



**Mindful**  
Continuing Education

# Promoting Behavioral Health in the Workplace



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## Introduction

Mental health struggles do not exist in isolation. Furthermore, it is not as if symptoms and ramifications of mental illness, stress, and trauma live in a sort of bubble-like atmosphere and do not pop up unexpectedly outside of that bubble. Mental health is often unpredictable, uncanny, and at times very frustrating for the person who is struggling. While many employers, employees, and those who benefit from services of organizations might wish that mental health issues did not find their way into the workplace, this simply is not possible. As expected, mental health is often made better by positive workplace environments and made worse by toxic workplace settings. This should not come as a surprise given the extensive amount of time individuals spend in the workplace and commuting to their workplaces.

Workplace issues often result in or worsen already identified anxiety, depression, and other mental health disorders. These struggles are often exacerbated by the high cost of living and the fear of or inability to exit a job because of the income that it provides, even if it has become detrimental to the employee's mental health. Workplace behavioral health must be assessed and well supported. It is also essential that behavioral health professionals are trained on how to support employees in identifying if their work environment is conducive to positive mental health or not, how to make improvements in organizational structure to support mental health, and how to support employees who are near crisis at work. This course provides an overview of workplace behavioral health and how to promote it.

## Section 1: Why is workplace mental health support important? What are the benefits of employers focusing on workplace mental health?

### Introduction

According to Gettysburg College (2021), the average person will spend 90,000 hours, or one-third of the lifespan, at work. If Americans are spending so many hours at work, the workplace must be conducive to their joy and sustainability. If it is not, as you can imagine, mental health may be significantly impacted. Employers should have a significant investment in the mental health of their staff because this directly relates to many outcomes for their organization.

### Statistics

The consequences of mental illness remains an incredibly high concern in the United States. In fact, according to the Centers for Disease Control and Prevention (2019), 1 in 5 adults in the United States reported a mental disorder in 2016 and 71% of adults reported one symptom of stress. These symptoms may include headache, anxiety, or feeling overwhelmed (Centers for Disease Control and Prevention, 2019). Currently, 63% of Americans are part of the workforce in the United States, and considering most Americans spend a significant amount of time and energy at work, their employers must be invested in their wellbeing and in reducing their stress levels as much as possible. In the short and long term, this helps businesses by reducing healthcare expenses for employees, decreasing employee absences, and improving business outcomes (Centers for Disease Control and Prevention, 2019). Every year mental health conditions are costing employers more than \$100 billion and 217 million lost workdays (National Alliance on Mental Illness Pierce County, 2021). Imagine the loss of productivity that occurs in this country during those 217 million days.

### **Negative outcomes in the workplace**

Poor mental health at work results in the following negative outcomes for employers and employee mental health as a direct result of stress (Centers for Disease Control and Prevention, 2019):

1. Reduction in job performance
2. Reduction in employee productivity
3. Less engagement in the employee's work
4. Poor communication with coworkers and other peers and stakeholders at work
5. Reduced physical capability and outcomes
6. Reduced daily functioning and outcomes

Poor mental health at work results in the following negative outcomes for employers and employee mental health as a direct result of depression (Centers for Disease Control and Prevention, 2019):

1. Depression reduces the person's ability to complete physical tasks for their work by 20%
2. Depression reduces the person's ability to complete cognitive tasks for their work by 35%

3. Depression results in higher rates of disability
4. Depression results in higher rates of unemployment

Additionally, an area that needs to greatly improve is the number of struggling individuals who receive treatment. The following statistics address this disparity (Centers for Disease Control and Prevention, 2019):

1. 57% of employees who report moderate depression receive treatment
2. 40% of employees who report severe depression receive treatment

### **Why investing in staff mental health matters**

It is not helpful to simply identify what goes wrong when mental health is ignored at work. We must acknowledge everything that goes right when behavioral wellness is considered an important topic in the workplace and steps are taken to improve it.

The following benefits come from focusing on strong mental health at work (National Alliance on Mental Illness Pierce County, 2021):

1. Staff members become happier, more confident, and more productive - this is especially true when staff feels they are seen and supported at work by their coworkers and bosses. When these individuals support staff to address their struggles and concerns, employees feel more empowered and confident in their problem-solving abilities and less shameful and worried about the outcomes
2. Stigma is reduced - the negative stigma associated with mental health is so high. When workplaces normalize having conversations about mental health, sharing strategies for staying mentally healthy and coping, and support staff in accessing mental health services they are actively fighting against stigma. This is so important because often stigma prevents individuals from accessing necessary services to reduce the risk for poor outcomes such as substance use, domestic violence, suicide, and more
3. Creating an accepting culture - when employees feel safe enough to disclose their struggles and sadnesses they begin to realize that others feel similarly or have in the past. This helps to create a culture where people see themselves as more alike than they are different and realize that mental health conditions are normal and human instead of something that makes them different or bad

4. Supports retention and attracts healthy staff - when organizations create cultures like this they attract staff that fit into that culture. Additionally, when staff feel supported, seen, and understood at work they are more likely to feel invested in the organization they work for and stay at the organization long-term
5. Less stress - creating the kind of environment discussed above will help ensure that individuals are less stressed and therefore are no longer bringing home issues from work that may infiltrate numerous aspects of their lives
6. Helping people feel less isolated and more included - individuals who are working in an atmosphere where they feel they can talk about their mental health will feel less isolated in their struggles. Solitude that is excessive is often undesirable and detrimental, and it can cause or exacerbate mental illness. When people feel connected to and supported by others they are happier and more productive at work

## **Summary**

When employees are not feeling well emotionally, it can show in their work performance. Because of this, organizations have the best outcomes when they preventatively address mental health at work. They can do this in a variety of ways but they must interact with their staff (stakeholders) while developing those programs and interventions. It is important that individuals feel heard and seen at work in their emotional health needs. Engaging them in the process of developing ways to address their needs will ensure that those tools and supports best reflect the actual health of the staff at an organization.

