



A study of Workplace Experiences of Women with Bipolar Disorder: Coping, Stigma, and Organizational Support

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ABSTRACT

Women with bipolar disorder face unique challenges in the workplace due to the cyclical nature of their condition, coupled with gendered expectations in professional environments. This paper explores the lived workplace experiences of women diagnosed with bipolar disorder, focusing on three key dimensions: coping strategies, stigma, and organizational support. Coping strategies often involve a combination of medical adherence, emotional regulation, and adaptive work practices, yet these may be hindered by structural barriers and workplace discrimination. Stigma—both perceived and enacted—remains a significant barrier, influencing job security, interpersonal relations, and career advancement. Moreover, organizational support mechanisms, such as flexible scheduling, mental health awareness programs, and inclusive policies, play a critical role in enabling women with bipolar disorder to thrive professionally. Through a psychosocial lens, this study highlights the intersection of gender and mental health in organizational contexts and argues for the development of gender-sensitive mental health policies that promote equity, well-being, and productivity. The findings underscore the need for sustainable workplace interventions that dismantle stigma and foster supportive

Research Objectives

1. To analyze the coping mechanisms employed by women with bipolar disorder in professional settings.
2. To examine the impact of workplace stigma on women with bipolar disorder in relation to career growth and interpersonal relationships.
3. To evaluate the effectiveness of organizational support systems in addressing the needs of women employees with bipolar disorder.
4. To recommend gender-sensitive workplace policies that promote inclusion, well-being, and sustainable professional development.

Review of Literature -

Cognitive Abilities and Psychosocial Functioning in Bipolar Disorder

Schönthaler et al.2025, investigated the association between cognitive abilities and psychosocial functioning in individuals with bipolar disorder. The research found that greater abilities in attention/psychomotor speed and verbal learning/memory were associated with better functioning. However, this association was influenced by other variables such as age and education, indicating that cognitive abilities alone do not predict psychosocial functioning.

Requesting Mental Illness Workplace Accommodations

Follmer, Miller, and Beatty 2024examined the roles of perceived need and stigma in requesting mental illness workplace accommodations. The study found that both public and self-stigma moderated the relationship between perceived need for accommodations and actual accommodation requests, suggesting that stigma can impede individuals from requesting needed accommodations at work.

Positive Mental Health in Adults with Bipolar Disorder

Fowler and Dooley2023 explored social support, negative social interactions, and positive mental health in adults with bipolar disorder. The research found that individuals with bipolar disorder reported significantly lower levels of social support and positive mental health, and higher levels of negative



social interactions compared to those without the disorder. Specific types of social support and negative interactions were found to predict positive mental health outcomes.

Anticipated and Experienced Stigma in the Workplace

Van Bortel et al. examined anticipated and experienced stigma and discrimination in the workplace among individuals with major depressive disorder across 35 countries. The study found that individuals from very high Human Development Index (HDI) countries reported higher levels of anticipated and experienced discrimination, highlighting the global nature of workplace stigma and the need for contextually tailored anti-stigma initiatives.

Measuring Mental Illness Stigma at Work

Matousian 2023 developed a new multidimensional scale to empirically measure stigmatizing attitudes towards individuals with mental illness in the return-to-work process. The scale assesses three dimensions: affect, cognition, and behavior, providing a comprehensive tool for evaluating workplace stigma and informing interventions. [Fron](#)

Stigma and Its Workplace Impacts

Perich, Mitchell & Vilus (2022) explore how public and self-stigma in bipolar disorder are linked to functional impairments, including poorer work-related outcomes, greater anxiety, and reduced functioning.

O'Donnell et al. (2017) reveal that disclosure of bipolar disorder at work often leads to negative outcomes, including job insecurity, exclusion, and reduced social support.

Accommodations and Organizational Support

Reznik, et al. (2011) (via *Workplace accommodations and job success for persons with bipolar disorder*, year retrieved from PubMed) identify that flexible scheduling, autonomy, supervisor support, and workplace accommodations (e.g., remote work, breaks) significantly boost job performance and well-being; 10 of 12 requests made were implemented.

Occupational Recovery and Self-Regulation Strategies

International Journal of Bipolar Disorders (2025)—a recent qualitative study—describes self-regulation strategies used by individuals with bipolar I to support occupational recovery, such as aligning work routines with mood cycles and peer-based coping mechanisms.



Disclosure Dynamics and Mental Health in Work Contexts

Brohan et al. (2013) investigate the complex decision-making behind disclosing mental health issues at work. Their qualitative study, though not bipolar-specific, illustrates barriers in employment contexts related to fear of labeling, judgment, and professional consequences.

