

# JAN

Job Accommodation Network

Practical Solutions • Workplace Success

## Accommodation and Compliance Series

# Accommodation and Compliance Series: Employees with Mental Health Impairments

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**ODEP**  
Office of Disability  
Employment Policy

Funded by a contract with the Office of Disability  
Employment Policy, U.S. Department of Labor

## Preface

The Job Accommodation Network (JAN) is funded by a contract with the Office of Disability Employment Policy, U.S. Department of Labor. JAN makes documents available with the understanding that the information be used solely for educational purposes. The information is not intended to be legal or medical advice. If legal or medical advice is needed, appropriate legal or medical services should be contacted.

JAN does not endorse or recommend any products or services mentioned in this publication. Although every effort is made to update resources, JAN encourages contacting product manufacturers/vendors and service providers directly to ensure that they meet the intended purposes. This guarantees that the most up-to-date information is obtained.

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Updated 11/29/2018.

## **JAN'S Accommodation and Compliance Series**

### **Introduction**

JAN's Accommodation and Compliance Series is designed to help employers determine effective accommodations and comply with Title I of the Americans with Disabilities Act (ADA). Each publication in the series addresses a specific medical condition and provides information about the condition, ADA information, accommodation ideas, and resources for additional information.

The Accommodation and Compliance Series is a starting point in the accommodation process and may not address every situation. Accommodations should be made on a case by case basis, considering each employee's individual limitations and accommodation needs. Employers are encouraged to contact JAN to discuss specific situations in more detail.

For information on assistive technology and other accommodation ideas, visit JAN's Searchable Online Accommodation Resource (SOAR) at <http://askjan.org/soar>.

### **Information about Mental Health Impairments**

Approximately one in four adults experience a mental health impairment. The DSM-5, the most recent version of the Diagnostic and Statistical Manual of Mental Disorders (DSM), which is published by the American Psychiatric Association (APA), provides diagnostic criteria for mental health impairments. According to the DSM-5, a mental health impairment is:

- a mental disorder is a syndrome characterized by clinically significant disturbance in an individual's cognition, emotion regulation, or behavior that reflects a dysfunction in the psychological, biological, or developmental processes underlying mental functioning. Mental disorders are usually associated with significant distress in social, occupational, or other important activities. An expectable or culturally approved response to a common stressor or loss, such as the death of a loved one, is not a mental disorder. Socially deviant behavior (e.g., political, religious, or sexual) and conflicts that are primarily between the individual and society are not mental disorders unless the deviance or conflict results from a dysfunction in the individual, as described above.

The [National Alliance on Mental Illness \(NAMI\)](#) (n.d.a) defines a mental health impairment as:

- a medical condition that disrupt a person's thinking, feeling, mood, ability to relate to others, and daily functioning. Just as diabetes is a disorder of the pancreas, mental illnesses are medical conditions that often result in a diminished capacity for coping with the ordinary demands of life.

JAN receives numerous accommodation questions related to individuals with mental health impairments working successfully. Although there are various definitions and lists of impairments, this document covers those that are received the most by JAN. NAMI provides useful definitions of mental health impairments and statistics on their prevalence. The following (NAMI, n.d.b) is a summary of these:

- Bipolar disorder, sometimes referred to as manic depression, "is a medical illness that causes extreme shifts in mood, energy, and functioning. Bipolar disorder is a chronic and generally life-long condition with recurring episodes of mania and depression that can last from days to months that often begin in adolescence or early adulthood, and occasionally even in children."
- Borderline personality disorder (BPD) is "an often misunderstood, serious mental illness characterized by pervasive instability in moods, interpersonal relationships, self image, and behavior. It is a disorder of emotional dysregulation. This instability often disrupts family and work, long-term planning, and the individual's sense of self-identity."
- Major depression is "persistent and can significantly interfere with an individual's thoughts, behavior, mood, activity, and physical health. Among all medical illnesses, major depression is the leading cause of disability in the United States and many other developed countries."
- Obsessive compulsive disorder (OCD) "occurs when an individual experiences obsessions and compulsions for more than an hour each day, in a way that interferes with his or her life."
- Panic disorder occurs when a person "experiences recurrent panic attacks, at least one of which leads to at least a month of increased anxiety or avoidant behavior. Panic disorder may also be indicated if a person experiences fewer than four panic episodes but has recurrent or constant fears of having another panic attack."