## **Section 2: Workplace stress**

### **Introduction**

Workplace stress is one of the most common causes of anxiety and depression. While excessive stress can be debilitating at times, some stressors are not necessarily bad (HelpGuide, 2021). In some cases, when people feel pressured, they may put more effort into tasks because they want the outcomes to be positive, and they may feel more focused and energetic. However, in large amounts or for prolonged periods of time, stress is very dangerous (HelpGuide, 2021).

### **Stress at work**



The following are common causes of stress in the workplace (HelpGuide, 2021):

1. Fear of being laid off
2. Overtime
3. Lack of appropriate staffing levels
4. Pressure to perform and meet expectations without an increase in job satisfaction
5. Pressure to work at high levels
6. Pressure to be on-call or available all the time
7. Lack of control over how individuals do their work

Individuals might be able to tell they are stressed at work as a result of (HelpGuide, 2021):

1. Feeling anxious, irritable, or depressed
2. Apathy or lack of interest and investment in work
3. Problems falling asleep or staying asleep
4. Fatigue or exhaustion
5. Inability to concentrate as usual
6. Muscle tension and tightness
7. Stomach issues
8. Headaches or migraines
9. Social withdrawal or isolation
10. Low libido
11. Substance use

Unfortunately, individuals who work shift work are at a higher risk for stress and their health may suffer (HelpGuide, 2021). Such individuals should be conscious of their sleep-wake cycle and do their best to create environments that promote restful sleep. They should limit the number of nights that they work irregular shifts to prevent issues associated with long-term sleep deprivation. Individuals who work shift work must avoid

frequently changing or rotating shifts so that they are on the same sleep schedule as much as possible. While poor sleep can exacerbate stress, adequate sleep is very important to help ensure that individuals stay mentally healthy (HelpGuide, 2021).

## **Impact of stress at work**

The National Institute of Mental Health (2021) recommends that all employers and employees know the following about stress:

1. Stress affects everyone - people will be stressed at work. This is common, however, when that stress begins to feel overwhelming and constant, it becomes very dangerous. Stress can be brought on by many different situations such as divorce, life changes, losing a job, illness, or negative changes in the workforce
2. Not all stress is bad - stress helps the body prepare for situations that might be dangerous. Stress signals are released in the body when there are indicators the individual is unsafe and needs to try to survive something
3. Long-term and constant stress is harmful - chronic stress makes it very difficult for the brain and body to find a baseline of health. Because of this many people will develop chronic illnesses such as immune system dysfunction
4. Stress is manageable when individuals invest in strategies to manage it. Helpful strategies include learning to recognize the signs of stress, talking with professionals about stress, exercising regularly, participating in activities that bring joy, setting goals and having concrete steps in place to meet them, staying connected to others, and accessing clinical treatment
5. Asking for help is not something that makes the individual inadequate or weak. In fact, it is a sign of strength to be willing to ask for assistance (National Institute of Mental Health, 2021)

## **Stress and suicide**

Employers and employees must understand that stress, which often leads to mental health disorders, can also dramatically increase the risk for suicide. This is especially true for individuals in high-paced and competitive careers such as sales, medical fields, and others. High-stress situations at work may prompt suicidal thinking and planning which can range from fleeting thoughts to detailed planning for a suicide attempt (Litner, 2020). Crisis services provided through Employee Assistance Programs can be lifesaving

(Litner, 2020), but employers and employees must first recognize the seriousness of the situation.

The following are symptoms or signs that a person might be considering suicide (Litner, 2020):

1. Appearing and self-reporting feelings of hopelessness
2. Appearing and self-reporting feelings of being trapped
3. Feeling intolerable emotional pain
4. Being preoccupied with violence, death, or dying
5. Consistent shifts in mood, energy, or sadness
6. Talking about feelings of revenge or guilt
7. Experiencing agitation at higher rates than normal
8. Increased use of drugs and alcohol
9. Changes in personality or routine
10. Changes in sleep patterns (oversleeping or insomnia are common)
11. Engaging in risk-taking behavior or inappropriate impulsive behavior
12. Accessing weapons or substances that can end life
13. Experiencing depression, isolation, or panic attacks
14. Self-reporting feelings of being a burden to others
15. Saying goodbye to others or apologizing to them
16. Self-reporting a loss of enjoyment in activities that once brought them joy
17. Loss of interest in sex or other activities such as eating and sleeping
18. Excessive feelings of remorse or self-criticism
19. Self-reporting feelings of regret about life or wishing they had never been born

Crisis services that are available for individuals when they are experiencing suicidal ideation include the following (National Alliance on Mental Illness, 2021):

1. National Suicide Prevention Lifeline - staffed 24/7
2. National Crisis Text Line - staffed 24/7
3. National Alliance on Mental Illness HelpLife - staffed weekdays during daytime hours
4. National Sexual Assault Hotline - staffed 24/7
5. National Domestic Violence Hotline - staffed 24/7

When individuals are in crisis or are thinking of suicide as related to stress or other mental health disorders the following should occur by a mental health professional (Rothes & Henriques, 2018):

1. A comprehensive risk assessment should occur:
  - a. Assess for risk factors that might prompt the person to be at higher risk for attempting suicide
  - b. Ask how the individual feels about death and what might happen afterward
  - c. Explore the existence of a plan for suicide
  - d. Identify the access to complete the plan for suicide
  - e. Ask why the individual wants to die
  - f. Identify if the individual has had any previous suicide attempts
  - g. Understand what problems are prompting the person to want to attempt suicide
  - h. Identify what supports/services the individual can access for help
  - i. Identify next steps: transportation to hospital vs. outpatient supports
2. Support assisting the person in the necessary next steps
3. Plan for what will occur after those steps happen
4. Collaborate with other providers as necessary

Employers, peers, or other support people at work may have to help facilitate a mental health evaluation when an individual is at risk. Because of this, employers and community members must be trained in how to support individuals who may be experiencing a crisis or other mental health struggles.

## **Summary**

Currently, 70% of adults report that workplace stress is negatively impacting their relationships (Shortlister, 2021). These statistics are especially troubling because of the negative impact that stress has on both physical and mental health. While mental health professionals must be prepared to support individuals who are suffering, they must first be made aware of the issue. Furthermore, it is imperative that employers seek to reduce workplace stress, that employees learn to recognize their stress, and that mental health professionals be there to facilitate prevention strategies as well as interventions as needed.

