Mental health at work: From promise to practice

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Chapter 1: A hidden crisis made visible

Before the pandemic, mental health was often treated as an afterthought to physical health in the support offered by employers. A steady rise in 'workforce wellness' programs has clearly been underway in the US, driven by factors including the need to contain healthcare costs and attract and retain talent. Additionally, more progressive companies have recognised the close links between engaged employees and better business outcomes.[1]

While most employers see employee mental health as a priority—with 96% of CEOs believing they are doing enough, according to one study[2]—the increasing demand for behavioural health services presents challenges. For example, the average annual spending per employee experiencing mental health issues is US$15,000, with these employees costing US$3,000 more in healthcare services annually compared to their peers.[3] Despite the reported return of US$4 for every dollar invested in mental health treatment,[3] organisations have tended not to develop mental health-specific strategies.

The reported return for every **$1** invested in mental health treatment is **$4**. [3]

Such statistics inspired the Mental Health Parity and Addiction Equity Act, passed in 2008, which stated that mental health benefits in health plans should be comparable to physical health benefits, yet this mandate has not been fulfilled.[4]

This failure is surprising given the prevalence of mental health issues in the US population, where one in five adults has experienced mental illness in some form.[5] Very few get the help they need. One study of over 36,000 people found that 62% of those with mood disorders, 76% with anxiety disorders and 81% with substance use disorders had not received treatment.[6] Reasons include inadequate service provision, with more than 112 million Americans living in areas where mental health providers are scarce;[7] lack of awareness and support systems; and mental health–related stigma. In fact, the American Psychiatric Association suggests that more than 50% of those with mental illness do not get help mainly because of stigma, prejudice and discrimination against those with mental illnesses.[8] "For decades there have been medically assisted treatment programs for mental health and substance abuse which have been underutilised," says Chester Spell, professor of management at Rutgers University.

Yet economic constraints are also especially salient. In a 2018 survey by the National Council for Behavioral Health, 42% of respondents cited

cost and poor insurance coverage as key barriers to accessing mental healthcare. One in four respondents had been forced to choose between obtaining mental health treatment and paying for daily necessities.[9] Piling on top of this existing crisis came the pandemic, through which the impact on mental health has been catastrophic. According to the World Health Organization, global demand for mental health services has risen rapidly since the pandemic began, for reasons including bereavement, isolation, loss of income and fear, just as critical services were halted in 93% of countries.[10]

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The US has been especially hard hit. Gallup reported that almost half of US workers were concerned about one or more of four possible job setbacks—reduced hours, reduced benefits, layoffs, or wage cuts.[11] In 2020, more than 35% of the workforce reported experiencing symptoms of depression due to the pandemic, while 70% reported the workplace itself to be a source of stress. "The US has seen tremendous progress in legitimising and acknowledging that mental health is a serious issue," says Kate Bezrukova, associate professor of organisation and human resources at the University at Buffalo. "We are doing pretty well compared to a lot of countries, but there is much room for improvement."

Karen Moseley, president of the Health Enhancement Research Organization (HERO), worries that well-being programs are a low-hanging fruit for companies to cut from their budget in economically challenging times, "which we're still living through. Conveying the value proposition—that it is something to sustain or even increase in the future—is imperative."

The impact of the pandemic on mental health is long term. First, it has led many people to re-evaluate their lives and the ways they had been struggling in silence prior to covid-19. "The pandemic has made people realise just how stressful work is—just getting to and from work in big cities. It removed the veil, and people have realised things they did not think about before," says Spell.

Working from home, home-schooling children, reducing social interactions and working more hours under stressful circumstances has had negative consequences on physical and mental health for some, with effects related to individual workers' demographic characteristics, individual capabilities and occupations. Caregiving and conflicts between work and family have been integral to the pandemic's mental health toll, but managing the interface between family and work are long-standing problems facing the workforce, argues Bezrukova.