- Post-traumatic stress disorder (PTSD) is "an anxiety disorder that can occur after someone experiences a traumatic event that caused intense fear, helplessness, or horror. While it is common to experience a brief state of anxiety or depression after such occurrences, people with PTSD continually re-experience the traumatic event; avoid individuals, thoughts, or situations associated with the event; and have symptoms of excessive emotions. People with this disorder have these symptoms for longer than one month and cannot function as well as they did before the traumatic event. PTSD symptoms usually appear within three months of the traumatic experience; however, they sometimes occur months or even years later."
- Schizophrenia "often interferes with a person's ability to think clearly; to distinguish reality from fantasy; and to manage emotions, make decisions, and relate to others."
- Seasonal affective disorder (SAD) is "characterized by recurrent episodes of depression – usually in late fall and winter – alternating with periods of normal or high mood the rest of the year." SAD is not regarded as a separate disorder by the DSM-5, but it is an added descriptor for the pattern of depressive episodes in patients with major depression or bipolar disorder.

JAN's [Effective Accommodation Practices \(EAP\) Series: Executive Functioning Deficits](#) is a publication detailing accommodations for individuals with limitations related to executive functioning. These ideas may be helpful in determining accommodations.

## **Mental Health Impairments and the Americans with Disabilities Act**

The ADA does not contain a list of medical conditions that constitute disabilities. Instead, the ADA has a general definition of disability that each person must meet. A person has a disability if he/she has a physical or mental impairment that substantially limits one or more major life activities, a record of such an impairment, or is regarded as having an impairment. For more information about how to determine whether a person has a disability under the ADA, see [How to Determine Whether a Person Has a Disability under the Americans with Disabilities Act Amendments Act \(ADAAA\)](#).

## **Accommodating Employees with Mental Health Impairments**

People with mental health impairments may develop some of the limitations discussed below, but seldom develop all of them. Also, the degree of limitation will vary among individuals. Be aware that not all people with arthritis will need accommodations to perform their jobs and many others may only need a few accommodations. The following is only a sample of the possibilities available. Numerous other accommodation solutions may exist.

## Questions to Consider:

1. What limitations is the employee experiencing?
2. How do these limitations affect the employee and the employee's job performance?
3. What specific job tasks are problematic as a result of these limitations?
4. What accommodations are available to reduce or eliminate these problems? Are all possible resources being used to determine possible accommodations?
5. Has the employee been consulted regarding possible accommodations?
6. Once accommodations are in place, would it be useful to meet with the employee to evaluate the effectiveness of the accommodations and to determine whether additional accommodations are needed?
7. Do supervisory personnel and employees need training?

## Accommodation Ideas:

### Limitations

#### Attentiveness/Concentration

- Applications (apps)
- Behavior Modification Techniques
- Cubicle Doors, Shields, and Shades
- Electronic Organizers
- Environmental Sound Machines / Tinnitus Maskers / White Noise Machines
- Flexible Schedule
- Job Coaches
- Modified Break Schedule
- Noise Canceling Headsets
- Sound Absorption and Sound Proof Panels
- Telework, Work from Home, Working Remotely
- Timers and Watches
- Worksite Redesign / Modified Workspace
- Written Instructions

## Control of Anger/Emotions

- Apps for Miscellaneous Mental Health / Control of Anger & Emotions
- Behavior Modification Techniques
- Counseling/Therapy
- Disability Awareness/Etiquette Training
- Employee Assistance Program
- Environmental Sound Machines / Tinnitus Maskers / White Noise Machines
- Flexible Schedule
- Job Restructuring
- Simulated Skylights and Windows
- Sun Boxes and Lights
- Supervisory Methods
- Support Animal
- Support Person