## **Section 3: How has COVID made workplace mental health even more relevant?**

### **Introduction**

The Covid-19 pandemic took most people by surprise in 2020. Data collected at the end of June 2021 shows that there have been more than 34,000,000 total cases of Covid-19 in the United States and over 600,000 deaths (Worldometer, 2021). Throughout the world, there have been over 182,000,000 cases and almost 4,000,000 deaths (Worldometer, 2021). This deadly disease has resulted in huge economic, social, and cultural changes. Only essential employees have worked in person for almost a year and everyone else had to abruptly begin working at home. Working parents have had to do their jobs from home while their children have been learning at home. This has been a difficult time for everyone. Even those who have not become sick or burdened directly by the illness have been impacted by the change in routines and communities as a result of it.

The Covid-19 pandemic has highlighted the importance of addressing mental health at work as people have often faced abrupt changes in policy, procedure, and daily task completion with very little if any training or warning. This has resulted in increased stress levels throughout organizations. Covid-19 has shown exactly how important it is to

support the health and wellness of staff members at work, regardless of if they work in an office/physical location or if they work remotely.

## **Statistics**

Disruption in routines and the lack of normalcy in day to day life have significantly impacted mental health since the beginning of the Covid-19 pandemic. This is demonstrated by the following (National Council for Mental Wellbeing, 2021):

1. 53.8% of individuals report they are more emotionally exhausted
2. 53% of individuals report an increased sadness in their everyday life
3. 50.2% of individuals report being more irritable
4. 42.9% of individuals report feeling more confused than before
5. 38.1% of individuals report having an increase in their insomnia (lack of sleep has poor mental health outcomes for many people)
6. 32.3% of individuals report an increase in their anger
7. 24.4% of individuals report increased feelings of guilt

## **Understanding the impact**

The Covid-19 pandemic has been difficult on mental health regardless of a person's employment status. Bringing the struggles to the workforce is just an added stressor where Covid-19 is concerned. It is important to understand the impact of this pandemic on mental health before considering how this translates into the workforce.

The following implications have been noted on mental health from Covid-19 (Panchal, Kamal, Cox, & Garfield, 2021):

1. Young people experienced a variety of losses such as the closing of universities, loss of income, potential loss of their health if they were infected and the trauma of observing so much death worldwide
2. The loss of preferred jobs has resulted in anxiety, depression, poor self-esteem, and having to accept jobs they are not interested in or invested in as a result of financial struggles

3. Women and children have been more likely to report Covid-19 related stress and mental health issues than men are by 9% higher incidences
4. The pandemic has affected communities of color disproportionately compared to white communities. Black adults are 7% more likely to report anxiety and/or depressive symptoms than white adults and Hispanic/Latino adults are 5% more likely to report anxiety or depressive symptoms than white adults
5. Essential workers have faced extremely high stressors during Covid-19. Their workloads have increased dramatically and become even more demanding and they are at an increased risk of contracting the virus. As a result, they have been 12% more likely to report symptoms of anxiety or depression, 14% more likely to report substance use, and 14% more likely to report suicidal thoughts during the pandemic than previously

The struggles that have been magnified due to the pandemic continue to be present as job responsibilities continue to exist and evolve. Mental health issues are often exacerbated as individuals are tasked with completing all of their daily work and personal obligations. Therefore, it is critical that organizations provide adequate resources, training, and funding for mental health support in the workplace.

## **Recommendations**

Employers should make the following recommendations for employee health and well-being during and after the Covid-19 pandemic (Center for Workplace Mental Health, 2021):

1. Identify and maintain a regular schedule that serves the individual well
2. Stay connected with peers and other people by using technology and in-person when possible
3. Maintain a strong immune system by staying hydrated, getting adequate sleep, taking vitamins, and other preventative tasks
4. Prioritize personal hygiene
5. Exercise and stay active
6. Get as much fresh air as possible

7. Remain informed about potential health and mental health concerns and how to mitigate them
8. Limit media consumption - individuals should be consuming enough information to feel empowered and knowledgeable but should also learn to turn it off if it begins to feel overwhelming and stress-inducing
9. Maintain boundaries at work and with scheduling - individuals should not be working outside of the hours they are paid to work
10. Distract from stressors when possible and engage in activities that bring joy
11. Be creative in accomplishing goals and tasks
12. Take medication for mental health if necessary
13. Identify and understand the warning signs of a mental health concern
14. Engage in support from trusted loved ones (Center for Workplace Mental Health, 2021)

## Examples

The following examples illustrate how organizations have successfully supported employee mental health during the Covid-19 pandemic (Adams, 2020):

1. Chevron - Chevron's EAP program and WorkLife Services Program provide access to licensed counselors for support with coping, anxiety, depression, and other concerns. In 2018, Chevron received an award for its commitment to creating mentally healthy workplaces. They increased emphasis on infection prevention during the pandemic, and provided ergonomics and stress testing and prevention for employees. Additionally, they implemented a company-wide campaign for increasing awareness and reducing the stigma associated with mental health disorders, and provided self-guided resources to enhance behavioral wellness
2. Culligan Water - during the pandemic, Culligan Water implemented a virtual well-being platform along with their EAP program that provides the following free resources for all employees: self-care videos, 1:1 health coaching for employees and spouses, weekly well-being calls, well-being community events, live meditation sessions, activity breaks, stress management activities, and morale-boosting events



3. EY - EY already had a robust wellness program in place for employees before the pandemic but during the pandemic, they began to offer backup childcare support, virtual yoga, virtual workout classes, and other services for wellness
4. Financial Times - during the pandemic, Financial Times added the following supports to their EAP/wellness programs: free-meditation sessions, connection sessions to reduce isolation, and a week-long mental health awareness campaign in May
5. Pacific Gas and Electric Company - PG & E implemented many services to support psychological health during the pandemic: weekly videos and meetings that reiterated the importance of mental health and encouraged asking for support, user-generated content where employees share how they are coping, access to supports/help, an intranet page dedicated to mental health, and an HR phone line to support employees in answering medical/insurance questions

