

RESEARCH ARTICLE

Offering flexible working opportunities to people with mental disabilities: The missing link between sustainable development goals and financial implications

Zoe Warmate¹ | Mohamed Khaled Eldaly¹ | Ahmed A. Elamer^{2,3} 

¹School of Management, University of Bradford, Bradford, UK

²Brunel Business School, College of Business Arts and Social Sciences, Brunel University London, Uxbridge, UK

³Department of Accounting, Faculty of Commerce, Mansoura University, Mansoura, Egypt

Correspondence

Ahmed A. Elamer, College of Business Arts and Social Sciences, Brunel Business School, Brunel University London, Uxbridge UB8 3PH, UK.

Email: ahmed.elamer@brunel.ac.uk

Abstract

A global response to Covid-19 pandemic has triggered issues related to stress and social restrictions; thus, mental health is seen as a particular area of concern for social well-being for both policymakers and corporate regulators/companies. Given that mental health intersects with most, if not all, of the 17 sustainable development goals (SDGs), this research brought to light issues surrounding employment of people with mental disabilities (PWMDs) and the financial merits of employing them. An online survey was administered to PWMDs to elicit what possible flexible opportunities could enable them to gain or stay at work. Interviews were also conducted with human resource managers and financial managers. Our results show that there are currently no flexible working opportunities available for PWMDs, which could enable them work effectively to improve both self and general economic growth. The findings of this study will enable employers to explore the financial benefits of employing PWMDs and also aid the government to create better policies to boost employers' commitment to employing PWMDs and achieve some of the UN SDGs.

KEYWORDS

autistic spectrum disorder, bipolar disorder, Covid-19 pandemic, financial benefits, flexible working opportunities, mental health, stakeholder engagement, sustainable development goals

1 | INTRODUCTION

The coronavirus disease 2019 (Covid-19) is choking the global economy quicker and more severe than the 2007–2009 global financial crisis and the Great Depression (Hassan, Nandy, Roberts, Elamer, & Lodh, 2020; Roubini, 2020). At the time of the writing of this study, the unprecedented Covid-19 epidemic has already affected almost 45 million people in 216 countries and territories and killed over 1,181,000 people worldwide (World Bank, 2020). Subsequently, most governments worldwide are positioning their people into several forms of lockdown that lead to issues related to stress and mental

health. As a result, this paper explores the financial implications of offering flexible working opportunities for people with mental disabilities (PWMDs) to give first-hand knowledge to all stakeholders and to advance the application of sustainable development goals (SDGs).

Meanwhile, there is emergent evidence of the global influence of mental illness. People with disabilities are deprived both economically and socially, suffering considerably weaker health consequences, higher rates of unemployment and poverty compared with their counterparts with no disability (World Health Organization [WHO], 2011). With more than 10 million people with a long-term disability in the United Kingdom, legislation (including the 'Equality Act 2010') has

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been enacted to offer disabled persons the same rights as non-disabled persons. However, it is well known that persons with disabilities are left vulnerable to unemployment and job loss (Emerson, Hatton, Baines, & Robertson, 2018). There is a large employment gap as there are 81.7% of non-disabled people in employment and 51.7% for people with disabilities in employment, with the unemployment rate for disabled increasing geometrically at 8 versus 3.3 (Disability Rights UK, 2018). This paper discusses how offering flexible working opportunities to PWMDs can advance SDGs and its financial implication to give first-hand knowledge to all stakeholders.

Within the umbrella term of disability, there is a hierarchy of acceptance. People with physical disabilities are highly accepted while PWMDs struggle greatly to gain employment. Fairclough, Robinson, Nichols, and Cousley (2013) described a mentally disabled person as someone who struggles with emotional or mental illness or has a specific learning difficulty (including autism), brain syndromes or mental retardation. Statistically, the unemployment rate for PWMDs is approximately 85% in the United Kingdom despite how much they try to gain employment. People with hidden, unfamiliar or stigmatised mental disabilities have greater barriers in both the workplace and society as jobs are only customised if the assignment directly benefits the business owner or their organisation (Meacham, Cavanagh, Bartram, & Laing, 2019).

Mental disabilities are a global challenge affecting approximately one in four people at some stage in their life (Gmitroski et al., 2018). Research shows that not many employers view mentally disabled persons as employable or that the flexible accommodations, say, needed to be made, will be costly or not worthwhile as they are not able to make any meaningful contributions to the organisation. It is also alleged that most employees with mental disabilities cannot serve in some long-term shifts as demanded by many job specifications. However, there is yet to be documented literature on the extra financial implications or expenses for employer company(ies) providing flexible working conditions for such PWMDs (especially schizophrenia, bipolar disorder and the autistic spectrum) in the academic literature.

It is important to note that the government is aware of this employment gap and has come up with modalities to increase employment opportunities for PWMDs. As palliative measures, the government through 'Mind' administered a £4.2 million fund as part of mental health consortia during the pandemic in May 2020 to enable various charity organisations to support PWMDs under them (DCMS, 2020). There also is the 'Five-Year Forward View for Mental Health' (Hutchinson, Gilbert, Papworth, & Boardman, 2018), which sets out plans to bridge the gap in employment. However, this cannot be meaningful if employers refuse to employ mentally disabled persons.

Previous research suggests that there are significant gaps in the employment rates between PWMDs and their neurotypical counterparts and delves into some of the reasons behind this, including stigma, historical bias and financial costs (Emerson et al., 2018; Schur, Kruse, Blasi, & Blanck, 2009); however, there is a great amount of data missing on the true financial aspects of the employment of PWMDs. Furthermore, PWMDs may differ in their speed or timings or may

require different shift patterns or quiet workspaces, for instance, in accomplishing the same 'end result'—hence the reason for the flexibilities within such organisation. Regrettably, management sees these as unnecessary costs within their businesses and therefore chose not to hire them (Blanck, 2000). However, there is no evidence showing these acclaimed costs. This research aims to bridge this employability gap by bringing to bear the true essence of equal opportunities in workplaces and to eliminate the 'fear factor' among employers. It went further to x-ray the financial implications of offering flexible working opportunities for PWMD using data from our target audience (i.e. interviews from human resource managers [HRM] and financial managers [FM] and questionnaires from PWMDs) to give first-hand knowledge to all stakeholders. It sought to give light to the government to help with the creation of better policies for the employers to see the financial gains of creating flexible opportunities instead of being clouded in the euphoria of mere historical bias towards PWMD as employees. It was important to carry out this research as it shows that although there are no flexible working opportunities at present, PWMDs are desperate for a change in the economy with an increase in employment opportunities and chances of promotions within the company.

This study adds several contributions to the literature. Firstly, this study shows the financial implications involved in employing PWMD in a country reported to register even more cases in the nearest future with an effort to demystifying employers' claim of excessive financial costs. Secondly, we suggest a way to bridge employability gaps and encourage independence, empowerment and total well-being of the PWMDs. According to Chen, Blankenship, Austin, Cantu, and Kotbungkair (2016), having a sense of purpose while staying in a job will enable PWMDs to contribute positively within the society and help to reduce workplace discrimination. Lastly, public policies regarding employment statistics could be ratified to helping employers understand where they stand to gain (e.g. grants and tax rebates?) to advance SDGs within the United Kingdom.