## Decreased Stamina/Fatigue

- Aide/Assistant/Attendant
- Anti-fatigue Matting
- Elevating Wheelchairs
- Ergonomic Assessments
- Ergonomic Equipment
- Job Restructuring
- Periodic Rest Breaks
- Scooters
- Stand-lean Stools
- Telework, Work from Home, Working Remotely
- Walkers
- Wearable Anti-fatigue Matting
- Wheelchairs
- Worksite Redesign / Modified Workspace

## Executive Functioning Deficits

- Apps for Concentration
- Checklists
- Color Coded System
- Cubicle Doors, Shields, and Shades
- Environmental Sound Machines / Tinnitus Maskers / White Noise Machines
- Form Generating Software
- Job Coaches
- Job Restructuring
- Marginal Functions
- Modified Break Schedule
- Noise Canceling Headsets
- Recorded Directives, Messages, Materials
- Sound Absorption and Sound Proof Panels
- Speech Recognition Software
- Timers and Watches
- Wall Calendars and Planners
- Written Instructions

#### Memory Loss

- Additional Training Time / Training Refreshers
- Apps for Memory
- Electronic Organizers
- Memory Software
- Recorded Directives, Messages, Materials
- Reminders
- Support Person
- Verbal Cues
- Wall Calendars and Planners
- Written Instructions

#### Organizing/Planning/Prioritizing

- Applications (apps)



- Apps for Organization/ Time Management
- Color-coded Manuals, Outlines, and Maps
- Electronic Organizers
- Ergonomic Equipment
- Job Coaches
- Job Restructuring
- On-site Mentoring
- Organization Software
- Professional Organizers
- Reminders
- Supervisory Methods
- Timers and Watches
- Wall Calendars and Planners
- Written Instructions

#### Sleeping/Stay Awake

- Apps for Sleep/ Fatigue
- Flexible Schedule

#### Stress Intolerance

- Apps for Anxiety and Stress
- Behavior Modification Techniques
- Counseling/Therapy
- Environmental Sound Machines / Tinnitus Maskers / White Noise Machines
- Flexible Schedule
- Job Restructuring
- Marginal Functions
- Modified Break Schedule
- Supervisory Methods
- Support Animal
- Support Person

## Work-Related Functions

### Policies

- Additional Training Time / Training Refreshers
- Aide/Assistant/Attendant
- Flexible Schedule
- Marginal Functions
- Modified Break Schedule
- Periodic Rest Breaks
- Policy Modification
- Reassignment
- Service Animal
- Supervisory Methods
- Support Animal
- Telework, Work from Home, Working Remotely

### Stress

- Apps for Anxiety and Stress
- Behavior Modification Techniques
- Counseling/Therapy
- Flexible Schedule
- Job Restructuring
- Marginal Functions
- Modified Break Schedule
- Monitor Mirrors
- On-site Mentoring
- Service Animal
- Simulated Skylights and Windows
- Supervisory Methods
- Support Animal
- Support Person
- Telework, Work from Home, Working Remotely

- Uninterrupted Work Time

## **Situations and Solutions:**

### **An employee with borderline personality disorder works as a hairstylist in a beauty salon.**

At times, she becomes very upset and leaves work abruptly. The supervisor meets with her regarding these occurrences and the employee discloses her disability and explains that because of her work schedule, she has been unable to attend therapy and psychiatrist appointments, which has resulted in an exacerbation of her symptoms. The employer suggests providing her a consistent schedule, allowing her to keep the early part of the day open for her therapist and doctor appointments. The employer also agrees to allow the employee to take two additional unpaid breaks per shift. The accommodations result in the employee getting the treatment she needs, allowing her to continue working successfully in her position.

### **A secretary with PTSD, who had been carjacked several years earlier, experienced significant anxiety during commutes after dark.**

This caused difficulty concentrating and irritability. She was accommodated with the ability to have a support animal at work and a flexible schedule with work from home during periods of minimal sunlight.