## **The difference between stress and mental illness**

Stress and mental illnesses often mimic one another and cause or exacerbate one another. It is a high possibility that a person who is unduly stressed might have anxiety, depression or another mental health issue. It is also likely that a person under high stress for extended periods of time might develop a mental illness. The two are intrinsically connected, however, there are key differences between them including the following:

1. People under stress experience mental and physical health symptoms but the triggers are often short-term, whereas people with anxiety, for example, will have persistent and excessive symptoms that do not go away when the stressor subsides
2. Both stress and mental health issues generally respond well to similar coping strategies. However, if individuals continue to struggle after implementing coping mechanisms or if day-to-day functioning or mood continues to be impaired, this may indicate the presence of an anxiety disorder, and a mental health professional should be consulted. The individual may require additional support such as mental health medication or other clinical interventions (American Psychological Association, 2020)
3. Stress is a mostly external experience where individuals are triggered by something or someone they interact with in the outside world, whereas anxiety

and other mental illnesses are caused by internal struggles in many cases (Ellis, 2020)

4. Stress is generally warranted and is understandable given external situations or environments that prompt it, whereas anxiety and other mental health disorders tend to be unusual, excessive, and go well beyond the reactions of other people in similar situations (Ellis, 2020)
5. Stress is generally manageable whereas mental health disorders can often result in profound incapacities to function as before (Ellis, 2020)

## **Summary**

The Covid-19 pandemic has had significant impacts on mental health both in and out of the workplace. Situations that exacerbate mental health disorders and stress at work must be addressed by employers for both ethical and business-related reasons. First, employers have a responsibility to ensure that their workplaces are healthy. Second, when employees feel safe, supported, and healthy at work, they perform better and serve business outcomes more successfully.

## **Section 4: What action steps can employers take?**

### **Introduction**

According to the Centers for Disease Control and Prevention (2019), employers have the responsibility, if they care for their employees and their business outcomes, to provide workplace health promotion programs and to create environments that serve mental health well. Providing a combination of both mental health and physical health supports offers the greatest opportunity to reduce negative outcomes and guarantee that employees feel their best in the work environment (Centers for Disease Control and Prevention, 2019).

### **Noticing the health of employees**

Before even taking action steps, employees need to understand how poor mental health manifests and what some warning signs might be. Indicators that mental health issues may be a factor include (National Council for Mental Wellbeing, 2021):

1. Calling in sick often
2. Being present but not invested at work

3. Being withdrawn
4. Isolating self from others
5. Having frequent changes in personality
6. Difficulty focusing and recalling information and details
7. Presenting as unkempt
8. Poor organizational skills and management of thoughts and tasks
9. No longer enjoying work and activities they once enjoyed
10. Employees reporting sadness, worry or self-blame, or who are overly critical of themselves
11. Employees reporting hopeless feelings, helplessness, and feeling trapped at work

Mental health issues and disorders in the workplace are often the result of compassion fatigue (National Council for Mental Wellbeing, 2021). Compassion fatigue is the inability to effectively care for or have compassion for others because the individual is completely exhausted from working with those who are suffering. Compassion fatigue often looks like the following (National Council for Mental Wellbeing, 2021):

1. Emotional struggles
  - a. Anger
  - b. Irritability
  - c. Anxiety
  - d. Cynicism
  - e. Hypersensitivity or insensitivity
  - f. Emotional exhaustion
  - g. Difficulty feeling empathy
2. Mental changes
  - a. Lack of feelings of accomplishment or meaning in work
  - b. Confusion

- c. Inability to concentrate
  - d. Disengagement in social settings
  - e. Lack of pleasure from enjoyable activities
  - f. Feeling hopeless
3. Physical health changes
- a. Muscle tension
  - b. Headaches
  - c. Back pain
  - d. Neck pain
  - e. Sleep troubles
  - f. Nausea
  - g. Poor hygiene
  - h. Illnesses
  - i. Substance use

Compassion fatigue can often be addressed by ensuring that individuals maintain their relationships, share their feelings, prioritize activities that bring them joy, spend time outside, relax and laugh, see doctors when necessary, and make sure that basic needs for eating and sleep are being met (National Council for Mental Wellbeing, 2021)

Once employers begin to notice the mental health of their staff, next they must address it.

### **Improving mental health at work**

Mental health can be improved in the workplace and safe cultures can be created. Workplace environments are among the best settings to create positive and healthy cultures because of the following (Centers for Disease Control and Prevention, 2019):

1. There are generally already clear communication structures in place at work (email, policy distribution, regular team meetings, etc.)

2. Programs and policies are often built from one centralized team that can distribute information about health clearly as they do any other policy or procedure at work
3. There are generally strong social support networks in the workplace - people might not consider their employees their friends but they do regularly interact
4. Employers can provide incentives (financial or otherwise) to encourage employees to engage in healthier behaviors
5. Employers generally have policies, procedures, and data in place to track outcomes, so they can utilize these structures to analyze progress and effects of workplace wellness programs and adjust as necessary

The following steps can be taken by organizations to promote robust emotional health at work (Centers for Disease Control and Prevention, 2019):

1. Provide mental health self-assessment tools to employees and communicate where to access them, how to utilize them, and what to do with concerning results
2. Provide free or reduced access to clinical screenings. For example, offer screenings for depression by a mental health professional as well as follow-up sessions to identify goals and strategies for reducing depression and improving mental health overall
3. Provide case management by mental health professionals who, once they have assessed the employee, can provide referrals when necessary to external services to promote emotional health
4. Provide health insurance with no or low-cost access for mental health and psychiatry services (medication management included)
5. Provide access to health coaching, lifestyle coaching, and self-management programs that provide positive behavioral health change
6. Provide materials such as flyers, videos, brochures, books, and other tools to employees about how to recognize poor mental health and ways to treat it
7. Provide workshops and seminars on depression, stress, anxiety, and strategies for managing these issues such as mindfulness, meditation, deep breathing, coping ahead, and other tools for remaining motivated