The pandemic will also cast a long shadow in terms of the knock-on mental health effects of lockdowns. Mental illnesses increase the risk of physical health problems such as obesity and cardiovascular disease, and vice versa: poor physical health may increase the risk of mental health problems.[12] As a result, the poor lifestyle habits that some have adopted, including poor diet, sleep and lack of physical activity, may over time create the perfect storm of physical and mental comorbidities.

The pandemic has changed work itself in permanent ways. The shift to hybrid or remote work is the most obvious and arguably the biggest change. Before 2020, only 17% of US employees worked from home for five or more days per week, increasing to 44% during the pandemic.[13] Employers and employees adapted with admirable speed thanks to video-conferencing platforms and new ways of working in digital formats, but this change has had varied mental health implications.

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Some employees have welcomed working from home and appreciated reduced commuting time, the lack of distractions of open-plan offices, and the chance it has offered to move to more affordable locations. Survey data indicate that employees from ethnic or racial minority backgrounds were more favourably inclined to remote work for additional reasons, including sparing themselves from 'microaggressions' in the workplace and 'code-switching' (changing how they talk, dress or behave to fit into majority-white workplaces).[14]

But there is plenty of evidence that some groups are disadvantaged by home working, including those who live alone, those in confined living spaces, those with more extroverted personalities and those with disabilities who may have required employer assistance in ergonomic tools and supports.[15] Working from home has also led to a generalised increase in working hours and a diminished ability to separate home from work.[16,17]

Showing that mental health matters

The mental health crisis accentuated by the pandemic presents an opportunity for companies to think and act more strategically in regards to their staff's mental health and psychological well-being—and there is a long list of reasons to do so. Poor mental health related to work is correlated with a range of chronic diseases which are huge financial burdens for companies in the US, where there is limited state-provisioned public health. Stress and anxiety are linked to physical health conditions including obesity, diabetes, heart disease, and cancer.[18] The cost of mental health conditions is projected to reach US$6 trillion globally by 2030, up from US$2.5 trillion in 2010, more than cancer, diabetes, and respiratory ailments combined.[19] Of these costs, about a third relate to direct costs of diagnosis, treatment and care, with the remainder attributable to indirect costs such as lost productivity and income due to disability and death.

Work itself can be a cause of ill mental health through stress, interpersonal tension or anxiety. The field of 'positive psychology' frames mental health as a positive, active state achievable through states of 'flow,' focused engagement and psychological satisfaction earned by developing skills and mastery.[20] That is to say, mental health is not merely the absence of disease but the presence of positive psychological states. The workplace can contribute by creating an environment that nurtures engagement, flow, mastery and autonomy, which are key positive psychological states.[21] The social networks that form around work are also valuable in sustaining mental well-being, as became evident during lockdowns. Work, at its best, can be integral to personal fulfillment.

There are competitive reasons to pay more attention to employees' mental health. We are, headlines suggest, amidst a 'Great Resignation,' with record numbers of US employees quitting their jobs over the last year.[22] This trend is complex, with many cases resulting from extreme burnout. Now classed as a syndrome in the WHO's 11th revision of the International Classification of Diseases (ICD-11), burnout is specifically applied in an occupational context, with poorly managed, chronic workplace stress as the cause rather than a symptom.[23]

Turning away from draining and unsatisfying work and instead seeking a better future may represent an American labour force re-examining its values. A recent US survey found that confidence among consumers about labour market prospects was at a two-decade high.[24] The trend will accelerate as a result of demographic transition, with younger people more likely to expect mental well-being to be part of the conversation about their employment—and more likely to be open about discussing it in professional contexts.[25]

Young people are speaking openly about their mental health issues in ways not common in previous periods. A 2020 Deloitte global survey found that around a third of millennial workers said they have taken time off work due to stress and anxiety since the start of the pandemic.[26] Young people are now also more likely to leave their job voluntarily to preserve their mental health. A 2021 survey showed 81% of Gen Z's and 68% of millennial workers have done so, an increase from 75% and 50% respectively in 2019.[27]

Chapter 2 explores the best practices and strategies US organisations can look to as they nurture their staff's mental health and well-being as they try to scale these difficulties on their journey towards creating a positive mental health culture.