### **A guidance counselor for a large high school experienced severe bouts of irritable bowel syndrome, depression, and fatigue as a result of fibromyalgia.**

He experienced difficulty in opening the heavy doors to the entrance of the school and had to make frequent trips to the bathroom. The individual's employer complained that he was spending too much of his time away from his office and therefore was not available for students. The employer moved the employee's office to a location closer to the faculty restroom, added an automatic entry system to the main doors, and allowed flexible leave time so the employee could keep appointments with his therapist.

### **An electrician with severe depression needed to attend periodic licensure trainings.**

The person had difficulty taking effective notes and paying attention in the meetings. The individual was accommodated with notes from remote Communication Access Realtime Translation (CART) service.

### **Lexie is a nurse with PTSD.**

She has applied for a nursing position and has been called for an interview. In her last interview that didn't go very well, she sat across the table in a very small room from four people, the nursing administrator, the personnel director, a nurse manager, and a physician. Lexie feels that if there were no more than two people in the room, she would be able to better represent herself, making her interview more successful. In order to limit the interviewers, Lexie may have to disclose and ask for an accommodation.

### **A middle school teacher with chronic depression asks for the accommodation of leave one afternoon a week for a sixteen-week period so she can attend an**

**intensive out-patient therapy program recommended by her mental health practitioner.**

The physician feels this treatment is necessary to prevent a depressive episode requiring further leave. Her employer finds no hardship in providing her with a substitute for those sixteen afternoons and provides the requested accommodation.

**A construction worker had Huntington's disease related depression.**

He requested ADA leave to get treatment and a reduced work schedule when he returned back to work, he was accommodated with leave and a modified schedule.

**An employee voluntarily admitted herself to a hospital inpatient unit due to severe depression.**

Her mother called the employer to let them know what had happened and to tell them her return date was uncertain at that time. The employer provided leave under the ADA for the employee and requested her mother to keep them informed about the employee's progress and possible return to work date.

**An employer, trying to accommodate an employee returning to work after a leave, had questions about the stress of required travel that escalated the employee's depression and anxiety.**

The employer was advised to continue on in the interactive process to discover what specifically about the travel was stressful so they could determine accommodations for those identified issues. Examples of questions to ask could include what particularly about the travel causes the stress that heightens the depression, such as the length of the travel, the distance, the planning process, or even specific modes of travel and/or locations.

**An employee returning to work after a stroke was dealing with depression.**

As a result, the employee's performance was impaired and the previous supervisory method was no longer effective. The supervisor agreed to meet with the employee weekly to discuss performance and conduct issues that were becoming problematic, as well as put accommodations into place. Among the accommodations: a flexible schedule for health care appointments, a diagram to help with the flow of duties, templates to assist in report writing, and a move to an area with more natural lighting.

**A customer service representative working in a call center was experiencing limitations associated with generalized anxiety disorder and depression.**

He began treatment with a new healthcare provider who adjusted his medications and recommended bi-weekly counseling sessions for one month. He exhausted his accrued paid sick leave but was FMLA eligible. He applied FMLA leave intermittently in order to attend counseling appointments.

**A driver with seasonal affective disorder (SAD) who picks up and delivers clients to various appointments began to forget waiting clients as well as the routes she needed to travel in order to deliver them to the appropriate facility.**

When her employer mentioned the mistakes, the driver broke down. She described her depression and anxiety with the change of seasons and how it affected her memory.

The use of reminder apps, as well as those to help with directions, were discussed as possible accommodation solutions.

**A county employee who works in the property records room has bouts of depression that are intensified when he is busy, under deadlines, and has frequent interruptions.**

He then finds it difficult to concentrate and get his work completed. The employer rescheduled a part-time worker to help during the busy times, allowing the employee to go to a specified desk behind a partition where he could concentrate more fully on the records he was responsible for.