8. Provide safe, dedicated spaces for relaxation at work
9. Provide managers with training to support employees who are struggling
10. Provide employees opportunities to engage in decision-making at work that will improve workload issues and allow for changes to reduce stress

Some organizations may find that even after developing programs, they have a difficult time engaging staff in them. The following steps are recommended to help employers encourage staff participation and engagement (National Council for Mental Wellbeing, 2021):

1. Be vulnerable and encourage vulnerability
2. Establish regular check-ins between staff members
3. Offer information share spaces
4. Model healthy and appropriate behaviors, boundary setting, self-care, etc.
5. Offer flexibility and be inclusive in how these programs are offered

### **Employee Assistance Programs (EAPs)**

Employee Assistance Programs (EAPs) are programs that employers sponsor to support employee health in the workplace. In general, employers contract with organizations to provide services to employees when problems arise in their lives (SHRM, 2021).

Employees may seek assistance for marital struggles, financial issues, emotional health problems, family discord, substance use, and other concerns (SHRM, 2021).

A comprehensive EAP should include the following (SHRM, 2021):

1. An advisory process that involves representatives from all levels of the organization
2. The ability to add services as employees needs change
3. Crisis intervention services offered 24/7
4. Clear policy to identify when short-term problems must be referred to organizations outside of the EAP
5. Training for leaders and staff at the organization so that they understand how and when to refer to EAP

6. Trained professionals who maintain and improve their skills (licensed mental health professionals)
7. The ability to refer multiple ways (self-referral vs. informal vs. formal)
8. Compliance with legal requirements
9. Culturally sensitive quality services
10. Policy development
11. Communication and training
12. Critical incident response
13. Quality and access being prioritized over the cost of services
14. Multiple ways to access services
15. Services offered in languages that individuals can understand
16. A robust website that promotes services and materials
17. Data reporting

EAP programs are helpful for both employees and employers. The following benefits have been identified (SHRM, 2021):

1. For every dollar invested in an EAP program, employers generally save five to sixteen dollars
2. EAPs are responsible for adhering to privacy protection laws so staff members are assured that their struggles will not be disclosed to their employer
3. EAPs offer medical benefits such as counseling and treatment
4. EAP programs reduce absenteeism, workers' compensation claims, medical costs, accidents, and grievances
5. EAP programs improve productivity and engagement at work and reduce turnover

## **Workplace Mental Health First-Aid**

Mental Health First Aid at Work is a mental health training program that offers information to participants about how to notice mental health crises in their peers at work (National Council for Mental Wellbeing, 2021). This is a program that employers can invest in that helps people feel prepared for how to address mental health struggles at work. When individuals are not educated or aware, they often ignore behavioral health issues or address them only when they have escalated to the crisis level, which is detrimental to everyone involved. An organization that was trained in Workplace Mental Health First Aid reports that after they began implementing preventative factors and developing wellness rooms, they noticed that employees felt empowered to speak up more frequently. Workplace Mental Health First Aid works to reduce stigma, improve the understanding of mental health and substance use in employees, teaches people who to address a mental health or substance use challenge and teaches employees how to refer and connect their peers to appropriate resources as needed (National Council for Mental Wellbeing, 2021).

Mental Health First Aid at Work also helps to ensure that individuals are functioning at their optimum level where they can be present, calm, and feel safe (National Council for Mental Wellbeing, 2021). They can think and react appropriately and clearly as needed, and remain engaged and alert. In contrast, when individuals are not at their prime level of functioning, they are often in a fight, flight, or freeze mode. They might be emotionally reactive, lethargic, or have low energy. They may experience anxiety and an increased heart rate or feel dissociated and shut down. They could also have a panic attack, experience rage, or feel numb and emotionless. These states make it difficult for employees to be productive, and their struggles may be reflected in the work they do or in the tasks they fail to complete (National Council for Mental Wellbeing, 2021).

## **Summary**

There are a variety of steps that employers can take to better support the mental health of their staff. This begins with talking to staff regularly and evaluating how employees are doing. Understanding culture and successes/failures from the employee perspective is essential in ensuring that businesses build programs that best serve their staff. It often feels worse for employees to have to attend activities that they do not believe will help them simply because their employer puts time and energy into it. Engaging workers as stakeholders in the process will reduce this likelihood. Additionally, incorporating Employee Assistance Programs, Mental Health First Aid, and other formal programs or services can be effective in assisting with this undertaking.



## Section 5: How can business leaders, health care providers, and government officials ensure that employee health is a priority?

### Introduction

Healthcare providers can take steps to ensure that employee health is a priority. Doctors, nurses, and other professionals have a great deal of power because they are generally seen as authority figures where health is concerned and can make recommendations and offer interventions to improve health, both at micro and macro levels. However, healthcare professionals and employers are not the only individuals and groups of people responsible for employee health at work. Promoting and maintaining employee wellness takes a community, much like raising children takes “a village.” All community organizations and players are responsible, however big or small, for some piece of employee health. This section discusses how these groups of people can prioritize mental health in the workplace.

### How healthcare professionals can promote workplace mental health

The following recommendations are made for healthcare professionals in promoting employee mental health (Centers for Disease Control and Prevention, 2019):

1. Ask patients about symptoms of depression and screen appropriately
2. Ask patients about symptoms of anxiety and screen appropriately
3. Ask patients about symptoms of stress and screen appropriately
4. Provide information on treatment and services for behavioral health conditions and symptoms
5. Partner with other professionals to ensure that patients have access to the necessary services based on their mental health

### Assessment tools

There are many different tools that medical professionals and other healthcare staff will utilize for measuring health and well-being. The most common tools are the PHQ-9, GAD-7, and the Patient Stress Survey. These can be seen below.