Chapter 2: Building a positive mental health culture

The pandemic has prompted employers to ramp up their support for mental health and well-being. The National Alliance of Healthcare Purchaser Coalitions, for instance, surveyed over 256 employers and found that more than half were providing emotional and mental health programs for their workforce during covid-19.[28] Another survey of 1200 businesses found that nearly half of employers had trained their managers to recognise the signs of depression, anxiety and other disorders in 2020, with a further 18% planning to do so.[29,30] This contrasts with pre-pandemic support. Consider, for example: one report suggested that only 25% of managers had received training to support their employees.[31] "Management has been aware of these issues for a long time but have not known how to address them adequately. I think the shift now is they are more proactively thinking about it and coming up with programs to help their workforce," says Susan Gurley, executive director of the Anxiety and Depression Association of America (ADAA).

Even companies that have taken steps to improve mental health have run into obstacles—among them, lack of expertise and tools. Recent research by Economist Impact showed that while organisations recognise the importance of workforce well-being (90% agreed that employee well-being is fundamental to productivity, business success and economic recovery), most needed more effective approaches to measure and prioritise it.[1] Key problems include a mismatch between program design and staff needs; stigmatisation of mental health and fear among some staff that seeking support will impact career progression; uneven participation in available programs, often reflecting broader socio-economic inequalities; and a tendency to separate mental health initiatives from harder questions about how work itself impacts mental health. That, in turn, could require companies to rethink fundamentals like workflows, working hours, hierarchy and decision-making.

Taking a systematic approach

Employers can deploy a range of individual interventions to support staff well-being, but they should also avoid seeing any individual solution as sufficient on its own. Everyone in the workforce is different and has different needs. "Mental health is not one thing, or just a box to tick," says Bezrukova. "You need a systemic view, a series of interventions

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that complement each other." Bezrukova draws parallels with Diversity, Equity, and Inclusion (DE&I) training, which "cannot be a half-hour session and considered 'done,'" but is a deep and ongoing process.

Action steps employers can take:[32]

- Make mental health self-assessment tools available to all employees.

- Offer free or subsidised clinical screenings for depression from a qualified mental health professional, followed by directed feedback and clinical referral when appropriate.

- Offer health insurance with no or low out-of-pocket costs for depression medications and mental health counselling.

- Provide free or subsidised lifestyle coaching, counselling or self-management programs.

- Distribute materials such as brochures, fliers and videos to all employees about the signs and symptoms of poor mental health and opportunities for treatment.

- Host seminars or workshops that address depression and stress management techniques like mindfulness, breathing exercises and meditation to help employees reduce anxiety and stress and improve focus and motivation.

- Create and maintain dedicated, quiet spaces for relaxation activities.

- Provide managers with training to help them recognise the signs and symptoms of stress and depression in team members and encourage them to seek help from qualified mental health professionals.

- Give employees opportunities to participate in decisions about issues that affect job stress.

Systematic thinking behooves companies to examine how work itself is a driver of mental health problems. For instance, there is evidence that stress and anxiety at work are caused not so much by the quantity of work but the intersection of high demand and low control.[33] There is, says Bezrukova, "enormous variability in the culture of companies and the attitudes of leaders about how much control they want to release to their employees."

In some sectors—especially software and technology—there has been a shift over the last decade towards 'agile work', which pushes decision-making power down through the organisation and moves away from command-and-control structures. This is based on a belief that staff will be more productive and engaged, and companies will be more efficient and creative, through flatter structures. This model is not without challenges. 'Holacracy', or self-management, can lead to conflict, confusion and lack of coordination.[34] But it does speak to the need for companies to at least review the balance between demand and control and find the sweet spot that gives staff the autonomy they need to complete their work.

