. And really that is the support to someone who might be having a mental health problem or a mental illness, and how you build the confidence to engage in those conversations. That's where we come in and why *The Working Mind* is so critical. How are you going to improve your mental health literacy? What is the level of mental health knowledge in the workplace? This is really critical for any organization in engaging in a mental health strategy. It changes the culture, because we're training the leaders and the employees in, really, the same program. We have a specific module for managers, but we train the managers first in this program and then we roll it out to the employees. So, you're really getting the same set of literacy skills while allowing that dialogue about mental health to reduce the stigma right off the bat.

Additionally, we're equipping them with some resilience and coping skills to build their resilience in the face of challenges for both managers and employees. The difference also is critical for this program is its very small cohorts and facilitated live sessions. You'll hear from one of our master facilitators soon. And you spend a full day with managers and a half day with employees engaged with a smaller group. So, this is where you get into the conversations of what mental health is, how to address it, how to talk about it, and share your lived experiences together. And really that's the critical part of the course. The last, I just want to mention, is that it's scientifically evaluated to reduce stigma and increase resilience. So, we know this has impact with managers and employees, and that's why we're so proud of it and so proud to engage with IHSA in delivering this to the trades.

**Ken Rayner:**

Excellent. Thanks, Charles. Appreciate that. And what you said in your opening answer was that over a million participants have taken these courses, which is phenomenal in terms of what a reach the Mental Health Commission of Canada has and continues to grow and to accelerate, as you said. I love that, and I think a strategy that we had at IHSA when we took *Mental Health First Aid* was that the management team took it first with members of the joint health and safety committee and some of the union officials...almost with that same concept of, if something was to happen on an airplane, you're putting on your oxygen mask before you're helping someone who needs your help. So, making sure that you

have a good, solid foundation to be able to provide that assistance to someone who needs that help and care. So, appreciate that. That's great.

Hey, Kathy, maybe we could talk about the customization of *The Working Mind*, because I understand that a big part of what it is we're doing here at IHSA is that we've worked with the Mental Health Commission of Canada to customize *The Working Mind for the Trades*. So, can you explain a little bit about that process?

**Kathy Martin:**

Yeah, you're correct. When I started as the new mental health and wellness specialist here at IHSA, it was 2021, and I was developing IHSA's mental health strategy. And I really noticed a gap in that tailored, industry-specific training in Ontario. So, there was this gap. There wasn't much there. So, I did take a step back. We used IHSA's "for the industry by the industry" approach, which is really about us engaging with our stakeholders in the sectors that IHSA serves, to see what the needs were from those sectors. And we did this by holding several focus-group sessions on what the industry wanted to see for mental health, addiction prevention, and foundational mental health awareness training. And what we heard is that they wanted training that was based on evidence and that addressed the key topics of concern. For example, stigma reduction.

Several unions, associations, and some of our larger companies in the industries already had trainers who were delivering *The Working Mind* program that you just heard a little bit about. And what we heard in our exploration of those training needs was that they wanted, like I said, a solid evidence-based program. However, there was a strong desire to customize the content so that it resonated more with the workplace parties that we serve. So, they wanted to see something more trade specific. Although, like I said, it was a great program. We wondered, "How can we make it even better?"

So, when we went out to RFP [request for proposal] for the new training, the Mental Health Commission applied, which was great, and it quickly became an easy decision to go with them, to customize their fully established, evidence-based program to be one of the mental health programs that we wanted to offer here at IHSA. So, that's how we started our journey working with the Mental Health Commission of Canada to adapt and customize the program. And I guess I should mention that IHSA funded the adaptation of the program. And it will be a Mental Health Commission Canada program, but we are fortunate enough to be able to deliver it here in Ontario.

**Ken Rayner:**

Right on. And, Kathy, some of that content that was changed—is there anything that you're particularly excited about that you feel really resonates with those who will be taking that program from IHSA and from the Mental Health Commission of Canada?

**Kathy Martin:**

Yes, we changed a bunch of things. And I think one of the main things we changed were the videos. So, if you had ever taken the main program that the Mental Health Commission offers, it has more of a corporate feel, I would say. It really resonates with corporate audiences. The one video, there's a lady in a blue dress and pearls. That resonates great with corporate but didn't quite hit with the trades. So,

recognizing that, we sought out six individuals to come forward who were really brave and were able to share their story with us. And they all come from the various trades that IHSA serves. So, we have folks from transportation, construction, electrical utilities...They stepped forward to share their stories with us.