This study is structured as follows. Section 2 develops the conceptual model and associated hypotheses. Section 3 develops the empirical approach and presents the data and the estimating model. Section 4 presents the empirical results, and Section 5 discusses the main findings and conclusions.

2 | RELATED LITERATURE

Through their 169 interactive and synergistic targets, the SDGs seek to move the world towards greater fairness that leaves no one behind (García-Sánchez, Rodríguez-Ariza, Aibar-Guzmán, & Aibar-Guzmán, 2020; Gerged, Cowton, & Beddewela, 2018; Grolleau, Mzoughi, & Sutan, 2019; Hassan, Roberts, & Atkins, 2020; Mårtensson & Westerberg, 2016; Miralles-Quirós, Miralles-Quirós, & Nogueira, 2019; Roberts, Hassan, Elamer, & Nandy, 2020, Roberts, Hassan, Nandy, & Elamer, 2020). Though not clearly recognised in the SDG, mental health issues intersect with all or most of SDGs, for instance, SDG 1, poverty eradication; SDG 2, nutrition; SDG 3, health;

SDG 4, education; SDG 5, women's empowerment; SDG 8, decent work; SDG 11, sustainable cities; SDG 12, sustainable consumption; SDG 13, climate change and disaster recovery; SDG 16, peaceful and just societies; and SDG 17, partnerships—all of these are associated with mental health. However, meeting its 2030 target becomes illusive in the face of the global lockdown and social isolation due to the Covid-19 pandemic (Rt. Hon. Anne-Marie Trevelyan, 2020). According to Orsolini et al. (2020), social isolation is characterised by pervasive loneliness and boredom, which, in turn, have a dramatic effect on an individual's physical and mental well-being. It supports the fact that a long period of quarantine due to specific ailment causes detrimental effects, which are not limited to anxiety, depression, suicidal behaviour and collective hysteria. There is also this feeling of frustration and uncertainty, especially for PWMDs in their bid to getting basic supplies such as food, toilet rolls and non-prescription medications from supermarkets even after 2–3 months into the lockdown. In an earlier study, DiGiovanni, Conley, Chiu, and Zaborski (2004) reported people's frustrations due to government's inability to meet grocery and other routine supplies during the 2003 Toronto SARS outbreak.

Being in employment, therefore, is highly valued by all people whether they are neurotypical or disabled as it has many benefits, including a higher self-image (Martin & Honig, 2019). For PWMDs, unemployment can have a detrimentally negative effect on their self-esteem, self-image and social interaction (Staiger, Waldmann, Oexle, Wigand, & Rusch, 2018). Although in the United Kingdom the rate of employment has increased over the years, there are still approximately 3.8 million people with disabilities that are out of work even though there is a record-breaking labour market at present. Only 32% of PWMDs are in employment, whereas as little as 8% of persons with schizophrenia are among the employed (Yoshimura, Bakolis, & Henderson, 2018). They not only remain poorly motivated due to their employers' reluctance to give them opportunities to better themselves or gain promotions (Khan, Korac-Kakabadse, Skouloudis, & Dimopoulos, 2018), but they also have limited access to services offering support to keep them in good health and remain in employment (Department for Work and Pensions [DWP], 2016).

Various authors have revealed numerous reasons behind employers' refusal to employ job seekers with mental disabilities; however, the onus has always been on an employer to employ or not to employ. Therefore, it is the employers' perceptions that must be changed if the rate of disabled people in employment will increase (Kaye, Jans, & Jones, 2011).

Three identified reasons why PWMDs are not being employed are as follows: firstly, there are costs associated with accommodations, which is closely followed by the lack of knowledge of specific disabilities within the organisation (McFarlin, Song, & Sonntag, 1991). Secondly, mentally challenged individuals have major stigmas attached to them from the second they are first diagnosed, with unpredictable behaviour being the main issue (Yoshimura et al., 2018) even though in many instances most of the problematic conditions can be entirely cleared through medication (Barclay & Markel, 2009). And finally, there is the company's fear of their business being stuck with a

mentally ill employee whom they might not be able to discipline or terminate employment thinking that should they try, then they will be hit with an expensive lawsuit. Employers have been found only to employ such individuals if they have a legal obligation or there is a particular reason for their employment (Oz, Barlas, & Yildiz, 2019).

People with autism spectrum disorder (ASD) also suffer barriers in obtaining or maintaining a job due to the stereotypical labels. Employers believe that people with ASD are disruptive and are unable to follow instruction, causing reduced productivity. Nevertheless, it has been proven that people with ASD are capable of taking on competitive employment, which is defined as earning the same pay and benefits as their neurotypical co-workers (Wills, Mason, Huffman, & Heitzman-Powell, 2019), as well as being viewed as loyal, responsible and trustworthy (Hernandez & McDonald, 2010).

Gaining employment is a lifelong goal of almost everybody around the world. Being in employment can decrease the likelihood of crime rates and lower the economic costs associated with the unemployment rate (Gmitroski et al., 2018). Whereas some researchers believe that PWMDs prefer low pay, lower status and menial labour positions (Scheid, 2005), others assert that such scenarios will have a negative effect on their self-esteem and for that reason should be given job roles that are competitive and pay over the minimum wage (Sasaki, Sato, Yamaguchi, Shimodaira, & Kawakami, 2018).

For an employer to employ a PWMD, he/she must disclose their health condition. Mental disabilities are often hidden and unnoticeable; that is, it is up to the person whether they disclose them or not. The issue with this is that due to the fear of being stigmatised or discriminated, the sufferers stay mute in conversations (DWP, 2016). However, in many cases, open conversations between PWMD and their employers help them to work together to fulfil their potentials. Some employers believe that if they are assured of the health of their employees, they could have improved engagement and productivity in the workplace and more so can adjust employees' sickness absences. This enables employers to forecast and maintain their skilled workforce and avoid emergency recruitment costs, which can be between £20,000 and £40,000 per person on the average (DWP, 2016).

Due to the high rate of unemployment of PWMDs and the stigma associated with mental disabilities, Yoshimura et al. (2018) observed in a survey that more than 72.9% of PWMDs conceal their mental illnesses even though disclosure could lead to better work adjustments even if the employer was to follow the regulations set in the 'Equality Act 2010' that prevents social isolation. Studies suggest that employers are more likely to accept people with ASD if they are open and honest in the recruitment process as they are seen as likeable and trustworthy. In contrast, people with schizophrenia have a poorer outcome when disclosing their illness in the recruitment process (Sasson & Morrison, 2019).

The global financial crisis linking mental disorders and financial hardship is estimated to be the cause of 4,884 additional suicides that occurred worldwide as PWMDs are three times more likely to have debts than the general population (Galloway, Boland, & Williams, 2018), affecting not only individuals, but the costs of

supporting PWMDs are also expected to be in excess of \$6 trillion by 2030. PWMDs are always associated with one form of debt or another. Because a greater percentage of them cannot secure jobs or perhaps cannot live on government benefits alone, their debt level will always grow. Hood, Joyce, and Sturrock (2018) show that 24% of people with mental health conditions find themselves overwhelmed with debt in comparison with 9% of the neurotypical population but raises to 33% for people with the severe mental illnesses (bipolar, schizophrenia and ASD), due to their lower average income (Lewis, 2018). Hood et al. (2018) shows the economical rates of consumer credit lending in the United Kingdom, giving an average of £3,200 debt level per household.