"To put people first, listen first"

Experts argue that leaders need to move into 'listening' mode if they are to truly support mental health at work. In our previous Economist Impact research, we explained how one company designed a physical exercise intervention for staff, without appreciating that some parts of the workforce had physically laborious jobs, unlike management-level teams. This indicated how well-intentioned interventions could misfire if not based on listening to staff needs.[1]

Employers can listen more effectively through polls and surveys (including anonymised approaches that encourage frank feedback) and via proactive outreach to understand how individuals are faring

and what would most support them. Companies can take the temperature of their workforce's mental health through evidence-based mental well-being assessment scales as well,[35] and a process of monitoring can be instituted through regular reviews, argues Gurley, executive director and ex officio board member of ADAA.

Listening to what people want, rather than having leaders make assumptions, can produce surprising results. "One of the most overlooked health measures is actually a good ventilation system," says Spell. "This doesn't seem very sexy, but you have to remember, we are in poorly ventilated offices breathing each other's air. Just having a clean building and clean air could have one of the biggest benefits in overall health." He says that "more thought, concern and effort are needed from employers to find out what employees need and what they want. I don't think that's being done in every organisation."

When leaders are approached by a staff member experiencing a mental health problem, they should be careful in how they respond. Such moments are a valuable opportunity to normalise conversations about mental health and take steps to support a staff member—but without the right handling, it can lead to worse outcomes. Gurley cites a case of employees raising complaints that led to a defensive response from management, in which a manager felt criticised and the staff member felt "shut down. . . . If you want to destigmatise these issues, you must be open to suggestions or ideas without taking it as a criticism. The worst thing is for managers to bring it up and then not know how to respond. A lot of us are not trained in how to do that." Moseley echoes this argument, emphasising that "mid-level managers are critical in [creating] a culture of support as those are direct reports to line employees." One report outlines a series of behaviours that managers should adopt when an employee approaches them with a mental health problem.

What to do when an employee approaches with a mental health problem:[36]

- Consider what changes you can make

- Maintain confidentiality

- Don't make it about you

- Listen

- Offer support, but don't overpromise

- Thank them for telling you

- Ask for help from others

- Make yourself 'tell-able'

Investing in well-being

Mental health and well-being require rigorous, evidence-based approaches and practices, which requires leaders with social skills, emotional intelligence and humility to know where and when they need help. "Most [business] leaders are not mental health professionals," says Gurley. "They have to invest in a consultant or expert. It's all very well having World Mental Health Day, but this has to be infused in the day-to-day job. Just like companies have hired DE&I specialists, I think we have to hire mental health experts to navigate these issues."

Leaders should invest material resources to promote mental health, whether that be adding 'mental health' well-being days to conventional time-off allowances, creating dedicated physical

spaces in their offices for relaxation or providing access to technologies and tools. Ensuring the organisation is adequately staffed also makes a difference, helping to reduce high work demands on existing staff by staffing up and spreading the load.[36] Mental health first aid and access to counselling are also essential for more serious and challenging cases.[37,38]

The need for material support is one reason a company's size and commercial heft are such a significant factor in determining whether it has mental health programs and strategies in place. "The biggest barrier to adoption [of mental health interventions] is the fact that over 99% of employees work for an employer with fewer than 1000 employees, so the majority of the US workforce is in small- to mid-size organisations who are just trying to get payroll done," says Moseley. "They may not have a more comprehensive strategy for health and well-being." The flipside, she notes, is that management and leadership in smaller businesses are naturally closer to their staff, so "leadership and a philosophy and culture are easier to convey."

Tackling inequality

Evidence shows that participation in workforce wellness programs tends to be unequal, with the very employees most likely to benefit also

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least likely to participate.[1] Focus group research conducted by Economist Impact identified a range of explanations, including the fact that more health-conscious employees, often of a higher socio-economic status, are more likely to take part in workplace programs. Another challenge is a fear among some staff that participating in any mental health program or support system could reflect badly on their professional competence and lead, for instance, to being passed over for promotions.[1] Such worries are likely greater in employees occupying lower rungs of the organisational ladder. Thankfully, there is some evidence that this is starting to change. "Employers are taking a stronger look at how their workplace practices, especially mental health, can be more equitable across their employee populations, whether it's headquarters or the front line," says Moseley.

One strategy for ensuring more balanced participation and engagement is to revitalise or revamp employee resource groups. These are organisational units representing specific groups of employees who share a common identity, which could be gender, ethnicity or race, to name a few.