Some of the other things that we customized, though, were also the scenarios. So, those group work scenarios that you work through in the course will be, again, more specific to the trades. Another piece that we adapted was looking at the references to factors that contributed to poor mental health. Because, again, those were different from what you might see in a corporate environment. Our industries have very unique challenges that impact their mental health. We wanted that to resonate throughout the learning as well. And of course using stats from our industries that would resonate as well.

**Ken Rayner:**

All right. Love it, Kathy. So, what I'm hearing is, we've taken the course, working with the Mental Health Commission of Canada, recognizing that not all the videos or all the examples were really going to resonate with those industries that we support. So, we've altered those. We've got six individuals that have come forth and shared their stories very bravely, in terms of some examples that those who we work with can better associate with the work that they do and the lives that they lead. Awesome. Okay, Derek, very happy to bring you in now. I got to change something up because I heard Charles refer to you not only as a facilitator, but a master facilitator. That's what he said earlier.

**Derek Baranowski:**

I have big shoes to fill now.

**Ken Rayner:**

The expectations are huge. Huge. Derek, as the master facilitator for this course, I'm really curious, maybe you could share with us some of the "aha" moments that you've witnessed with some of the participants, when they've had that sudden realization of the importance of the subject that you're teaching.

**Derek Baranowski:**

Yeah, it's a great question. I think I'll relate it back to my first aha moment when I took this course eight years ago. Although I'm a facilitator, I'm also a captain with the Burlington Fire Department for the last 25 years. I remember taking this eight years ago thinking, "Holy smokes, seven hours of mental health training? I'm going to need a mental health course after this mental health course." And the aha moment was, this is a really great course. Probably one of the most relevant courses that I've ever taken as a leader, I think, in my industry, which is fire. But it doesn't really matter, because whether you do it in the corporate environment, whether it be the trades, whether it be first responders, it is really relevant in every aspect.

So, the first thing is that this isn't going to drag on. This is a really engaging, relevant course that allows for a lot of participation. But I think if we really look at some of the aha moments, having delivered

probably hundreds of these courses now over the last four or five years while I've been with the Commission and Opening Minds, is that when I take the temperature of any group, whether it be with IHSA or first responders, I usually start off by asking them, "How many people here believe that mental health is just as important as your physical health?" And, Ken, generally speaking, it's 100 per cent. Everybody puts up their hands and says, "Absolutely." And then over the next four or five hours I say to them, "I'm going to show you examples of how, even though you may believe that, we actually prioritize our mental health a lot differently than we do our physical health." Most of us will do annual check-ups with our doctors. We go and get our teeth cleaned by a hygienist and a dentist once or twice a year. We religiously get our oil changed every 5,000 or 10,000 kilometres. But no, you'd have to be in full-blown crisis before we would ever decide to go and see a mental healthcare practitioner for, let's say, 'a check-up from the neck up'. We've always been proactive with every other aspect of our health, whether it be our physical, oral, or even our vehicle health, but we are completely reactive when it comes to dealing with our mental health.

So, there's that juxtaposition, where we ask, "Why are we doing that?" And I think the reason is because that's the way we've been taught to look at mental health: reactive rather than proactive. And that's one of the big aha moments I think that I generally see. One is how great of a course this is in terms of conversation and being relevant to the industry, and then the fact that even though we fundamentally believe it to be important, we don't treat it the same way. And through the course and the conversations, I've seen a lot of people start to move in a direction where they commit to start looking at their mental health through the same lens that we look through many other things in our lives as well.

**Ken Rayner:**

Wow. Yeah, I can appreciate that because I think one of the challenges we have is that if you wake up in the morning and all of a sudden you've come down with a really bad cold, and you're coughing, and you're sneezing, and you've maybe got a bit of a fever, it's pretty much a certainty that you're probably going to say, "Hey, I need to take the day off work" if it's a workday. But if you wake up in a funk and you really are having a hard time getting going, and mentally you're just not feeling it today, you're really, really struggling, I would say that most people don't even think about taking a day off of work. It's not about, "I need to reset. I need to go for a walk. I need to take my mind off what I'm doing." Whatever it is to get your mental health going. It's not viewed still as the same. I mean, I think we're making that change, but for a lot of people it's still seen as two very different things.