**A veteran with post-traumatic stress disorder (PTSD) was working for state government on a team project.**

The employer decided to move the team's office to the basement of a building. Once the move occurred, the veteran realized that the noises in the basement were triggering memories of explosions and causing flare ups of his PTSD. The employer did not want to move the entire team again but was able to find an office on the first floor of the same building for the veteran. The rest of the team remained in the basement, but team meetings were held upstairs.

**A graphic designer with a panic disorder experienced recurrent panic attacks when traveling during peak traffic times.**

He was required to drop off design orders and pick up print proofs from a print shop when necessary. He was accommodated with a schedule that gave him the opportunity to drop off and pick up materials when coming to work in the morning.

**A retail store manager with a psychiatric impairment was inattentive to details, such as identifying keys to lock the various doors of his store.**

In addition, he would forget information just after it was told to him. The employer provided a talking key ring. The employer pre-recorded a detailed message identifying what each key was used for. Also, the employer provided a digital recorder that the employee could use to record information told to him throughout the day.

**An accountant for a large agency had bipolar disorder.**

His duties included research, writing, and filing reports. He had difficulties with concentration and short-term memory during very busy periods that required long hours. He was accommodated with a more consistent caseload that did not result in extreme fluctuations in workload. He was provided a work area that was away from noise and given earbuds to listen to music. He also met briefly with his supervisor once a week to discuss workload issues.

**A JAN consultant spoke with an employee with bipolar disorder who had difficulty with short-term memory and concentration.**

The employee worked as a secretary in a busy office. The JAN consultant discussed requesting additional training time, written job tasks instructions, daily checklists, and allowing one hour each day to be off the phones to complete job tasks.

**An employee with major depression and bipolar disorder was having difficulties working in a busy central banking office.**

He needed to manage a large staff of workers, provide customer service, and oversee the daily office management. As an accommodation he requested and received a transfer to a smaller and less busy branch office. The employee maintained his salary and the responsibilities of his leadership role.

**A grocery store bagger with seasonable affective disorder (SAD) had difficulty working an early schedule due to oversleeping.**

She also experienced fatigue and depression during late fall and winter months. She was accommodated with an afternoon schedule and was moved to the front of the store, which had windows that let sunlight enter her workspace.

**A baker with obsessive compulsive disorder (OCD) repeatedly checked ingredients for recipes.**

The individual was accommodated with a computerized checklist for each baked good recipe on the menu. He was allowed time in the morning to arrange and check off items to be used during the day. When he felt the urge to recheck the ingredients he could do this quickly by using his daily checklist. This checklist was placed in a handheld computer that resembled the two-way radios used by all employees.

## **Products**

There are numerous products that can be used to accommodate people with limitations. JAN's Searchable Online Accommodation Resource at <http://askjan.org/soar> is designed to let users explore various accommodation options. Many product vendor lists are accessible through this system; however, JAN provides these lists and many more that are not available on the Web site upon request. Contact JAN directly if you have specific accommodation situations, are looking for products, need vendor information, or are seeking a referral.

## Resources

### **Job Accommodation Network**

West Virginia University  
PO Box 6080  
Morgantown, WV 26506-6080  
Toll Free: (800) 526-7234  
TTY: (304) 293-7186  
Fax: (304) 293-5407  
jan@askjan.org  
<http://AskJAN.org>

The Job Accommodation Network (JAN) is a free consulting service that provides information about job accommodations, the Americans with Disabilities Act (ADA), and the employability of people with disabilities.

### **Office of Disability Employment Policy**

200 Constitution Avenue,  
NW, Room S-1303  
Washington, DC 20210  
Toll Free: (866) 633-7365  
odep@dol.gov  
<http://dol.gov/odep>

The Office of Disability Employment Policy (ODEP) is an agency within the U.S. Department of Labor. ODEP provides national leadership to increase employment opportunities for adults and youth with disabilities while striving to eliminate barriers to employment.