Companies including Verizon Media, Johnson & Johnson, and RetailMeNot are implementing employee resource groups as a part of their DE&I strategies, and these could also be appropriate venues for raising mental health awareness in disadvantaged groups.[25] Moseley argues that inequality could also be addressed through greater diversity among the relevant service providers—that they, in short, "resemble the population they are working with," something that remains "a challenge."

Leading by example

Organisational cultures flow from leaders—and from their behaviours more than their formal pronouncements. Any company that wants to

create a pro-mental-health culture must ensure its CEO and all levels of management embody the norms and values the firm wishes to see embedded across the organisation.

One way leaders can establish these norms and values is by speaking up about their own personal challenges and struggles. A second is modelling positive behaviours like keeping boundaries around 'office hours' and not sending or responding to emails outside of those periods. Leaders cannot encourage employees to take time off from work out of business hours and then "send 20 emails over the weekend. If you really want [staff to achieve] work-life balance, then unless the house is burning down, don't email employees on the weekend," says Gurley.

CEOs play a significant role in normalising mental health and well-being as a legitimate issue for the organisation to engage. They should be conscious of their influence in setting the tone and direction, rather than assuming this should come from

the human resources department or its C-suite appointee.[25] More and more companies are also appointing 'chief well-being/wellness' officers to advocate for the issue in the boardroom, inform the design of customised strategies and build an organisational culture that supports well-being and integrates it with corporate performance.[39]

The C-suite is not the end of the line, say experts. Boards are an underappreciated actor in pushing for change. "I think boards are the final frontier in mental health," says Gurley, but she adds that many of today's board members are from an older generation in which "people did not talk about mental health issues as freely." This difference must be tackled. "If boards themselves don't view this as important, they are not going to value what the CEO does on this issue, they're not going to value that the CEO may want to allocate money for it."

Conclusion

Workplaces are crucial for supporting mental health

As companies in the US hope for a postpandemic future, there have been many calls to 'build back better' on everything from environment and sustainability to remote work. Few desire a return to prepandemic norms. Mental health has been one of the most neglected societal issues in terms of government and private sector support, with only a handful of companies taking it seriously as an issue in its own right.

The evidence is now strong that mental health is associated with better physical health outcomes, more engaged employees and lower attrition. In a tightening labour market, and with younger workers placing more emphasis on mental health, companies cannot afford to ignore this dimension of well-being. But there are many obstacles that require a careful strategy based on rigorous evidence and designed to be holistic, inclusive and proactive.

Appendix: Case study gallery

Square, who have now announced a permanent move to working from home, partnered with employee resource groups and distributed documents to help with the adjustment to working from home. These documents included tips on home-schooling and mental health resources for those who were socially isolated. They also host virtual events, virtual water coolers on Google Hangouts and photo contests as some of the ways to keep employees connected.[40]

One method trialled during May and June 2020 in Midwestern USA was an online ambulatory intervention consisting of a daily dose of expressive writing, an adaptive emotion regulation activity and one or two (depending on whether low- or high-dose) positive emotion–generating activities, lasting for 3-6 minutes.[41] Their results showed that the method boosted positive—while reducing negative—emotions, with a clear advantage noted when a high-dose intervention was followed.

University of Missouri Health Care turned to their existing peer support initiative, the forYOU Team, to help support their approximately 1200-strong clinician workforce during the pandemic. Partnering with leadership, they formalised a plan of action and established a well-being task force to attend to the basic care needs and safety of staff, facilitate connection with appropriate resources, create strategies for addressing well-being at all levels and enhance communication to correct misinformation and improve morale.

Restauri and Sheridan have tried to address burnout, acute stress disorder and posttraumatic stress disorders, specifically among radiologists.[42] They believe that a critical step toward establishing policies and practices is to create an environment and culture in which mental health and illness are not stigmatised. They suggest that reflective writing exercises provide a structured way to access emotions and process experiences, and the channels of communication need to be increased between the physicians and their managers.

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