Open Letter to Equity (trade union)

Dear Equity,

We are writing with regards to Equity's choice to terminate the post of Membership Support Assistant for Bullying, Harassment and Mental Health at the end of the current contract in January. We strongly feel this is the wrong thing to do for the following reasons:

- 1. The post was requested by the grass-roots membership but they have not been consulted in the decision to terminate the post.
- 2. The proposed new services (as we understand them, a 24/7 helpline and 160 hours of counselling per year) are problematic.
 - a. The proposed telephone service is to be run by a third-party organisation with no specialist knowledge of Equity members or the industry.
 - i. It is not a mental health and/or harassment specialist service.
 - ii. We are not aware of any research done to see if this kind of service is wanted or appropriate for Equity members.
 - b. Counselling (for clinically mild to moderate issues) normally takes around 6 sessions per person (1 session assessment and around 5 sessions).
 - i. 160 hours a year means a maximum of 26 people per year being assisted across the whole union. Whilst this is helpful to those 26 people it does nothing to address wider issues of workplace mental health or to establish practices that would bring counselling and other support into workplaces around the country.
 - ii. At these numbers there is unlikely to be any significant positive impact on improving waiting times for access to therapy for Equity members compared to their waits with the NHS and other providers for comparable treatment types (beyond the initial access for a very small number of members in the first 3-6 months approx.).
 - iii. Short interventions like this are primarily designed to help people with mild to moderate, common issues (i.e. depression and anxiety). They are of less use to people with longer-term and/or complex needs or those living with a mental health based disability. We therefore suggest that it is discriminating against some of the most vulnerable members of our union and those most in need of mental health support. This is not the case with the current role.
 - iv. The counselling is being offered by BAPAM registered professionals, but their services do not cover the whole country. Remote therapy has a good evidence base but is not necessarily something all members will be happy with. The proposed system privileges choice for those living in London.
 - v. There is an additional access issue for those living or working in areas with poor phone signal and/or broadband connection who may struggle to access remote counselling as well as having no BAPAM counsellor in their region.
 - c. There is currently no robust evidence that performers require performance specialist practitioners to treat their mental health.
 - i. Whilst some common ground can be useful for therapy it is not necessary to have a shared work history with the practitioner you are seeing. Furthermore, it is debatable if such history should be disclosed by practitioners for discussion with service users at all.
 - ii. Suggesting that performers need to go to performance specialist practitioners may be inhibitory to individuals seeking help. It may increase reluctance to engage with currently available services, services that cannot be matched under the current proposals. In the cases of people with more severe mental health issues this runs the

risk of becoming dangerous. It is essential that the union supports individuals getting the support that is best for them, not just support directly related to their work.

- d. Taking these issues into account the proposed services are likely to offer minimal return to members beyond the relatively small number who will be able to access counselling relatively quickly in the first 3-6 months (approx.). The large sums of members' money going into these services cannot be justified.
- 3. Our understanding was that the Membership Support Assistant for Bullying, Harassment and Mental Health was never meant to be a therapeutic post (i.e. it was never meant to offer counselling etc.). Rather, it was meant to address issues such as policy development, campaigning and lobbying around the issues of bullying, harassment and mental health, as well as signposting and supporting members in specific workplace related cases (i.e. when a member is experiencing bullying on a particular production). Whilst it is excellent that the union is considering support services for the membership it is essential that this does not come at the cost of improving wider workplace practices, which is ultimately the primary role of a union. In our opinion this could worsen members' experiences around mental health in both the short and long-term, and potentially leave members at increased risk.

We believe these reasons justify an immediate reversal of the decision to terminate the post.

As Equity members running mental health focused organisations specifically for our industry we are dedicated to improving the experiences of members up and down the country. We are happy to work closely with Equity to make this happen and would be glad of the opportunity to bring our ideas, expertise and proposals to the union.

We note that, despite our specialisms which are known to the union, none of us were contacted regarding this issue.

Signed by

Alice Brockway Actor, Equity member, Director of Playing Sane, PhD researcher on Mental

Health in Actors

Christian Edwards Actor, Equity member, founding organiser Talk
Harry Long Actor, Equity member, founding organiser Talk

The following individuals are not currently Equity members but either have been in the past or have otherwise worked in and around the performing arts and/or mental health. Each have read the above letter and offer their support.

Caroline McAdoo NHS Cognitive Behavioural Therapist, Director of Playing Sane.

Dr Kathryn Pemberton Clinical Psychologist, former actor and Equity member.

Adam Bambrough Actor & Director, former Equity member.

Daniel Bradford Actor & teacher, founder Mindful Acting