**American Psychiatric Association**

1000 Wilson Blvd  
Suite 1825  
Arlington, VA 22209-3901  
Toll Free: (888) 357-7924  
Direct: (703) 907-7300  
apa@psych.org  
<http://www.psych.org>

The American Psychiatric Association is an organization of psychiatrists working together to ensure humane care and effective treatment for all persons with mental illness, including substance use disorders. It is the voice and conscience of modern psychiatry. Its vision is a society that has available, accessible quality psychiatric diagnosis and treatment.

**American Psychological Association**

750 First Street NE  
Washington, DC 20002  
Toll Free: (800) 374-2721  
Direct: (202) 336-5500  
<http://www.apa.org/>

Our mission is to advance the creation, communication and application of psychological knowledge to benefit society and improve people's lives.

**Anxiety and Depression Association of America**

8701 Georgia Ave.  
Suite #412  
Silver Spring, MD 20910  
Direct: (240) 485-1001  
Fax: (240) 485-1035  
<http://www.adaa.org/>

ADAA is a national nonprofit organization dedicated to the prevention, treatment, and cure of anxiety and mood disorders, OCD, and PTSD and to improving the lives of all people who suffer from them through education, practice, and research.

**Brain & Behavior Research Foundation**

90 Park Avenue,  
16th Floor  
New York, NY 10016  
Toll Free: (800) 829-8289  
Direct: (646) 681-4888  
info@bbrfoundation.org  
<https://bbrfoundation.org/>

The Brain & Behavior Research Foundation is committed to alleviating the suffering caused by mental illness by awarding grants that will lead to advances and breakthroughs in scientific research.

**Center for Psychiatric Rehabilitation**

940 Commonwealth Ave.  
West Boston, MA 02215  
Direct: (617) 353-3549  
Fax: (617) 358-3066  
psyrehab@bu.edu  
<http://cpr.bu.edu/>

The Center is a research, training, and service organization dedicated to improving the lives of persons who have psychiatric disabilities. Our work is guided by the most basic of rehabilitation values, that first and foremost, persons with psychiatric disabilities have the same goals and dreams as any other person. Our mission is to increase the likelihood that they can achieve these goals by improving the effectiveness of people, programs, and service systems using strategies based on the core values of recovery and rehabilitation.

**Centers for Disease Control and Prevention**

1600 Clifton Rd  
Atlanta, GA 30333  
Toll Free: (800) 232-4636  
<http://www.cdc.gov>

The Centers for Disease Control and Prevention are dedicated to protecting the health and safety of people - at home and abroad, providing credible information to enhance health decisions, and promoting health through strong partnerships.

**Judge David L. Bazelon Center for Mental Health Law**

1101 15th St. NW

Suite 1212

Washington, DC 20005

Direct: (202) 467-5730

Fax: (202) 223-0409

[communications@bazelon.org](mailto:communications@bazelon.org)

<http://www.bazelon.org>

The mission of the Judge David L. Bazelon Center for Mental Health Law is to protect and advance the rights of adults and children who have mental disabilities. The Bazelon Center envisions an America where people who have mental illnesses or developmental disabilities exercise their own life choices and have access to the resources that enable them to participate fully in their communities.

**MedlinePlus**

8600 Rockville Pike

Bethesda, MD 20894

[custserv@nlm.nih.gov](mailto:custserv@nlm.nih.gov)

<https://www.nlm.nih.gov/medlineplus/>

MedlinePlus is the National Institutes of Health's Web site for patients and their families and friends. Produced by the National Library of Medicine, the world's largest medical library, it brings you information about diseases, conditions, and wellness issues in language you can understand. MedlinePlus offers reliable, up-to-date health information, anytime, anywhere, for free.

Created by the U.S. National Library of Medicine

**Mental Health America**

500 Montgomery Street  
Suite 820  
Alexandria, VA 22314  
Toll Free: (800) 969-6642  
Direct: (703) 684-7722  
Fax: (703) 684-5968  
<http://www.mentalhealthamerica.net/>

Mental Health America (MHA) – founded in 1909 – is the nation's leading community-based nonprofit dedicated to addressing the needs of those living with mental illness and to promoting the overall mental health of all Americans. Our work is driven by our commitment to promote mental health as a critical part of overall wellness, including prevention services for all, early identification and intervention for those at risk, and integrated care and treatment for those who need it, with recovery as the goal.

