

Barbara Wilson is a senior HR professional with almost 40 years' experience. Her previous roles were Group Head of Strategic HR at Catlin Group Ltd, Deputy Head of HR at Schroders Investment Management, and prior to that Chief of Staff to the Group HR Director at Barclays. Before joining Barclays she was a senior management consultant at Price Waterhouse. She began her career as an HR professional at London Regional Transport after taking a degree in history at Cambridge. Barbara founded Working With Cancer in April 2013.

Caroline Keetch runs HALSEY KEETCH, a specialist executive search firm whose track record and heritage serving the financial services industry stretches back nearly 30 years.

CK: Barbara, we have met a few times now and talked from both a personal and professional angle about the work that you do and recently you very kindly invited me to attend one of your workshops, which was extremely insightful. So many people are touched by cancer, but there isn't a huge amount out there in terms of real advice when it comes to the gritty fact that an illness like cancer has a massive impact on the day-to-day lives of people fighting it, on their work and ability to move forwards in their lives. Could you tell me about the origins of your organisation and how Working With Cancer (WWC) came to be?

BW: WWC is a social enterprise, which means its main purpose is a social one. Although I charge to cover my costs, making a profit is not the main purpose of WWC; its main purpose is to support

people in their successful return to work and to life after cancer. I set it up in 2013 but at that stage then I was operating as a sole trader, but it became a social enterprise in June 2014. I set it up WWC because my own experience of cancer, when I was diagnosed with breast cancer in 2005, showed me that there was very little support available once people had been treated for cancer and were going back to work. There is a 'phased return,' so you can come in late and leave early, but there wasn't any more support than that to help you recover energy and motivation for life, as well as for work.

In 2006 I started a campaign with a charity, which was then called Cancer Back Up, to provide information to employers and HR professionals about the kind of issues that people recovering from cancer faced and what employers could do to support them. This was then taken up as a campaign by Macmillan and by the Department of Health. For a couple of years I chaired the National Cancer Survivorship initiative which was fundamentally a part of the government's five year cancer strategy. I chaired a group of about 30 people and we looked at the issue of returning to work after cancer and explored how people were managing financially after a diagnosis of cancer. I did this and then I decided there was a lot more that could be done, so I set up WWC in 2012.

CK: And are you, in your knowledge, unique in offering these services?

BW: Pretty much – Macmillan do offer training for employers on how they can

manage employees returning to work and I helped design their training. I run some of their training for employers for them. I also provide support for cancer patients and run workshops for them and one-to-one coaching for employees to help them return to work and integrate cancer into their lives so they can move on. That is a new service and as far as I know nobody else provides it.

CK: Cancer is a topic that affects so many people, whether because they are diagnosed themselves, or are close to someone who is diagnosed. However, it's not something that is broadly spoken about. This can easily translate into a 'grey area' in the workplace between how people would feel on their own behalf if they were personally affected by a serious illness, and their ability to empathise with people they work with. Do you find there is genuine appetite to integrate a discussion surrounding how cancer affects employees, and any associated policies designed to help them, into the workplace?

BW: It's interesting because a lot of it is to do with the company's policy regarding health and wellbeing. I do recall talking to one company who said 'well, we did cancer last year, this year we're doing mental health...' I think one of the issues is that people don't know what they don't know. One of the principal issues with cancer is that most employers don't understand the real impact of cancer treatment on patients. Often the individual doesn't have much of an idea what the impact will be. The employer normally has two or three ways of supporting someone which, as

far as they are concerned, are perfectly adequate. One would be an employee assistance programme but of course very few people use them in the way they are meant to be used.

They will also have occupational health, and some practitioners are really good, but most won't have a specific knowledge of cancer, which my associates and I have, and they don't provide the length and depth of support.

The fundamental issue is that most people think that within a couple of months someone will be back feeling better and will be back on their feet, whereas in reality it normally takes over twelve months and it can be very hit and miss – there will be good weeks and bad weeks. Normally what happens is that people will get through their phased return and suddenly they will hit a brick wall, their energy won't have come back, they will be feeling tired and stressed, thinking there must be more to life than this. A whole number of feelings arise – they lose confidence, their employer loses confidence and there is a vicious circle of the employer thinking I'm not up to this anymore and the employer thinking maybe they aren't up to this anymore. This is where things can go wrong. This is about two things – knowing what is happening and how this plays out but also the fact that many of us are pretty poor communicators and cancer survivors don't like talking about the fact that things aren't progressing.

CK: There were a couple of issues that arose on the workshop – one thing was the fact that people have to take

medication to control the side effects of the original cancer treatment, which can then go on for many years. They then often experience knock-on side-effects as a result of taking these medications and have to manage this on an on-going basis. The other key topic seemed to revolve around tough conversations. These are actually some of the most important to have but of course it is very easy to be wise after the event, and someone who is fighting cancer, and going through chemotherapy might not have the energy to initiate these tough discussions. What typically do you suggest or implement if you are working with an organisation that wants provide more robust frameworks around dealing with this?

BW: We do training for line managers or HR professionals – which can be half an hour or half a day long, covering legal issues (cancer survivors are covered by the equality act) through to how to manage the most difficult but important conversations at key stages of someone's treatment which are normally at point of diagnosis, when somebody is starting treatment, when somebody finishes treatment and when they come back to work. There are various things that employers should be saying or doing which can help the process immensely: training is one, and signposting resources and reading materials. The other area is coaching, one-to-one support for individuals – I run that on a session by session basis. Some people only need one or two to feel better, others might need more. In doing this I will provide advice and I will help organisations to look at their

policies and processes to see if we can improve them.

I think one of the issues that many big organisations have is that when it comes to dealing with long term absence, very often the procedure is quite punitive so all those policies are based on people not working because they are avoiding work. Therefore the long-term absence policy is geared towards some form of performance management. Often there is nothing in place to deal with people who are coping with a chronic illness. They need to put in place a culture where employees who have had a satisfactory career but who have had the misfortune of getting cancer should have access to the support they need.

CK: Often, from diagnosis to treatment, the whole life-changing event of cancer can happen so quickly to people. Additionally, as we have touched upon before a lot of the time it's not cancer that makes people feel ill, it's their treatment.

BW: Yes, they can be debilitating in a number of ways and yet people have to come back to work and act as if there is nothing wrong with them.

CK: There is a lot of comment at the moment about a change of culture away from the old City shoulder-pad mentality; and a greater acceptance that work isn't the be all and end all. Have you seen evidence of a general change of attitude in the organisations you come into contact with that is helpful in the context of your work?

BW: There is definitely a growing awareness regarding support and

culture within companies and a recognition that people have lives outside of work. Maybe to an extent some organisations are getting better. But it is a long road, and there are many instances where people act unfeelingly towards others. Sometimes big companies aren't great at dealing with people as individuals – they are sometimes seen and dealt with as part of a bigger 'process.'

CK: You have spent many years in HR, you are now running WWC and of course you have been treated for cancer yourself so you really understand all viewpoints here. Do you have a goal for your organisation over the next few years?

BW: I would like to think we can form a network of associates, across the UK, of people providing services like those we provide now. Most of our clients are in the South East, but my goal is to encourage recognition that this is a valid issue and an important service. The second is to develop a network of like-minded people who have had similar experiences – this is important because a deep personal experience of cancer does make a difference in this work. I would like to think that people like me could provide services across the country. That is my goal.

CK: Thank you, Barbara.

Caroline spoke to Barbara in London on 15th June 2015

More information about Barbara and Working With Cancer can be found at:

www.workingwithcancer.co.uk