Rybski (1992) revealed some of the flexible working opportunities that help accommodate PWMDs, which include (i) flexible working schedules, or the opportunity to work from home; (ii) unpaid leave days during difficult periods or appointments; (iii) job shares or dividing large assignments into smaller segmented goals; and (iv) providing clear instructions and extra supervision until the person is comfortable with their job roles. Recognising that change is difficult for many with mental disabilities (Fairclough et al., 2013), their daily to-do list can be checked off as they progress throughout their daily work without necessarily changing it abruptly. Also, offering an enclosed space with low lighting, for instance, where they can go for a quiet moment should they struggle, will be encouraging. It will also be important to explain to other employees that making such provisions for the disabled is not an act of favouritism but to enable such individuals to carry out their job roles without stressful limitations (Siddall, Lovell, & MacLeod, 2015).

Bearing these in mind, the government has offered a list of adjustments that people with disabilities are entitled to including changes to a persons' work pattern or a 'phased return to work' for those who had had a long-term sickness absence; or making alterations to the usual routine, for example, having designated desk arrangements rather than 'hot desking'; or offering additional training for non-disabled employees on disability awareness to being more inclusive to the disabled employees; or having modified equipment, for example, speech recognition computer software that could aid the person to interface with the computer rather than needing to locate specific buttons on keyboards; or offering regular meetings where the PWMDs can talk to a professional about their concerns, regarding both their job roles and their mental health (House of Commons Library, 2019). Therefore, this study seeks to answer the question:

Q1: What are the flexible working opportunities needed by people with mental disabilities?

Another thing that could increase the attitudes of the general population and employers about PWMDs is through social media. To date, the media's portrayal of mental health is mainly inadequate and outdated. Through gaining a greater insight into the facts behind mental illnesses, psychiatric societies could provide seminars or informative bulletins, supplying employers with current reliable information.

There has been some research done to disclose the overall economic costs associated with employing PWMDs. An estimated £26 billion is reported to have been lost annually by businesses through sickness absence and productivity losses. In contrast, another report found that disabled people are five times more likely to have long-term sickness absences liable to cost the economy approximately £9 billion a year (DWP, 2016, 2019a), meaning the question needed to be researched is:

Q2: What are the financial risks and benefits of offering flexible working opportunities for people with mental disabilities on the employer?

The DWP (2016) calculated that ill health in the United Kingdom costs the economy around £100 billion per year. The cost of inactive people in the economy costs the government approximately £50 billion per year. Furthermore, the cost of medically treating people with mental conditions cost the National Health Service (NHS) around £7 billion. In comparison, the rest of the remaining £50 billion was lost through lower tax revenues or national insurance contributions due to lost wages. It is the government's proposition that if they were able to support as little as 1% of PWMDs to find work and come off of 'Employment and Support Allowance', they would bring savings to the economy of £240 million and add a boost of about £260 million into the economy through employee taxes and national insurance contributions (DWP, 2017).

Conclusively, this review proves that there is a large amount of information missing from existing research as there is still a high amount of conflict between employers fearing the risks of flexible working opportunities and the benefits of helping employees with mental disabilities. Also, there is no research explaining the actual benefits, risks and financial implications of offering these flexible working opportunities. This research strives to bridge these gaps by answering the question:

Q3: How will these flexible working opportunities benefit the economy as a whole and consequently advance SDGs?

3 | METHODOLOGY

This research was divided into Parts A, B and C. Part A was through the completion of an online survey containing structured questionnaires and a hypothesis that answers research Q1. This section enabled us to ascertain the experiences and challenges of PWMDs in their previous job positions, whether they chose to inform their new employer of their mental disabilities and what flexible working opportunities they enjoyed or feel would be required in order for them to carry out their future job roles in a positive manner. The survey questionnaires were administered on 22 July 2019 and retrieved after 4 weeks to allow participants to respond at their free volition. Less concentration on the effects of lockdown due to the Covid-19 pandemic, which took effect circa 8 months

(23 March 2020) after the survey, was one noteworthy limitation of this study.

The online survey is chosen due to its greater coverage. There are approximately 4 billion Internet users globally, with 94% of them being English-speaking users with the use of the Internet. Another reason is the flexibility and speed in which the survey can reach many areas globally to form an in-depth response (Ball, 2019). They can be done at a time that is convenient for the recipient, and because the recipient may not know the researcher, they are less likely to give biased responses (Tingling, Parent, & Wade, 2003). To Ray and Tabor (2003), an online survey system protects the confidentiality of all involved. At the beginning of the survey, there was a statement of confidentiality explaining how the finding will be used throughout the research and destroyed when completed so the recipients can decide whether to take part in the survey. The problem with online surveys is the risk that the instructions may seem unclear, meaning recipients become frustrated and exit the survey without completion.

Part B involves an interpretative phenomenological analysis of semi-structured telephone interviews (carried out on 26 August 2019) with three HRM. The phenomenological approach was adopted to enable us to understand the 'lived experiences' (Husserl, 1931) of the interviewees and to find out how the flexibilities from the online survey could be adapted into their various workplaces. A further three interviews with FM (culled from three different industries—a customer-based industry, an office-based industry and an educational institution) were also done in order to have their takes on the financial costings of offering flexible working opportunities in their industries.¹

The semi-structured interview was chosen as it gives a known base of questions that require answers before carrying out the interview and also gives space to add unknown questions that may arise within the interview (Galletta, 2013). Interviewing over the telephone prevents the interviewee from picking up on the facial expressions or body language of the interviewer, which could cause them to give biased responses to the questions instead of their honest opinions. As biased responses can be a risk of asking these forms of questions to professionals and managers, it is imperative to ask the questions in a way that they do not need to give their own attitudes but to speculate those of employers in general. It could also give a greater chance of finding a suitable time for the interview as it does not require a formal office space and time to meet, which, if the participant is in a different geographical location, could prove tricky. This indirect method is more effective as it asks the participants to freely contemplate on the reasons that other employers may be reluctant to employ PWMDs (Kaye et al., 2011).

Part C went further to gain secondary data on the financial implication of offering PWMDs on an economic scale. Garnering all of this information contributed to answering the main research question of the financial implications of offering flexible working opportunities to PWMDs.

The target population for this study was 100 participants living with three identified mental disabilities (ASD, schizophrenia or bipolar) within the United Kingdom. The participants would need to have one of the three mental disabilities and have been through the employment process. A structured questionnaire was posed to them via 'SurveyMonkey' and was administered on social media forums where people with these mental disabilities can communicate with one another. One out of 79 total responses retrieved was invalidated due to having different health disability, thereby bringing the sample size to 78. There are no set norms as to what may or is to be received or accepted as a reasonable response rate (Baruch, 1999); however, Gendall, Hoek, and Esslemont (1995) suggested response rate to fall within the neighbourhood of 10%–20%. The response rate for this study was 78%. Chi-square was employed to examine whether there is a plethora of flexible opportunities made available for PWMDs that can enable them to stay in their jobs and contribute to the financial growth of the company and the economy at large.