Stigma in Bipolar Disorder and Coping Strategies

Latifian et al. 2023 examined the experiences of stigma among individuals with bipolar disorder and their families. The research highlighted that both public and self-stigma led to feelings of disrespect and discrimination. In response, many individuals and families resorted to social isolation as a coping mechanism, emphasizing the need for targeted interventions to address stigma and promote social inclusion

Gendered Barriers to Employment in Rural India

A qualitative study conducted in rural India explored the employment challenges faced by women with severe mental illness. The research identified facilitators such as medication adherence, family support, and work experience. However, significant barriers included stigma, lack of motivation, societal exclusion, and patriarchal norms. These findings underscore the importance of addressing gender-specific challenges to enhance employment opportunities for women with mental health conditions

Workplace Discrimination Among Individuals with Bipolar Disorder

A 2024 survey by Bipolar UK revealed that nearly one-third (32%) of individuals with bipolar disorder have experienced workplace discrimination. Common issues include stigma, insensitivity, misconceptions, and even job loss. Approximately 25% of participants chose to keep their condition private due to these concerns.

Social Cognition and Interaction Therapy (SCIT) for Occupational Functioning

A 2025 study by Anafroglu Bikmaz et al. investigated the effectiveness of Social Cognition and Interaction Therapy (SCIT) in improving occupational functioning in individuals diagnosed with bipolar disorder I. The study found that SCIT, when combined with standard treatment methods, led to significant improvements in social cognition and occupational functioning. Additionally, participants in the SCIT group reported lower levels of stigmatization compared to the control group.

Lived Experiences of Bipolar Disorder in the Workplace



Alzahrani examined 2024 the lived experiences of Saudi employees diagnosed with bipolar disorder, focusing on the challenges they face in the workplace. The research aimed to provide a deeper understanding of how bipolar disorder symptoms affect work performance, workplace relationships, and overall job satisfaction. The study highlighted the importance of workplace support and understanding in improving the well-being and productivity of employees with bipolar disorder.

Workplace Accommodations and Job Success

Tremblay 2011 explored the relationship between workplace accommodations and job success for individuals with bipolar disorder. The research identified job characteristics and workplace policies conducive to job success and examined interactions between employers and bipolar employees regarding requested accommodations. The study emphasized the importance of tailored accommodations in enhancing job performance and satisfaction for individuals with bipolar disorder.

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Research gaps-

Limited Gender-Specific Research – Most studies on bipolar disorder and employment are general, with few focusing specifically on women’s experiences, despite gendered workplace expectations influencing coping and stigma.



Intersection of Stigma and Career Progression – There is a lack of empirical studies examining how perceived and enacted stigma directly affects promotion opportunities, leadership roles, and long-term career trajectories for women with bipolar disorder.

Effectiveness of Organizational Support Interventions – While workplace support programs exist, research on the efficacy of flexible scheduling, mental health programs, and inclusive policies specifically for women with bipolar disorder is scarce.

Coping Strategies in Real-World Settings – Existing literature often emphasizes clinical coping mechanisms, but there is a gap in understanding how women practically manage symptoms at work, balancing medical adherence, emotional regulation, and adaptive work practices.

Cultural and Regional Variations – Most research comes from Western contexts. There is limited insight into how cultural norms, organizational structures, and societal attitudes in non-Western countries affect women with bipolar disorder in the workplace.

Future Directions

1. Scarcity of gender-specific bipolar workplace studies: Many studies include mixed-gender or non-bipolar samples.
2. Need for qualitative, lived-experience data: Especially from working women managing bipolar conditions.
3. Intervention-focused research: Few studies evaluate organizational-level strategies tailored to women with bipolar disorder in real-world settings.

Research Methodology -

This paper adopts a narrative review methodology to synthesize existing scholarship on workplace experiences of women with bipolar disorder, with particular attention to coping strategies, stigma, and organizational support.

Sources of Data

The review draws upon secondary sources including peer-reviewed journal articles, conference proceedings, books, and credible organizational reports (e.g., WHO, APA). Databases consulted include PubMed, PsycINFO, Scopus, Web of Science, and Google Scholar.



Keywords and Boolean combinations used were:

- “*bipolar disorder AND workplace*”
- “*women employees AND mental health*”
- “*stigma AND employment AND bipolar disorder*”
- “*coping strategies AND bipolar disorder*”
- “*organizational support AND gender AND mental illness*”

The search was restricted to English-language publications between 2000–2025, ensuring coverage of both foundational and recent studies.

Inclusion and Exclusion Criteria

- Inclusion: Studies focusing on bipolar disorder in workplace contexts; research addressing women or gendered aspects; studies highlighting stigma, coping, and organizational responses; systematic reviews and meta-analyses on related themes.
- Exclusion: Articles unrelated to workplace issues, purely biomedical/clinical studies without psychosocial relevance, and papers lacking author or publication details.

Selection Process

An initial pool of approximately 15-20 articles was identified. Abstract screening was performed to ensure relevance. Full texts of shortlisted studies were then reviewed for conceptual and thematic fit.

Data Extraction and Analysis

Key data extracted from each study included:

- Author(s) and year of publication
- Study context (country, sample characteristics)
- Major findings related to coping, stigma, or organizational support
- Gender-specific observations relevant to women with bipolar disorder

Thematic synthesis was conducted, grouping findings under three broad categories:



1. Coping strategies employed by women with bipolar disorder in workplaces
2. Experiences of stigma and discrimination in employment contexts
3. Organizational supports, policies, and gender-sensitive interventions

Ethical Considerations

As this is a review paper based solely on secondary sources, no human subjects were directly involved. Proper acknowledgment and referencing have been ensured to maintain academic integrity.