**Movember Foundation**

P.O. Box 1595  
Culver City, CA 90232  
Direct: (310) 450-3399  
[info.us@movember.com](mailto:info.us@movember.com)  
<https://us.movember.com/?home>

The Movember Foundation is a global charity committed to men living happier, healthier, longer lives. Since 2003, millions have joined the men's health movement, raising \$650 million and funding over 1,000 projects focusing on prostate cancer, testicular cancer, poor mental health and physical inactivity. We seek to make a global contribution to men living happier, healthier, longer lives. This ambition underpins everything we do. It is the driving force behind our campaigns, funding strategy, and vision for the future. Our Vision is to have an everlasting impact on the face of men's health.

**National Alliance on Mental Illness**

3803 N. Fairfax Dr.,  
Ste. 100  
Arlington, VA 22203  
Toll Free: (800) 950-6264  
Direct: (703) 524-7600  
<http://www.nami.org>

The National Alliance on Mental Illness (NAMI) is the nation's largest grassroots mental health organization dedicated to building better lives for the millions of Americans affected by mental illness. NAMI advocates for access to services, treatment, supports and research and is steadfast in its commitment to raise awareness and build a community for hope for all those in need.

**National Center for Biotechnology Information**

8600 Rockville Pike  
Bethesda, MD 20894  
[pubmedcentral@ncbi.nlm.nih.gov](mailto:pubmedcentral@ncbi.nlm.nih.gov)  
<http://www.ncbi.nlm.nih.gov/>

MISSION: IMS brings together an international community of health care professionals, researchers, educators, and others to improve care and transform delivery of treatment to those suffering from soft tissue pain through the promotion and exchange of globally recognized research, education, and innovation in patient care.

**National Institute of Mental Health**

6001 Executive Boulevard  
Rockville, MD 20852  
Toll Free: (866) 615-6464  
Direct: (301) 443-4513  
Fax: (301) 443-4279  
[nimhinfo@nih.gov](mailto:nimhinfo@nih.gov)  
<http://www.nimh.nih.gov>

NIMH offers a variety of publications and other educational resources to help people with mental disorders, the general public, mental health and health care practitioners, and researchers gain a better understanding of mental illnesses and the research

programs of the NIMH. All publications and educational materials are written by science writers, in collaboration with NIMH scientists and outside reviewers.

**National Institute on Aging**

31 Center Drive  
MSC 2292  
Bethesda, MD 20892  
Toll Free: (800) 222-2225  
niaic@nia.nih.gov  
<https://www.nia.nih.gov/>

At NIA, our mission is to discover what may contribute to a healthy old age as well as to understand and address the disease and disability sometimes associated with growing older. In pursuit of these goals, our research program covers a broad range of areas, from the study of basic cellular changes that occur with age to the examination of the biomedical, social, and behavioral aspects of age-related conditions, including Alzheimer's disease.

**National Jewish Health**

1400 Jackson Street  
Denver, CO 80206  
Toll Free: (877) 225-5654  
Direct: (303) 388-4461  
<http://www.nationaljewish.org/>

National Jewish Health is known worldwide for treatment of patients with respiratory, cardiac, immune and related disorders, and for groundbreaking medical research. Founded in 1899 as a nonprofit hospital, National Jewish Health remains the only facility in the world dedicated exclusively to these disorders. *U.S. News & World Report* has ranked National Jewish Health as the number one or number two hospital in pulmonology on its Best Hospitals list ever since pulmonology was included in the rankings.