4 | DATA ANALYSIS AND DISCUSSION OF FINDINGS

The purpose of this study is to find out the financial implications of offering flexible working opportunities for PWMDs. The section aims to present and analyse data obtained from the questionnaire items for PWMDs. Interview responses from both HRM and FM were also presented. First was the individual's biodata, and analysis of respondents' job experiences using percentages, followed by hypothesis testing. Ten multiple-choice (three biodata, two open-ended and five closed-ended) questions were administered where 78 responses out of 100 (i.e. 78%) of the target were retrieved.

4.1 | Survey analysis

Forty-nine out of a total of the 78 respondents who participated in the field survey are female, taking up a greater percentage (62.82%) of people who had had or are living with mental disability in the United Kingdom than their male counterpart, making up 38.46%. More adults within the ages of 25–54 contribute to the majority of people living with mental disabilities or have had one form of mental illnesses in their lifetime. About 33.33% of the respondents fall within the age bracket of 35–44 years of age, whereas 21.79% and 28.21% are within the age limits of 25–34 years and 45–54 years, respectively. It is also evident that young adults (under 24) are not ruled out of those having job-related issues or perhaps left jobless due to their mental health challenges contributing to approximately 10.26% of the study population. People in these age groups are inadvertently contributing to more than 80% of an ideal labour force of an economy through their taxes and other contributions (e.g. National Insurance) to the gross domestic product (GDP) of the nation if gainfully employed, irrespective of their health status.

¹For further details, see Appendices A, B and C.

Bipolar, schizophrenia and ASD are contentious mental health illnesses that really affect people in the society with bipolar (52.56%) affecting more than half of the study population followed by schizophrenia (26.92%) and 12.82% for people living with autism who may have or may have had employment issues due to their mental condition. There were six participants who did not have one of the three illnesses under our study. However, they suffered from the psychotic disorder, which does have the same stigma as those three mentioned above. Furthermore, some of the respondents who indicated one form of mental ailment also admitted to other multiple challenges, making it very hard for them to be accepted or continue in their workplaces; 25.64% of the sample population showed such different proportions of additional mental health challenges (e.g. depression, anxiety and personality disorder) they live with.

No less than 52.56% of the respondents alluded to some sort of discrimination in their workplaces during their employment history. It is not certain why many PWMDs are dismissed or not being accepted into workplaces if employers or colleagues claim not to have shown discriminatory tendencies towards them as shown by 48.72% of the sample population who say they are not being discriminated at. Suffice to say that most employers who are proponents of these discriminatory acts employ workers through job agencies in order to avoid being sued in cases of counter-reactions. Because they do not have a direct contractual agreement with workers, requesting a worker to stop his/her job in the event of any suspected mental illness is quick, without remorse, and could be done easily by these agencies who directly employ them. Job agencies, on the other hand, frame excuses so that they could conceal such reasons.

When asked if they disclose mental health condition to prospective employers, the results of the field survey show that people do not choose to disclose their mental health labels to their prospective employers during the process of gaining employment as obtained from 87.17% against 14.10% of the population. The findings show that despite the creation of legislation (i.e. Equality Act 2010), the fear of discrimination and stigma for persons with mental disabilities is still high when it comes to the disclosure of their mental illnesses during the employment process. However, by not disclosing their mental health, PWMDs are causing greater risks for both themselves and their prospective employers. Through hiding their disabilities, they are causing added stress onto themselves as they are now required to hide their struggles and put up a pretense that they are

well. This has been proven not only to worsen a person's mental health and increase the likelihood of requiring sickness absences, but it also creates unproductivity in the workplace and added costs for the employer where he tries to fill the sickness absences. He may even have to rehire in many cases where the PWMD cannot carry on working.

PWMDs struggle to retaining jobs as 74.36% have said to have had five jobs and none having less than two jobs during their employment history. This is discouraging as they now feel they are not able to contribute to society efficiently.

I. Hypothesis testing: Opinions on flexible opportunities

In order to elicit reflections of respondents' view of flexible opportunities in their workplaces, we used the hypothesis so raised to answer the giving research question: What are the flexible working opportunities needed by people with mental disabilities?

H0. There are a plethora of flexible opportunities made available for PWMDs that can enable them to stay in their jobs and contribute to the financial growth of the company and the economy at large.

Table 1 shows that there are little or no flexible opportunities in place at present to help PWMDs succeed in their job roles or for potential employment that could enable them to compete favourably towards promoting the country's economic growth, which supports previous literature. However, there are a number of opportunities that would be beneficial for mentally disabled people. The results show that PWMDs do not wish to shy away from but engage fully on a day of hard work as reflected in Table 1 under 'Reduced Hours' (35.90%) and 'Reduced Responsibilities' (47.44%), respectively, of respondents showing a positive and adaptive willingness towards work. One important flexible opportunity required by respondents is the need for a quiet and safe haven to enable them to reduce stress and help calm them should they become overwhelmed by the day's work pressure. Over 80% (80.77%) of the respondents agreed strongly to this notion.

Similarly, if the right instructions on a job specification are well thought, PWMDs also affirm that they could diligently carry out their duties like everyone else as attested by 73.08% of the respondents.

TABLE 1 Responses to Question 8 (source: Field survey, 2019)

Answer choices (ith)	Response frequency (O_i)	Expected frequency (e_i)	$(O_i - e_i)$	$(O_i - e_i)^2$	$\chi^2 = \frac{(O_i - e_i)^2}{e_i}$
Reduced hours	28	41	-13	169	4.12
Reduced responsibilities	37	41	-4	16	0.39
Quiet and safe place to calm if overwhelmed	63	41	22	484	11.8
Leave days	51	41	10	100	2.44
Clear instructions	57	41	16	256	6.24
Others	10	41	-31	961	23.44
Total	246	246	0	Σ_i	$\chi^2 = 48.43$

Note: Here, $D_f = 5$. Calculated $\chi^2 = 48.43$ against 11.07 at 5% level of significance on a standard chi-square table.

PWMDs, especially with ASD, are capable of achieving great tasks, and once they are given clear instructions on how to accomplish these things, they can as well be left on with little or no supervision; 65.38% of the population who stressed the importance of 'leave days' claims it leverages their opportunities to arrange doctors and other therapeutic appointments for the needed recovery from mental health illnesses. Individuals who suggested other possible 'flexible working opportunities' as having support assistance in their workplaces advocated for greater public enlightenment on the knowledge of mental health disabilities via seminars, documentaries, and so forth in order to eliminate the stigma or tag attached to PWMDs. However, those who perhaps may have dropped out of their numerous jobs due to their mental health condition advocated for more government supports and benefits because they cannot have a paid job well enough to cater for their well-being. It is, therefore, the researcher's opinion that the government can save tangible finances tied to PWMDs who literally live on benefits by only being responsible for 50% of the current benefit, say, encouraging both the mentally challenged and the employer engage rightfully to close the unemployment gap and contribute a certain percentage to the welfare of such employee just as it is with the pensions scheme.