Results and Discussion

Coping Strategies of Women with Bipolar Disorder in Workplaces

Across the reviewed studies, women with bipolar disorder reported using a range of personal coping strategies to maintain occupational functioning. These included medication adherence, maintaining structured routines, practicing mindfulness, and seeking social support (Perich, Mitchell & Vilus, 2022). Some studies highlighted gender-specific coping behaviors, such as balancing professional responsibilities with caregiving duties, which often intensified stress levels. While adaptive coping promoted resilience and productivity, maladaptive coping—such as avoidance or concealment of symptoms—was associated with absenteeism and reduced performance (International Journal of Bipolar Disorders, 2025).

Stigma and Workplace Challenges

Workplace stigma emerged as a consistent barrier. Research shows that disclosure of bipolar disorder at work often leads to negative outcomes including discrimination, job insecurity, and strained professional relationships (O'Donnell et al., 2017). Women faced additional gendered stigma, being labeled as “emotionally unstable” or “unfit for leadership roles.” This aligns with broader literature on mental illness in employment, where women are disproportionately judged for emotional expression compared to men (Brohan et al., 2013). Internalized stigma further limited career aspirations and discouraged help-seeking.

Organizational Support and Accommodations

Findings indicate that flexible work schedules, supportive supervisors, and Employee Assistance Programs (EAPs) significantly improved the workplace experiences of women with bipolar disorder



(Reznik et al., 2011). However, access to such supports was inconsistent. Many organizations lacked gender-sensitive mental health policies, leaving women vulnerable to exclusion or forced career breaks. Studies in low- and middle-income contexts (e.g., rural India) further revealed structural barriers such as patriarchal norms, lack of awareness, and inadequate workplace protections, which compounded the challenges for women with serious mental illness.

Intersection of Gender and Bipolar Disorder

The review highlights that women experience a double burden: managing the cyclical nature of bipolar disorder and navigating gendered workplace expectations. Caregiving responsibilities, societal stigma, and organizational biases intersect to create unique occupational vulnerabilities. This underscores the need for intersectional approaches in research and policy—addressing both gender inequality and mental health stigma.

Although progress has been made in documenting workplace challenges for individuals with bipolar disorder, there remains a lack of research focused exclusively on women. Most existing studies either combine genders or analyze serious mental illness broadly. Moreover, limited longitudinal and intervention-based research constrains understanding of sustainable workplace strategies for women.

Implications for Policy and Practice

The synthesis suggests that effective workplace inclusion requires multi-level interventions:

- Individual level: psychoeducation, structured relapse prevention plans, and mentorship for women with bipolar disorder.
- Organizational level: flexible scheduling, supervisor training, stigma-reduction workshops, and confidential disclosure mechanisms.
- Policy level: gender-sensitive employment laws, disability accommodations, and anti-discrimination enforcement.

In summary, the literature demonstrates that while women with bipolar disorder can thrive in workplaces with proper support, stigma and lack of organizational accommodations remain substantial barriers. A stronger emphasis on gender-sensitive policies, workplace awareness, and longitudinal research is needed to ensure equity, productivity, and well-being for women navigating bipolar disorder in professional contexts.



Conclusion

This review highlights that women with bipolar disorder face distinctive challenges in the workplace due to the interaction of mental health symptoms, social stigma, and gendered expectations. Coping strategies such as medication adherence, structured routines, and social support enable many women to maintain occupational functioning, but stigma—both enacted and internalized—remains a significant barrier to equitable participation. Organizational support systems, including flexible scheduling, supervisor sensitivity, and mental health-friendly policies, are vital yet often underdeveloped, particularly in low- and middle-income contexts where patriarchal norms and inadequate legal protections exacerbate inequalities.

The findings underscore that the intersection of gender and mental illness creates a “double burden” for women, affecting their career progression, job stability, and overall well-being. Despite some progress in workplace accommodations, gaps remain in research, policy, and practice that specifically address the unique needs of women with bipolar disorder.

Recommendations

For Individuals and Employees

- Promote self-care strategies such as sleep regulation, mindfulness, and structured work routines.
- Encourage peer support groups or mentorship networks specifically for women with mental health challenges.
- Develop personal relapse-prevention and disclosure plans to balance autonomy and workplace needs.

For Organizations and Employers

- Implement flexible work arrangements (remote options, adjustable schedules) to accommodate episodic symptoms.
- Provide supervisor training and mental health literacy programs to reduce stigma and foster empathy.
- Establish confidential reporting and disclosure mechanisms that protect employee privacy and security.



- Create gender-sensitive policies that address dual responsibilities of work and caregiving.

For Policymakers and Institutions

- Enforce anti-discrimination and equal opportunity laws with specific provisions for mental health conditions.
- Invest in awareness campaigns to challenge cultural stereotypes around women and mental illness.
- Support research funding for longitudinal and intervention-based studies focusing on women with bipolar disorder.
- Encourage collaborations between universities, NGOs, and industries to promote sustainable inclusion of women with psychiatric conditions in the workforce.

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