**Derek Baranowski:**

Yeah, and I think you're right. I think we were told, "You go to work. You'll get through this thing." And even though there may not be the same absenteeism, there's still that idea of presenteeism. So, even though when you do drag yourself into work, you're there but you're not productive. And I think if you look at it through the lens of trade, you're also sacrificing a safety element there as well. Because whether it's emergency services or the trades, I look at them through the same lens—safety is paramount. So, while you think that it's important and responsible to go to work, the fact is, yeah, you're reporting to work, but are you on your A-game? Are you acting in a safe manner? Because it's not just your safety; it's the safety of your colleagues and your co-workers as well. So, it was a good point, Ken. Yeah.

**Ken Rayner:**

Oh, great point. You made a better one. There you go. Speaking of, being a trainer that has a lot of experience in many of the courses, what do you like most about the adaptation of *The Working Mind* that we've done in partnership for the trades?

**Derek Baranowski:**

There's two things that are fundamentally different about this adaptation. One, it's the statistics that are relevant to the industry. And I think statistics are great because of what they allow the participants to do, because I'm not a subject expert when it comes to the trades. I can facilitate the course, help them understand the material through a lens. What the statistics we've added to the trades adaptation do is drive very relatable conversations. Now the participants have an opportunity to talk to me about, "Yeah, these statistics are relevant. This is what we're seeing in our industry." This starts to create this cohesiveness within the group and that's when we start to see that participation.

Because, again, generally speaking, what I've seen is that very often a lot of the participants--it's male dominated—are not very comfortable talking about mental health and don't like the vulnerability. But when we start talking about that statistics, which is in Module 1, it creates that open dialogue. And then we recognize here that there is no judgment. Everybody's contributions have some value. The other thing, which I think is the most important--and I love the fact that the Commission and Opening Minds is starting to work this into any adaptation for any industry--are the changes in the videos. I mean, really when it comes down to it, whether you call me a facilitator or a master facilitator, whatever you want to call it, I can relay the information. But I got to tell you, it's the stories that people connect with. And there are some that are incredible. Of all the variations that I've delivered, I have to say that the videos for the trades are probably the most impactful.

And like Kathy said, in the general Working Mind for the corporate environment, they're good videos. They get their points across and there's lots of opportunities for discussion. But there are a couple of individuals in the trade adaptation, Kent's story and Rob's story, that I think are really relevant. And a majority of the time is spent talking about Kent. Just the way that he relays his experiences and his tenure. I think a lot of other trades people probably have had that same feelings or experiences within their industry. And just the way that some of these participants that are telling their own lived experience, whether it be with addiction or chemical addictions, I think really start to make things a little bit more relevant. It may not be the same story, but participants can relate to some aspect of every story within that adaptation.

**Ken Rayner:**

Derek, any other significant learnings? I know we just talked generally about just that aha moment being the, "Hey, look, we've all agreed mental health is equally important as physical health, we agree to it, yet we don't necessarily apply it that way." Were there any other learnings that came out that you've seen or heard from participants?

**Derek Baranowski:**

Yeah, I think the big one--and again, the experiences that I've seen with other participants are the same ones that I had eight years ago--is first, you recognize after Module 1 that mental health isn't a black and white issue. I used to think of mental health as being either mentally well or mentally unwell. You're either sick or good to go. And very quickly you start learning about the mental health continuum, which is basically the corner-stone and foundation of the course. And we recognize that we move up and down this continuum our entire life, from being healthy, to reacting, to injured, and ill. And we can move back-and-forth across this continuum multiple times in our lives. And that's when people start to recognize that mental health doesn't mean being diagnosed with a mental illness. It could mean not getting the promotion that you were looking for or having health concerns at home and knowing that it's affecting the way that you interact with other people.

Mental health is the way that we think, feel, and act, whether it be positive or negative. And once, I think, the participants recognize that there is this variation, this continuum, that's a big aha moment. And now people start to relate the fact that, "Yeah, I don't necessarily have to be diagnosed with a mental health disorder like depression or anxiety. But yeah, I can absolutely recognize that sometimes my mental health isn't as good as I'd like it to be." And that there's some things that we can do to actually start to strategically help you start working back toward that good state of mental health where we hope to live most of our lives, but understanding that we can't be there forever. It's perfectly natural to move up and down this continuum.