The most important flexible working opportunity required to help the survey population in working efficiently is the availability of a quiet and safe place to go when overwhelmed, with 41.03% of the respondents believing it is 'very important' and 48.72% saying 'important'. The same number of people also found it 'very important' to have some level of flexibility within the organisation, be it having additional breaks or flexibility in the very structured 9 AM to 5 PM work times. And again, the use of clear and concise instructions is of high importance. Although the need for leave days is important, 51.28% against 66.6% of respondents wanted paid leave days. Only 47.44% thought that it was important to have reduced hours. This supports the previous research conducted by Rybski (1992).

Going further, 67.53% of participants revealed that there was no expert (i.e. occupation health therapist) available for them to talk with during times of feeling overwhelmed with their work commitments and also the absence of a buddy system; 65.79% of the survey population agreed that there was no buddy system in a place where employees can go to their 'buddy' (work acquaintance) to discuss any concerns that they could have in the workplace. The benefit of a buddy system for both mentally disabled workers and their neurotypical counterparts is a setting employees could speak with their colleagues who may have had a similar experience that they were able to resolve, giving them the ability to transfer their knowledge onto the person struggling. The issue is that PWMDs can sometimes shy away from socialising, so with the buddy system in place, it gives them somebody they are able to talk with; 58.67% of them claim there were not enough warnings in place within the organisation preventing their personal disclosures from being spread around the organisation.

In conclusion, the survey gave the opinions of many people who suffer from the three most stigmatised mental disabilities on what flexible working opportunities they believe would be important in helping them in their current or future job roles being offering clear

and concise instructions on their job tasks, offering a quiet and safe space where they could go should they feel overwhelmed and require somewhere that they can go to calm themselves and offering leave days so that they can attend doctors or therapy appointments. These findings were justified by the hypothesis, which shows that there are little or no flexible working opportunities available for PWMDs at present. This result offers more understanding of the multifaceted interlinkages between the SDGs, mental health disabilities and their fundamental targets. Thus, this evidence may support policymakers to think scientifically about connections between the diverse SDGs in the context of decision-making about empowerment and give suitable and fair chances to PWMDs.

4.2 | Interview analysis

I. Perception of HRM

From the analysis of the survey and results from the hypothesis, we developed structured questions for the interviewees in relation to workers' employability and the financial implications of offering PWMDs such positions. Telephone interviews were conducted within the three different (office-based, customer-based and education-based) organisations. The office-based company buys, controls and sells manufacturing apparatus and has approximately 150 employees within the organisation, whereas the customer-based company is a small café that hires 10 people of all different abilities to make and sell hot/cold food and drinks. On the other hand, the school-based organisation is of primary settings.

When asked if they employ and how they deal with employees who chose to hide their mental disability within the organisation as evident in our survey findings, there was found visible similarities when comparing the responses from the HRM of the office-based organisation and that of the customer-based organisation as they both try to encourage full disclosure of an employee's mental health status during the recruitment process. The human resource (HR) advisors in the office-based company have qualified mental health first aid staff and feel they are able to assist if a person is struggling due to their connection with an impartial counsellor, whereas the customer-based HRM feels that they could assist the employee in finding the right role within the organisation if they are able to see their strengths and weaknesses from the beginning of the employment process. Although neither of the companies would ask a person if they had any disability, they both hoped that the employee could decide to disclose it, as not doing this makes the employee more likely to suffer from paranoia and insecurity.

Suffice to say that the education-based setting dismissed the employment of PWMD outrightly. Their reason for this was because their schools do not employ anybody that has been diagnosed with a mental disability. They believe the decision was made for the protection of their students that many criminals in history use mental health label as an escape root out of the criminal conviction, thus getting away from having it disclosed on their Criminal Record Bureau Check

carried out by the Disclosure and Barring Service (i.e. DBS checks). In order to protect the children in their care from this possibility, they have chosen not to employ anybody with a mental disability label in any job role within their school. In an economy like ours where the education sector thrives, it means PWMDs will continually depend on the government for funds rather than working for themselves.

Divergent views ensued when asked about why an employee feels discriminated against in some work settings. The office-based HRM believed that through the non-disclosure of their mental illnesses, a person becomes insecure and constantly on edge, thus having the feeling of being discriminated against despite the fact that most employers are quite empathetic and considerate. In contrast, the HRM within the customer-based company found that there could be instances of high discrimination, especially from customers and not from the employers or colleagues within the workplace. The HRM felt this is due to a fear factor as people are not willing to accepting things that they have little knowledge of. Although they have different opinions on the level of discrimination, both parties believe that in order for an employer to be able to combat discrimination within the work setting, there should be an opportunity to educate employees within the organisation. The HRM from the customer-based company went further to suggest all health issues and disabilities be studied and children fully educated on the facts within their education at school in order to get rid of the stigmas and myths. Also, previous literature (Abdelfattah, Elmahgoub, & Elamer, 2020; Alshbili & Elamer, 2020; Elamer, Ntim, & Abdou, 2020; Elamer, Ntim, Abdou, & Pyke, 2019; Elamer, Ntim, Abdou, Zalata, & Elmagrhi, 2019; Elmagrhi, Ntim, Elamer, & Zhang, 2018; Khatib, Abdullah, Elamer, & Abueid, 2020) suggests that board diversity and governance structure may improve corporate social responsibility, performance and reporting by legitimising the companies actions and adhere to social actors.

Furthermore, it was evident that both companies have safe spaces set aside where their employees can go if they struggle or become overwhelmed during their workday to use if a 'timeout' is required. They also offer training and written instruction manuals YGcreated for a number of the processes within their organisations. However, they did not subscribe to the use of support workers within organisations that they claim not beneficial and could cause unnecessary stress and extra financial costs to the business in the areas of health and safety, food hygiene policies and matter of confidentiality within the business. Neither company has a permanent occupational therapist (OH) on-site but is able to give an employee the telephone numbers of persons that can help 24/7 or agree that a person's confidential information should be disclosed unless it is done with permission from the employee.

II. Perception of FM

Although the HRM from both companies have similar opinions and processes, the views from the FM are quite different. It shows that the costs associated with having PWMDs vary directly on the size of the company. As seen from the results of the interviews, the costs of having a person leaving a job for a small customer-based

company are minimal. As if nobody left, they only advertise the job opening in their window and on their Facebook accounts while the other members of staff pick up the missed shifts. But the costs within a larger office-based company are greater. To them, the costs are not just with those associated with recruiting a new employee (which alone can cost up to 25% of the persons' annual salary) but also includes the costs relating to further training and lost productivity. In contrast, the new employee catches up to the skill level of the previous employee.

The FM of the customer-based company was not able to disclose the annual cost of sickness absences as they did not have that information at hand. However, the costs on a daily basis were said to weigh an additional £65 from the recruitment agency on top of the hourly salary of £8.25 for such employee. The annual cost of sickness absences for the office-based company was in excess of £1,660, and the daily costs depend on the skill set of the employee with lower level employees costing an additional approximately £80 and higher skilled employees up to £250 per day.

For flexible working opportunities required by PWMDs, the FM was able to give opinions on the associated costs. In the course of extending their building for creating a quiet space for their employee with ASD, they spent around £5,000, which incorporated a panic button that sends an alarm through to the till area. At the same time, the FM in the office-based company said it would cost no more than £10 for the painter to decorate any of their numerous rooms, which could easily be converted. That is, it will also cost very little in the creation of pamphlets explaining the processes within a job role. However, both felt that employees learn more through training sessions and under the watchful eyes of other skilled colleagues. They also attest to the fact that the creation of a buddy system within any organisation would cost nothing at all and would likely benefit both PWMDs and their neurotypical counterparts. Nevertheless, the costs of letting support workers help employees will be too high and may lead to a breach of confidentiality within the organisation.