Most healthcare teams will utilize the PHQ-9 for assessing depressive symptoms. It looks like this (MDCalc, 2021):

*Please identify how often in the last two weeks you've been bothered by any of the following problems:*

<i>Little interest or pleasure in doing things</i>	<i>“Not at all” (0), “Several days” (1), “More than half of the days” (2), “Nearly every day” (3)</i>
<i>Feeling down, depressed, or hopeless</i>	<i>“Not at all” (0), “Several days” (1), “More than half of the days” (2), “Nearly every day” (3)</i>
<i>Trouble falling or staying asleep, or sleeping too much</i>	<i>“Not at all” (0), “Several days” (1), “More than half of the days” (2), “Nearly every day” (3)</i>
<i>Feeling tired or having little energy</i>	<i>“Not at all” (0), “Several days” (1), “More than half of the days” (2), “Nearly every day” (3)</i>
<i>Poor appetite or overeating</i>	<i>“Not at all” (0), “Several days” (1), “More than half of the days” (2), “Nearly every day” (3)</i>
<i>Feeling bad about yourself or that you are a failure or have let yourself or your family down</i>	<i>“Not at all” (0), “Several days” (1), “More than half of the days” (2), “Nearly every day” (3)</i>
<i>Trouble concentrating on things, such as reading the newspaper or watching television</i>	<i>“Not at all” (0), “Several days” (1), “More than half of the days” (2), “Nearly every day” (3)</i>
<i>Moving or speaking so slowly that other people could have noticed. Or the opposite-being so fidgety or restless that you have been moving around a lot more than usual</i>	<i>“Not at all” (0), “Several days” (1), “More than half of the days” (2), “Nearly every day” (3)</i>
<i>Thoughts that you would be better off dead, or hurting yourself add columns</i>	<i>“Not at all” (0), “Several days” (1), “More than half of the days” (2), “Nearly every day” (3)</i>

The scoring for this assessment is as follows (MDCalc, 2021):

*Scoring: add up the numbers on PHQ-9 for every response based on the following: Not at all = 0; Several days = 1; More than half the days = 2; Nearly every day = 3*

*Interpretation:*

*1-4 Minimal depression; 5-9 Mild depression; 10-14 Moderate depression; 15-19 Moderately severe depression 20-27 Severe depression (MDCalc, 2021)*

Most healthcare teams will utilize the GAD-7 for assessing anxiety symptoms. Below is a sample of what the assessment looks like (Egton Medical Information Systems Limited, 2021):

<i>Over the last 2 weeks, how often have you been bothered by any of the following problems?</i>	
<i>Feeling nervous, anxious or on edge?</i>	<i>“Not at all” (0), “Several days” (1), “More than half of the days” (2), “Nearly every day” (3)</i>
<i>Not being able to stop or control worrying?</i>	<i>“Not at all” (0), “Several days” (1), “More than half of the days” (2), “Nearly every day” (3)</i>
<i>Worrying too much about different things?</i>	<i>“Not at all” (0), “Several days” (1), “More than half of the days” (2), “Nearly every day” (3)</i>
<i>Trouble relaxing?</i>	<i>“Not at all” (0), “Several days” (1), “More than half of the days” (2), “Nearly every day” (3)</i>
<i>Being so restless that it is hard to sit still?</i>	<i>“Not at all” (0), “Several days” (1), “More than half of the days” (2), “Nearly every day” (3)</i>
<i>Becoming easily annoyed or irritable?</i>	<i>“Not at all” (0), “Several days” (1), “More than half of the days” (2), “Nearly every day” (3)</i>
<i>Feeling afraid as if something awful might happen?</i>	<i>“Not at all” (0), “Several days” (1), “More than half of the days” (2), “Nearly every day” (3)</i>

The scoring for the assessment is as follows: (Egton Medical Information Systems Limited, 2021):

*The GAD-7 score is calculated by assigning scores of 0, 1, 2, and 3, to the response categories of “Not at all,” “Several days,” “More than half of the days,” and “Nearly every day” respectively, and adding together the scores for the seven questions.*

Scores of 5, 10, and 15 are taken as the cut-off points for mild, moderate and severe anxiety, respectively. When used as a screening tool, further evaluation is recommended when the score is 10 or greater.

Most healthcare teams will utilize the following Patient Stress Survey (PSS), a collection of twelve brief screening tools, for assessing stress symptoms that can lead to behavioral health issues and mental health diagnoses (University of Washington, 2017):

**Over the last 2 weeks, how often have you been bothered by the following problems? (A & B)**

<i>Little interest in doing things</i>	<i>“Zero Days,” “Several Days,” “Over Half of Days,” “Nearly Every Day”</i>
<i>Feeling down, depressed, or hopeless</i>	<i>“Zero Days,” “Several Days,” “Over Half of Days,” “Nearly Every Day”</i>
<i>Feeling nervous, anxious, or on edge</i>	<i>“Zero Days,” “Several Days,” “Over Half of Days,” “Nearly Every Day”</i>
<i>Not being able to stop or control worrying</i>	<i>“Zero Days,” “Several Days,” “Over Half of Days,” “Nearly Every Day”</i>

**In your life, have you ever had any experience that was so frightening, horrible, or upsetting that, in the past month, you: (C)**

<i>Had nightmares about it or thought about it when you did not want to?</i>	Yes or No?
<i>Tried hard not to think about it or went out of your way to avoid situations that reminded you of it?</i>	Yes or No?
<i>Were constantly on guard, watchful, or easily startled?</i>	Yes or No?
<i>Felt numb or detached from others’ activities or your surroundings?</i>	Yes or No?

**In the last 6 months: (D)**

<i>Do you usually act first and then think? (e.g., blurting things out, spending too much money, or being impatient)</i>	Yes or No?
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<i>Do you usually feel restless? (e.g., nervous, difficulty sitting still, fidgeting, a lot of exercising or being active)</i>	Yes or No?
<i>Do you usually have concentration problems? (e.g., being easily distracted, not finishing things, being easily bored, forgetful, or chaotic)</i>	Yes or No?
<i>Have you always had this? (e.g., as long as you can remember, or have you been like this most of your life)</i>	Yes or No?