**Ken Rayner:**

That's important. That's real important. I love that belief that it's not just, "Hey, you're either sick or you're not sick." You're probably feeling not as great today as maybe you did yesterday but there's that opportunity to go back up the continuum. So, I appreciate that. And as Charles mentioned earlier, there's two versions of the course, and we talked about management taking it first and then workers taking it second. But Derek, do you want to talk about just the difference between those two courses in terms of the one that's set up for management and the one that's set up for the workers?

**Derek Baranowski:**

Yeah, and there isn't a huge difference. That's what I really love and appreciate about it. If we look at the worker version, have *The Working Mind* divided up into four modules. Each one of them focuses on a specific aspect. Module 1 focuses a lot on stigma reduction. What's stopping us from having these conversations with the people that we care about, our family, our friends, and our colleagues? And we look at things like barriers. Not just stigma being the barrier but the fact that sometimes we don't even recognize that something's going on in our lives. So, it makes a lot of sense for us to reach out to those people and say, "Hey, I'm really worried about you. These are some of the things that I've noticed."

In Module 2, we talk a lot about that mental health continuum, and how to use that tool to monitor and manage your own mental health but also to help you understand what a conversation might look like or sound like with someone that you care about. Again, family, friends, or colleagues. Because the reality is, Ken, that one of the biggest things that stops us from having conversations with people that we care about is we say, "I don't know what to say. I don't want to make things worse." And so, we stand back, we cross our fingers, and we hope that person comes across someone that is able to give them that support. But then we quickly go into the understanding that if you are going to have a conversation with

someone, the only thing that you're responsible for is identifying the changes that you've noticed in them. Maybe it's their sense of humor, the fact that they've been said they haven't been sleeping. Or a very common one is people become isolated and withdrawn from their team or their family. Offer up your support. And probably the most important thing is have a good understanding of what resources you have within your organization, to help redirect them to the right resources, or maybe also understand what resources are available in your community. So, when people realize that those are the only three things that they need to talk about—these are the things I'm noticing, I'm here to support you, and let me redirect you to those resources—that's what Module 2 does.

Module 3 talks about some resilience strategies. We call them the big four strategies: deep diaphragmatic breathing, self-talk, goal setting, and visualization. But then we take a break after Module 3.

And Module 4 is dedicated to the leadership team. Basically, what we do is we talk about those three modules, and some of the learning goals in those modules, and we help them incorporate them into their leadership style. How do they have those conversations? Because as leaders, they're the ones that really set the tone. And I just recently I read a book. I'm not sure if anybody's heard of it—it's *How to Be a Coffee Bean* by Jon Gordon. I'm not sure if you've ever heard of it, but it's a really good analogy here, and I've started to use it, especially when I'm talking to managers. And the idea is that a leader should strive to be a coffee bean. Just imagine a boiling pot of water. If we throw a carrot into that boiling pot of water, Ken, what happens to that carrot?

**Ken Rayner:**

It softens. It cooks.

**Derek Baranowski:**

It softens to its environment and it becomes weaker. It could fall apart under any type of pressure that we put on it. Now, what happens when we put an egg into that pot of boiling water?

**Ken Rayner:**

It starts to cook. It becomes hard-boiled.

**Derek Baranowski:**

It hardens. It adapts to its environment. It doesn't change the environment, which is the water, but it hardens and it forever changes its structure. It can never go back to the way that it was before. But what I like about his analogy here is that, John says, as leaders we should strive to be a coffee bean. Because what happens when you put that coffee bean into that boiling pot of water? It creates magic, doesn't it? It creates a beautiful cup of coffee. It actually starts to physically change its environment. So, what we want to do is be that positive coffee bean, where we actually have an impact on our environment completely. And I think that's when I launch into that Module 4, helping them understand that. Let's look at it through that lens. Let's be that positive coffee bean where we're not going to be a product of our environment. We're actually going to physically change our environment if we're looking at changing. And this applies to any type of leadership style, but obviously I try and focus on how we talk



about mental health and the culture within our own industries when it comes to talking about mental health. And I think that really sets it up. And then we go in about how to have those conversations and how to support team members. And those are the fundamental differences, that when we do eventually get down to the workers, they essentially have the same core principles that the leaders have. They just don't get that piece about how to incorporate it into your leadership style, which I think is great. So, there isn't that much of a difference but just enough to allow the leaders to set the change in the culture within their industry around mental health.