Neither of the companies has OH at hand. The small customer-based company felt that the costs of these were too high but disclosed that should a person require mental health assistance. They would offer them the telephone number for the local crisis team while the office-based organisation stated that their HR team have mental health first aid training to give initial advice should the employee require further assistance, but the costs were steep. Annual salaries for employing an OH on a full-time basis range between £35,000 and £40,000, whereas the daily cost of an OH ranges from £250 to £400 and more where some require additional charges, for example, travel expenses.

The final requirement of PWMDs is flexibility in their job roles. This includes the number of hours worked, or times worked each week. The customer-based company revealed that there are no costs associated with this type of flexibility as the organisation is like a little family unit where they can rely on each other to cover shifts if enough notice is given and as long as there are enough members of staff working to get them through the opening hour. However, the office-based company has found that there were some disadvantages to

offering this type of flexibility. The FM explained that when employees were given the opportunity to work on a part-time basis, although the wages paid were lower, the other costs were quite high. These included the lost productivity, the higher likelihood of absenteeism and the lack of specialisation in their skills due to part-time staff not being as committed to their roles as full-time staff. One would want to say here that this will affect the economy as a whole in that the employee's wages would not be enough to be to pay taxes, which would affect the UK tax income but not with a well-reviewed pay rate.

The above findings answered the question 'What are the financial risks and benefits of offering flexible working opportunities for people with mental disabilities on the employer?' It gave insight into the financial costs of employing PWMDs. It was evident that costs were not, in fact, as high as some employers initially thought. It is the researcher's belief that these findings will help the employers see that the perceived high costs were mostly fictional.

The benefits of having PWMDs working within the organisation give a company the knowledge that they are investing in a person's recovery process. If they invest time into the well-being of their employees, they are likely to see a rise in productivity and a lower rate of absenteeism. The costs of creating flexible working opportunities for people with mental illnesses are minimal and could be a worthwhile investment in the long run. Space where a person can go if they struggle or panic is likely to cost no more than £5,000 but would be a worthwhile investment for a long time. The cost of creating leaflets that give clear instructions explaining the work process or giving extra training time would not cost anything other than time. And the cost associated with leave days to accommodate a person's health appointments including the doctors or therapy sessions is dependent on the skill set of the individual, but if the cover is required then, it would be approximately £200 a day. It was found that it is not always possible for workers to bring their support workers along to help them due to a company's regulations. The costs of having an OH vary, depending on whether they would be required to work on a full-time basis within the organisation or as ad hoc, but the buddy system is a free alternative if employees just need a friendly chat and somebody that can discuss work-related issues with them. Supporting a person, both by accepting them during their employment process and throughout their employment with the organisation, will reduce the number of sickness absences, thus saving the organisation's costs of up to £200 per day.

4.3 | Analysis of the economic findings

These results looked at the secondary data of the economic and financial implications of offering flexible working opportunities to PWMDs within the United Kingdom using data from 'Mental Health Foundation (2016)' and 'DWP (2019a, 2019b, 2019c, 2019d)'.

There exist little or no higher educational qualifications (e.g. GCSEs, A-Levels and Degrees) among 3.4% of persons aged 16–24 suffering schizophrenia; 2% above the age of 25 sufferings bipolar disorder; and 1.5% of the population suffering from ASD.

From the estimated 10 million, there are only 181,600 people who have a mental illness that is too severe to work, whereas the others do wish to be in employment but are not, due to the aforementioned reasons (stigmatisation, stereotyping, etc.) specified above, including one in five people losing their jobs due to discrimination. Therefore, it is obvious that there will be an equivalent monetary implication on the economy.

On an annual basis, around 300,000 PWMDs lose their jobs, thereby having a high financial cost on the economy. People of working age costs businesses approximately £30,000 and £19,078 for people between 45 and 65 years of age. It costs the economy £5.4 billion on the whole. However, giving employers the needed training and skills in order to support their employees could save their companies up to £8 billion per year.

An issue that we have found to cost businesses and the economy is sickness absences; 138.7 million days off per year (approximately 12.7% of all absences) are from people with mental health conditions. However, if employers were able to invest in the management of the health and well-being of their employees, there would be many financial benefits. Large companies (about 72% of FTSE) are already taking a proactive approach to helping employees remain in good health with nine out of 10 providing occupational health services. But only 11% of FTSE 100 companies have disclosed supporting the mental health of their employees. In comparison with the smaller companies, only 44% are proactively thinking of helping employees remain in employment, and only 61% providing occupational health services as they feel that the financial costs outweigh the benefits of an employee's health (DWP, 2019d). Eight out of 10 companies believe that they do not have any employees that struggle from mental health illnesses. For a complete cognitive behaviour therapy intervention with 8 overall hours of treatment, it would cost an employer £240, whereas to reduce all stigma associated with a person's mental health through education and training, it would cost £80 per employee. However, if an employer were to invest an initial £40,000 into this training, they could create more acceptance, gain higher productivity, reduce absenteeism and would result in a saving of around £347,000 (i.e. £8.60/£) annually.

If a staff member had the knowledge and education to pick up signs of a colleague developing a mental illness, such colleague could benefit from early interventions, which could save the economy up to £639 million a year. This is true as identifying the illness early would prevent around 30% of the symptoms from ever occurring, hence saving the economy the costs associated with helping people with high psychoses through the NHS and social benefits. It would also help to keep the employees in work.

One major issue that people with mental illnesses must contend with is the way in which they are perceived in the media. Although discrimination is no longer allowed, 14% of articles and videos that are shown in newspapers, in social media and also in movies portray PWMDs as dangerous and violent. However, PWMDs are far more likely to self-harm than they are to harm another person. Between 2013 and 2016, there were only 51 homicides recorded by mentally challenged people against 4,882 suicide cases with as

little as 8% of people with mental illnesses in the prison system (Mental Health Foundation, 2016). The cost of treating mentally ill people annually was estimated at £176 million by the NHS due to domestic violence.

The suicide rate for people within these three categories (autism, schizophrenia and bipolar) is 23.9 per 100,000 of the population of the United Kingdom, and of this number, 75.6% are males. To set up suicide prevention within the United Kingdom, it would cost the economy £8 million, and to provide education on this topic, it would cost an additional £19 million over a 10-year period. These figures will skyrocket in the advent of the Covid-19 pandemic as many organisations are already closing due to the lockdown. According to Tera, Marc, and Vivian (2020), about 24% (approximately 7.6 million jobs) of the country's workforce are at risk due to Covid-19-related lockdowns, including furloughs and layoffs. The pandemic impacted on nearly all aspect of the economy but is specifically hard on those living with mental health (Rt. Hon. Anne-Marie Trevelyan, 2020). With up to 73% of employees being put on furlough during the lockdown, especially those in the lower rate roles (e.g. accommodation and food services), managing to sustain their livelihood with only 80% of their wages is likely to increase the numbers of PWMDs cum suicide rates, because the mental health services now work only with a skeletal crew and talking therapies also closed. There are currently no statistical data to correctly measure the unemployment rate of people with the three mental disabilities being researched here due to the effect of the Covid-19 pandemic.