***In the last year:***

<b><i>(E)</i></b> <i>Avoided social situations for fear that attention might be on you?</i>	Yes or No?
<b><i>(E)</i></b> <i>Been fearful or embarrassed being watched, being the focus of attention, or fearful of being humiliated?</i>	Yes or No?
<b><i>(F)</i></b> <i>Avoided public places from which a quick escape may be difficult, or do you endure this with clear suffering or anxiety?</i>	Yes or No?
<b><i>(G)</i></b> <i>Had recurrent thoughts, impulses, or images that are unwanted, distasteful, inappropriate, intrusive, or distressing?</i>	Yes or No?
<b><i>(H)</i></b> <i>Do you fear or avoid certain things more than most people do?</i>	Yes or No?
<b><i>(H)</i></b> <i>Are you scared of specific animals, medical issues or situations?</i>	Yes or No?
<b><i>(I)</i></b> <i>Had recurrent and unexpected panic attacks?</i>	Yes or No?
<b><i>(J)</i></b> <i>Are you a person who frequently experiences ups and downs in mood over the course of your life?</i>	Yes or No?
<b><i>(J)</i></b> <i>Do these mood swings occur without cause?</i>	Yes or No?

<i>(K) Have you ever drunk or used drugs more than you meant to?</i>	Yes or No?
<i>(K) Have you recently seriously considered harming yourself or taking your own life?</i>	Yes or No?
<i>(L) Have you felt you wanted or needed to cut down on your drinking or drug use?</i>	Yes or No?

(University of Washington, 2017)

The scoring for the PSS tool matches section/letter answers to specific brief screening tools and makes suggestions for further assessments (University of Washington, 2017).

**A. Depression**

*The PHQ-2 is an ultrabrief screening tool that provides a preliminary diagnosis of depression. It is comprised of the first 2 items of the nationally recognized PHQ-9. Those scoring 3 or above should be further evaluated with the PHQ-9.*

**B. Anxiety**

*The GAD-2 is an ultrabrief screening tool that provides a preliminary diagnosis of anxiety. It is comprised of the first 2 items of the nationally recognized GAD-7. Those scoring 3 or above should be further evaluated with the GAD-7.*

**C. Post Traumatic Stress Disorder (PTSD)**

*The Primary Care PTSD Screen (PC-PTSD) is a 4-item ultrabrief screening tool that provides a preliminary diagnosis of post traumatic stress disorder. Those who answer “yes” to 3 or more questions should be further evaluated with the PTSD CheckList – Civilian Version (PCL-C).*

**D. Attention Deficit or Hyperactivity Disorder (Adult)**

*The Adult ADHD Mini Screen is a 4-item ultrabrief screening tool to identify a preliminary diagnosis of ADHD. Those who answer “yes” to 3 or more questions should be further evaluated with the Adult ADHD Self-Report Scale ASRS-v1.1).*

**E. Social Anxiety**

*This 2-item ultrabrief screening tool provides a preliminary diagnosis of social anxiety. If one reports “yes” on one or more items, the individual should be further evaluated with the Social Interaction Anxiety Scale.*

#### **F. Agoraphobia**

*This item is an ultrabrief screening tool that provides a preliminary diagnosis of agoraphobia. If one reports “yes” on this single item, the individual should be further evaluated with the Ost Agoraphobia Scale.*

#### **G. Obsessive-Compulsive Disorder (OCD)**

*This item is an ultrabrief screening tool that provides a preliminary diagnosis of OCD. If one reports “yes” on this single item, the individual should be further evaluated with the Obsessive-Compulsive Inventory – Revised (OCI-R).*

#### **H. Specific Phobia**

*This 2-item ultrabrief screening tool provides a preliminary diagnosis of a specific phobia. If one reports “yes” on one or more items, the individual should be further evaluated with the APA Severity Measure for Specific Phobia – Adult.*

#### **I. Panic Disorder**

*This item is an ultrabrief screening tool that provides a preliminary diagnosis of Panic Disorder. If one reports “yes” on this single item, the individual should be further evaluated with the Panic Disorder Severity Scale – Self-Report Form.*

#### **J. Bipolar Disorder**

*This 2-item ultrabrief screening tool provides a preliminary diagnosis of a bipolar disorder. If one reports “yes” on one or more items, the individual should be further evaluated with the Mood Disorder Questionnaire MDQ.*

#### **K. Alcohol and/or Drug Problem**

*This 2-item TICS scale is an ultrabrief screening tool that provides a preliminary diagnosis of a substance use disorder. If one reports “yes” on either of the two items, the individual should be further evaluated with the DAST-10 for drugs and/or the Audit for alcohol.*

#### **L. Suicidal Danger**

*This item is an ultrabrief screening tool that provides a preliminary indication of suicidal danger. If one reports “yes” on this item, this response should lead to immediate clinical follow-up with the Columbia Suicide Severity Rating Scale.*

The following is a helpful self-administered stress test that workplace environments might offer for individuals to assess their stress levels and determine on their own if additional help might be beneficial (Mental Health America Inc, 2021):

<p>Do you find yourself eating emotionally? Eating unhealthy foods or eating when you're not hungry, as a response to stress or difficult feelings?</p>	<p>-No, I eat a healthy diet, and only eat when hungry.</p> <p>-I admit I've binged on the occasional Haagen Dazs, but it's not a regular occurrence.</p> <p>-Yes, I have to admit that my diet is pretty unhealthy.</p>
<p>Do you find yourself sweating excessively when you're not exercising?</p>	<p>-No.</p> <p>-Sometimes, when I'm particularly stressed, but not often.</p> <p>-Yes, it happens fairly regularly.</p>
<p>Do you ever have trouble sleeping?</p>	<p>-Rarely or never.</p> <p>-Sometimes I'll have trouble falling asleep, staying asleep, or getting quality sleep.</p> <p>-Yes, I pretty often have trouble with sleep quality, or with falling and staying asleep.</p>