**Office on Women's Health**

Department of Health and Human Services  
200 Independence Avenue, SW Room 712E  
Washington, DC 20201  
Toll Free: (800) 994-9662  
Direct: (202) 690-7650  
Fax: (202) 205-2631  
<http://www.womenshealth.gov/>

The Office on Women's Health (OWH), part of the U.S. Department of Health and Human Services (HHS), works to improve the health and sense of well-being of all U.S. women and girls. OWH serves as the focal point for women's health activities across HHS offices and agencies and leads HHS efforts to ensure that all women and girls achieve the best possible health.

**Remedy's Health Communities**

<http://www.healthcommunities.com>

Remedy Health Media is America's fastest growing health information and technology company. We are a leading provider of clinical resources and wellness tools that help millions of patients and caregivers live healthier, more fulfilled lives.

Our mission is to empower patients and caregivers with the information and applications needed to efficiently navigate the healthcare landscape and as a result, to permit better health outcomes through use of our products and services.

**Substance Abuse and Mental Health Services Administration**

1 Choke Cherry Road  
Rockville, MD 20857  
Toll Free: (877)726-4727  
[SAMHSAInfo@samhsa.hhs.gov](mailto:SAMHSAInfo@samhsa.hhs.gov)  
<http://www.samhsa.gov>

The Substance Abuse and Mental Health Services Administration (SAMHSA) is the agency within the U.S. Department of Health and Human Services that leads public

health efforts to advance the behavioral health of the nation. SAMHSA's mission is to reduce the impact of substance abuse and mental illness on America's communities.

### **The Environmental Illness Resource**

162 Bramham Drive  
Oakdale Court  
Harrogate, North Yorkshire, England HG3 2-2UB  
Toll Free: (441) 423-528055  
support@ei-resource.org  
<http://www.ei-resource.org/>

The Environmental Illness Resource seeks to provide those with environmental illnesses with information of the highest quality in the hope that this will lead to improved quality of life and perhaps even recovery of good health. In addition, to provide a free and open online community in which members may exchange information between themselves and support each other in their healing journeys.

### **The Soldiers Project**

4605 Lankershim Blvd.  
Suite 202  
North Hollywood, CA 91602  
Toll Free: (877) 576-5343  
Fax: (818) 761-7476  
<https://www.thesoldiersproject.org/>

The Soldiers Project is committed to providing a safety net of psychological care for military service members and their loved ones as well as educating the general public on how the psychological consequences of war affect not only those who serve, but also their loved ones at home and in our communities. We provide free, confidential professional psychological counseling services to those who have served in our nations military after September 11, 2001.



**Tourette Association of America**

42-40 Bell Boulevard  
Suite 205  
Bayside, NY 11361  
Direct: (718) 224-2999  
support@tourette.org  
<http://tourette.org/>

The Tourette Association is dedicated to making life better for all people affected by Tourette and Tic Disorders. Dedicated to raising awareness and fostering social acceptance, advance scientific understanding, treatment options and care; educate, advocate, and empower.

**Tourette Syndrome "Plus"**

940 Lincoln Place  
North Bellmore, NY 11701-1016  
Direct: (516) 785-2653  
admin@tourettesyndrome.net  
<http://www.tourettesyndrome.net/>

**U.S. Department of Veterans Affairs**

Toll Free: (844) 698-2311  
<http://www.va.gov/>

The Agency is responsible for providing employment, training, educational and reemployment rights information and assistance to veterans, and other military personnel who are preparing to transition from the military. Also provide hearing aids. All World War I veterans are eligible to receive free hearing aids. Other veterans can receive free hearing aids if their hearing loss is at least 50% service-related.

**World Health Organization**

525 Twenty-third Street

N.W.

Washington, DC 20037

Direct: (202) 974-3000

Fax: (202) 974-3663

<http://www.who.int/en/>

We are the directing and coordinating authority on international health within the United Nations' system.

This document was developed by the Job Accommodation Network, funded by a contract from the U.S. Department of Labor, Office of Disability Employment Policy (#1605DC-17-C-0038). The opinions expressed herein do not necessarily reflect the position or policy of the U.S. Department of Labor. Nor does mention of tradenames, commercial products, or organizations imply endorsement by the U.S. Department of Labor.