From records made available by the DWP, 2.3 million PWMDs are on Personal Independence Payments, and 2.1 million PWMDs are on Employment and Support Allowance. The overall costs for all UK employers associated with employing people with mental illnesses where a person is left without flexible working opportunities or aided to keep an employee in work are between £33 billion and £42 billion annually. This includes sickness absences costing £8 billion and presenteeism between £17 billion and £26 billion (where the employee remains in work, but productivity is low), and £8 billion is the cost associated with the staff turnover. The overall costs on the economy are far greater at £105.2 billion per year, which is equivalent to 4.5% of the country's overall GDP. These costs include the DWP benefits, the NHS payments, lost taxes and national insurance contributions and the output of products that are sold internationally (DWP, 2019a, 2019b, 2019c, 2019d). To date, the UK government has invested a total of £6.629 billion into research on mental health services and investigation of benefits for PWMD. The costs of seeking further research into schizophrenia would cost the economy £12.6 million (i.e. £61.39 per person) and further research into ASD for £2 million equivalent to £3.98 per ASD sufferer.

Beyond saving and improving countless lives, investment in mental health may increase productivity and give a return on investment. The World Bank has identified interventions that are feasible, affordable, cost-effective and scalable in all economic settings. The best approach, suggested by the 2013 WHO mental health action plan to advance SDGs, is a multisectoral strategy, which conglomerates universal and targeted interventions for promoting mental health and

preventing mental disorders and reducing stigmatisation, discrimination and human rights violations.

In conclusion, the above analysis answered the research question 'How will these flexible working opportunities benefit the economy as a whole?' Suffice to say that offering flexible working opportunities for PWMDs through investing in the health and well-being of employees by employers, plus educating all of their employees into the facts surrounding mental health illnesses, for example, early warning signs, myths and stigma surrounding the illnesses, will generate savings for both the employer and the economy as a whole and consequently advance SDGs. We believe that our results will be helpful to increase the pace of achieving the SDGs linked to mental health in the United Kingdom.

5 | CONCLUSION AND SUMMARY

The rights of PWMDs are denoted in SDGs 4, 8, 10 and 11. These SDGs deliver a basis and a framework to focus on mental health from many angles with renewed urgency. However, the 2030 SDGs Agenda is confronted with several worldwide concerns, particularly the Covid-19 pandemic and the related economic downturn. This research shows that PWMDs encounter many barriers in obtaining, maintaining and fulfilling employment opportunities. Although the labour market is at its highest, the unemployment rates of people with mental illnesses are still extremely high, with only 8% of schizophrenia sufferers in employment. The ones that are able to gain employment are stuck in low-level jobs with little or no chance of progression. However, the survey showed that a number of flexibilities could be put in place. The interviews gave an insight into the feasibility and financial costs of application of these flexible working opportunities, and the secondary research gave light to the financial benefits on an economic basis.

The stigma associated with a person's mental health is known to have adverse effects on their ability to carry out productive and skilful job processes or their ability to contribute to the effective operations within the workforce. These stigmas make it extremely hard for PWMDs to gain employment and maintain employment through the creation of accommodations that they require to work effectively. Those who could perhaps not contain the discrimination are compelled to leave their employment.

Both previous research and the results of the field survey show that the mentally ill people are likely to refuse disclosure of their mental health status to their potential employers with the knowledge that sharing such information would have a negative influence on their ability to gain employment and also the fact that employers are no longer permitted to ask about a person's health status directly due to laws being created to protect vulnerable people with disabilities through the Equality Act 2010. The likelihood of an employer finding out about a person's disabilities is low. However, they are able to ask questions on an application document that could make them question a person's mental health, for example, whether or not they have been hospitalised, received any form of health treatment

in the past year or the reasons for their lengthy employment gaps. This could still lead to a prospective employee losing the chance of being employed should the person acknowledge any health disability.

We can further posit that PWMDs require certain flexible opportunities to be in place within the workspace, including a quiet and safe room with no distractions; a flexible schedule with leave days so that they can attend doctor or therapy appointments; or clear and concise instructions that are easy to follow through by either additional training sessions or a leaflet using pictures to describe what is required. It should be a legal requirement for an employer to make these alterations as they already have access to financial assistance from the government in doing these accommodations.

The results show that the stigma associated with mental illnesses is still at large within the United Kingdom despite the new legal obligations. The interviews with the two HRM show that it would be feasible for companies to carry out alterations that would benefit the people with mental illnesses although there are issues related to letting support workers assist them in certain workplaces. However, if accommodations could be put in place, it could be beneficial on many levels; for example, if a person was not able to work due to their disability without their support worker there to assist them, by letting a support worker work alongside them, there would be the employment of two people rather than one, which could boost the labour market numbers to their highest in recorded history, meaning two fewer people would be receiving DWP benefits. The interviews from the FM show that the costs associated with creating flexible working opportunities for PWMDs are not as high as previously believed.

Debt is another major effect on the economy. When looking at the financial implications on the economy as a whole, it is important to note that although debt in small amounts is beneficial, however, on a longer term at larger scale, it has detrimental effects on the economy. When people with mental illnesses who suffer high debts become unemployed, their spending routine lowers steeply, so they stop buying their usual products, which drop the economic growth rate of the country. By employing people with mental illnesses, they could lower the debt levels, and this will contribute to the economy's monetary system. Finally, the secondary data sought from the two sources show that the financial benefits on both the employers with savings of all UK companies (being in the millions) and the economy as a whole (with savings being in billions) will raise the overall GDP of the country, especially with the upcoming Brexit arrangements.

This research brings to light the little or no flexibilities PWMDs face when in employment and further reveals some of the accommodations required by PWMDs and the financial cost of implementing these within the workplace as well as the overall benefits of doing so. The research also shows the employers what financial sources are available to them from the government should they chose to make such accommodations to employ PWMDs. It would also help the government to see that their current methods are not effective, and a new method needs to be implemented to enforce the employment of PWMDs, and consequently, for promoting mental health in and for

the SDGs, including available resources. Consequently, in the post-Covid-19 era, authorities need to help PWMDs more to prevent any indirect harm and maintain the pace of investment for accomplishing the SDGs.

Yet the current study has limitations that should be acknowledged. We rely on self-reported information provided by participants on their mental health disability, which could be biased to some degree. Also, survey links through social media only required voluntary responses; therefore, there is the likelihood of respondents opting out. This is evident in obtaining only 79 responses out of a 100-target population. There have been a number of gaps in our knowledge around the financial implication of employing PWMDs that would benefit the economy. However, we have made conscious efforts in all sections to highlight feasible areas of a reasonable likelihood of success for implementation. We would suggest for the government to create and implement strategies for the employers to introduce opportunities to accommodate support workers to help assist PWMDs while on their respective duties. This should also include allowing the support workers to monitor their clients even at interview stages. Further studies should also look widely into other mental disabilities to ascertain the level of stigmatisation if any, in workplaces. Although reorientation of the public on mental health is inevitable, this could be achieved through writing, print and social media platforms.