**Ken Rayner:**

Perfect. And I take it that when a significant amount of, let's say all the workers and the supervisors within an organization, have taken this course, there's an understanding of the same language. There's an understanding of the same approach. A person understands, "Why is this person coming up to me and asking me about myself? I do feel different today and somebody has recognized that and is asking me if I'm okay and if they can provide any assistance." If you don't have everybody doing it, I take it it can be one-sided. And then one side is not understanding why questions are being asked or things of that nature.

**Derek Baranowski:**

Yeah. And I think the other thing is, I think from a leader's perspective, we work in a different workplace world now where you wonder, "Am I crossing the line by talking to someone about their mental health?" Especially new leaders, new supervisors, things like that. And we often talk about these very difficult conversations. And one of the things that I try to stress in Module 4 is, is it really a difficult conversation, or is it just an uncomfortable and awkward conversation? Because I'm willing to bet that everyone has probably had more difficult conversations in their personal lives and their professional lives, compared to the one that I'm suggesting that you might need to have in the future.

Because, again, now that we understand what we're responsible for—identifying change, offering up your support and redirecting to the right resources—all of a sudden we can say, "You're right. That's not really a difficult conversation. It's uncomfortable and awkward. But you know what? As leaders, as trades people, as good human beings, we can do difficult things and awkward things. And that really helps give people the confidence to hopefully reach out and start supporting family, friends, and, of course, their colleagues and co-workers as well.

**Ken Rayner:**

Amazing. Amazing. That sounds fantastic. So, Kathy, with all that from both Charles and Derek, I mean, I'm excited about this course. I hope our listeners are excited about this course. From your perspective, who within our membership should be looking to take this course, Kathy? Who are the ideal participants?

**Kathy Martin:**

Well, really, everyone. Everyone can learn and benefit, I think, from this course. And I think Derek really explained the course well, but the real learning happens when you're engaging as a group. And that's what I like about this. This is a live facilitated course. It's all-day. You get to hang with your peers and

really have those great discussions. And others learn from each other. So, getting together, having those discussions, and engaging as a group throughout the day is where that learning and the added value will be. So, whether it's your first course or your tenth mental health course, I think it's worth considering. Especially since it's really one of the first courses that's tailored to our industries. And like I said, IHSA is really excited to bring this to our industry, and we really do hope that the customized version of the program will be that fresh take, and workers are now going to see themselves represented throughout the course.

**Ken Rayner:**

Excellent. And as always, we're going to have links on our podcast channel where participants or listeners who want to find out more about this course can. But if someone's on our website or, Kathy, someone's on the internet looking up or wanting to find out more about *The Working Mind for Trades*, what would you recommend?

**Kathy Martin:**

Well, first go to our website, which is [ihsa.ca](http://ihsa.ca). Then I would either search the course offerings and just plug in "The Working Mind" and see what pops up. But the faster and easier way is to go to our Mental Health topic page, which you can find pretty quickly by going again to [ihsa.ca](http://ihsa.ca) and clicking on the red and black box with that little brain icon, which is on the top left-hand side of our homepage. And this will take you to the mental health webpage. You're going to find the listings for all of our mental health and addiction resources, including *The Working Mind for the Trades* course links. So, I'd encourage people to head to the mental health webpage and check it out.

**Ken Rayner:**

All right. Charles, Derek, anything else that you'd like to add?

**Derek Baranowski:**

No, I think I'm great. Yeah. Take the course. It's fantastic.

**Charles Boyer:**

And Ken, I'd just like echo that. You heard Derek and Kathy talk about how this course is for anyone. Derek took it at the Burlington Fire Department, brought it in there, and had really amazing results in reducing stigma and increasing resilience. We know the NHL has moved the program in. And now with the trades...I mean, it is really a game-changer to bring in. And thanks to the IHSA and the videos, Meg and Kent, real life videos in this course that are going to have tremendous impact. So, sharing their stories is a privilege as well. So, we're really excited to get this out into the hands of folks.

**Ken Rayner:**

All right. I'm sure it's going to help a lot of people. So, thank you all. Thank you, Charles, Derek, and Kathy for joining us today on the podcast. And thank you very much to the listeners for listening to the

podcast on our episode on *The Working Mind for the Trades*. Be sure to subscribe and “like” us on your podcast channel, and visit us at [ihsa.ca](http://ihsa.ca) for a wealth of health and safety resources and information.

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