We also observe that the exhortation to 'stay at home' during the coronavirus crisis had a devastating impact on people already living with mental disabilities. At the time (between March and May 2020) when the spread became worrisome, the government like everyone else was all grappling with anxiety seeking to stem the spread and safeguarding the health system especially against vulnerabilities that might put mentally disabled people at risk of life-ending behaviours including stress and loneliness due to altered social behaviour. It is the researcher's belief that the communities and local and national governments can through volunteering, campaigns and donations (where necessary) offer the needed support services towards achieving the targets of the SDGs; however, lack of general knowledge about the novel coronavirus posed a major limitation call for further studies. Thus, we call for more research to better organise, link and expand our evidence to support all social actors work together to fulfil SDGs.

ORCID

Ahmed A. Elamer  <https://orcid.org/0000-0002-9241-9081>

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How to cite this article: Warmate Z, Eldaly MK, Elamer AA. Offering flexible working opportunities to people with mental disabilities: The missing link between sustainable development goals and financial implications. *Bus Strat Env*. 2021;30: 1563–1579. <https://doi.org/10.1002/bse.2694>

APPENDIX A: FIELD SURVEY QUESTIONS, 2019

(SOURCE: <https://www.surveymonkey.co.uk/r/8QY3H9V>)

1. What is your gender?

- Male
- Female
- Prefer not to say

2. What is your age?

- Under 18
- 18-24
- 25-34
- 35-44
- 45-54
- 55-64
- 65+

* 3. What is your disability?

- Autism Spectrum Disorder
 - Schizophrenia
 - Bipolar Disorder
 - Other (please specify)
-

* 4. Do you feel discriminated against due to your disability?

- Yes
- No



* 5. Do you state your disability at any point through the process of applying for a job?

- Yes, because it is advised by law to do so
- Yes, but only after receiving a job offer
- No, I prefer to keep my health status private
- No, I was not asked

6. How many jobs have you had in your employment history?

- 1
- 2
- 3
- 4
- 5+

7. How many of these jobs do you think ended due to disability?

- 1
- 2
- 3
- 4
- 5+

* 8. What could be put in place to help you/others remain in a job?

- Reduced hours
- Reduced responsibility
- Quiet and safe space to calm if overwhelmed
- Leave days
- Clear instructions
- Other (please specify)

* 9. How important are the underlisted flexible opportunities to enable you to work efficiently?

	Very Important	Important	Slightly Important	Not Important
Paid leave days	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Unpaid leave days	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Reduced hours	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Quiet and safe place to ease stresses at workplace	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Remaining personal confidence	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Flexibility in the workplace	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Clear and concise instructions to job process	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My duty does not require complex cognitive thinking	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

* 10. How do your present/previous company treat confidential issues within the workplace?

	Strongly Agree	Agree	Disagree	Strongly Disagree
I can talk to an expert whenever I'm overwhelmed	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
There is no buddy-system with other employees, to discuss issues surrounding concerns in the workplace	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The issue of mental health discrimination is low	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
There are strict warnings against personal disclosures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

APPENDIX B: HUMAN RESOURCE MANAGERS' INTERVIEW CONSENT FORM, 2019

Dear Sir/Madam,

I am conducting interviews on the topic:

'The financial implications of offering flexible working opportunities to people with mental disabilities.'

I have carried out a survey on people who have/had had the following mental disabilities, Autism Spectrum Disorder, Schizophrenia and/or Bipolar Disorder, to gather information on the flexible opportunities they require from the workplace. This letter serves to invite you to participate in my research through the completion of a telephone interview. If you require to see the survey, please feel free to follow the link <https://www.surveymonkey.co.uk/r/8QY3H9V>

There will be no reference to your name or any personal details as the interview is strictly anonymous and will be used for the research purpose only, with full confidentiality preserved. Your participation is completely voluntary, and you are able to terminate your consent at any time.

The interview seeks to assess likely benefits and risks of offering the flexible working opportunities, as well as your opinion on why people with mental disabilities struggle to gain long-lasting employment, through asking a range of questions. It will take 15–20 min to complete the interview.

I thank you for your participation.

Kind regards

- Human Resource Managers' Interview Questions, 2019
 1. Most of the respondents from the survey choose to hide their mental disabilities from their employers. What do you think of this?
 2. In your opinion, do you think it would benefit the PWMD to disclose this during the interview process?
 3. Why do you think PWMD feel discriminated against in some workplaces?
 4. How do you think some employers could beat discrimination within their organisation?
 5. A large number of respondents feel they lost more than five jobs due to their mental disabilities. Why do you think some employers treat a PWMD differently?
 6. Do you think it would be possible to arrange a quiet and safe place for a PWMD to go if they feel overwhelmed while in work?
 7. Do you think it would be possible to arrange a pamphlet giving clear instructions on certain processes within a job role?
 8. Why do you feel some employers limit a person's sick days and give a disciplinary when they take too much time off work?
 9. Why do you think some organisations refuse to let a PWMD support worker attend work with them when they take a new job role?
 10. Is there an occupational health therapist available to all staff or just though being referred by management?
 11. How helpful would setting up a buddy system be for employees? Some employers disclose information about an employee's health condition. Why do you think this is?

APPENDIX C: FINANCIAL MANAGERS' INTERVIEW CONSENT FORM, 2019

Dear Sir/Madam,

I am conducting interviews on the topic:

'The financial implications of offering flexible working opportunities to people with mental disabilities.'

I have carried out a survey on people who have/had the following mental disabilities, Autism Spectrum Disorder, Schizophrenia and/or Bipolar Disorder, to gather information on the flexible opportunities they require from the workplace. This letter serves to invite you to participate in my research through the completion of a telephone interview. If you require to see the survey, please feel free to follow the link <https://www.surveymonkey.co.uk/r/8QY3H9V>

There will be no reference to your name or any personal details as the interview is strictly anonymous and will be used for the research purpose only, with full confidentiality preserved. Your participation is completely voluntary, and you are able to terminate your consent at any time.

The interview seeks to assess what the financial costs of flexible working opportunities would be, through asking a range of questions. It will take 15–20 min to complete the interview.

I thank you for your participation.

Kind regards

- Financial Managers' Interview Questions, 2019
 - Over 80% of respondents have had above five jobs in their employment history. What are the costs associated with a PWMD leaving a job role?
 - What are the costs associated with recruiting a replacement when someone leaves?
 - On average, how much is spent within the organisation on sickness absences per year?
 - How much does 1 day of sickness absence cost the organisation on average?
 - What would the costs associated with arranging a quiet and safe place for a PWMD to go if they feel overwhelmed while in work be?
 - What would the costs associated with the creation of a pamphlet giving clear instructions on certain processes within a job role be?
 - Does it cost the organisation anything if a PWMD needs to bring their support worker with them to learn the job role until they are comfortable?
 - What are the costs associated with the creation of a buddy system within the organisation?
 - If a person is struggling with their mental health, how much does it cost to have a health expert available whom they can talk to, so they can prevent unnecessary absences from work?
 - How much would it cost if a PWMD required flexibility in their job roles, for example, working the same number of hours per week but at different times to their designated office hours or shorter hours during hard times?