<p>Are you experiencing any digestive problems, such as indigestion, Irritable Bowel Syndrome ulcers?</p>	<p>-No.</p> <p>-I get the occasional stress-related stomach ache, but nothing too regular.</p> <p>-Yes, I'm experiencing pretty regular digestive problems.</p>
<p>Are you suffering from burnout, anxiety disorders or depression?</p>	<p>-No.</p> <p>-I don't know.</p> <p>-Yes.</p>
<p>Are you taking care of yourself?</p>	<p>-Yes, I take good care of my body and soul.</p> <p>-I don't have as much time for self care as I'd like, but I'm doing okay.</p> <p>-No, I rarely take care of myself.</p>
<p>Do you have a supportive social network, and take time for relationships in your life?</p>	<p>-Yes. My friends and family help a lot with stress.</p> <p>-Somewhat. I have a few close relationships and can talk to people if something's really bothering me, but don't have as much time for relationships as I'd like.</p> <p>-No, I have few close friends or supportive family ties, or I don't have time to devote to the people I could be close with.</p>

<p>Are you getting regular exercise?</p>	<p>-Yes. I lead an active lifestyle and exercise at least three times per week.</p> <p>-Sort of. I get some exercise throughout the day, or I go to the gym a couple times a week.</p> <p>-No. I live a sedentary lifestyle and don't go to the gym regularly.</p>
<p>Do you find yourself smoking and/or drinking to excess as a way to deal with stress?</p>	<p>-No.</p> <p>-I do one of those things, but it's not a big problem for me.</p> <p>- Yes, and to be honest, I know it can't be good for me.</p>
<p>Do you often find yourself with tension headaches?</p>	<p>- No. I've had them before, but not often.</p> <p>-Sort of. I get them once a month or so.</p> <p>-Yes, I struggle with them regularly.</p>
<p>Are you having trouble maintaining a healthy weight? Or, are you carrying excessive abdominal fat?</p>	<p>-No, I'm within 10 pounds of my 'ideal' weight.</p> <p>-To a degree. I struggle with diet like many people, but it's not too much of a problem.</p> <p>-Yes: I've put on much more weight than I'm comfortable with / I can't keep weight on / My problem area is my abdomen.</p>

<p>Are you easily irritated lately?</p>	<p>-No, I'm pretty even-tempered. It takes quite a bit to get me flustered.</p> <p>-Somewhat. I find I have less patience than I'd like, but it's not a problem in my life.</p> <p>-Yes. I find myself snapping at people out of frustration, or having a low threshold for dealing with annoyances.</p>
<p>How often have you missed work in the last year due to actual illness?</p>	<p>-Maybe once.</p> <p>-Two to three times.</p> <p>-Four times or more</p>
<p>Do you often feel fatigued at the end of a day?</p>	<p>-Not too much. I'm ready for sleep at night, but I do have energy in the evenings.</p> <p>-Somewhat. I come home and need to rest for a while before I can do activities in the evenings.</p> <p>- Yes. In fact, I'm often fatigued by the MIDDLE of the day.</p>
<p>Do you have a feeling that stress may be affecting your health?</p>	<p>-Not really. I'm just taking this test for fun.</p> <p>-Possibly. I'm not sure, but I wouldn't be shocked if it were true.</p> <p>-Yes. In fact, I'd be surprised if stress WEREN'T affecting my health.</p>

This screening tool can be found online on the Mental Health America Inc. website and will offer individuals insight into their stress levels and what supports might be available. This is particularly helpful if they do not feel comfortable meeting with professionals or Employee Assistance Program representatives.

## **Referrals**

Based on their screening outcomes with patients, healthcare professionals might refer to the following services (Centers for Disease Control and Prevention, 2019):

1. Mental health counseling
2. Psychiatry (inpatient or outpatient services)
3. Health coaching/life coaching
4. Occupational Therapy/Physical Therapy (poor physical health often impacts mental health)
5. Nutrition services (poor food intake and health often impacts mental health)
6. Crisis services such as the emergency department for suicide risk

## **Public health workers**

Individuals and researchers who work in public health also hold a vital role in promoting workplace health and mental health. Because they interact with recent data and large pieces of quantitative and qualitative information, these individuals often have the most up-to-date information on community-wide health. Public health researchers and employees can do the following to ensure workplace mental health needs are being addressed (Centers for Disease Control and Prevention, 2019):

1. Identify guidelines for designing and implementing workplace behavioral health programs, and evaluate how effective such programs are for reducing stress and mental health issues
2. Develop tools that employers and organizations can use to assess workplace environments and how conducive they are for overall well-being
3. Teach organizations to identify areas for intervention and provide training and tools for how to implement those interventions

4. Develop programs that recognize and reward employers who are implementing evidence-based programs successfully to promote mental health and wellbeing
5. Identify and offer training programs that support businesses and teach them how to build positive, healthy environments that promote health - if none are available then they can develop them

## **Community leaders and businesses**

Pillars in the community, whether individuals and/or businesses have a similar responsibility for promoting mental health in the workplace. These individuals can support workplace mental health through the following (Centers for Disease Control and Prevention, 2019):

1. Identify stress management programs through local schools, community centers, recreation agencies, public health departments, and other areas and ensure that individuals know how to enroll/access/attend
2. Support programs in the community that reduce risk by ensuring that housing is affordable, food is accessible to all, there are safe opportunities for exercise and play, there are tools for managing and promoting financial health, and there are programs to reduce substance use/domestic violence/other forms of violence - when these kinds of risk factors are present it is difficult for individuals to be healthy at work regardless of how many services their employers offer
3. Develop systems that employees and other professionals can use for self-referring to community programs that will support their mental health and stress

## **Local and federal government**

Governmental agencies bear a significant portion of the responsibility for workplace mental health because they determine the allocation of funding and eligibility for programs that can support employee well-being. Local and federal governments can support mental health in the workplace by doing the following (Centers for Disease Control and Prevention, 2019):

1. Providing kits, tools, and materials for businesses and employers that teach about mental health, stress, and how to identify mental health struggles
2. Provide courses, training, guides, and other tools to help employers and employees manage their mental health and wellness

3. Collect micro and macro-level data about the health of communities
4. Identify preventative factors and programs to implement that support public health and mental health
5. Provide ongoing education and initiatives related to health and health outcomes
6. Intentionally seek and support underserved and marginalized communities and provide resources, case management, and other services for improving overall health

## **How employees can support their mental health**

Organizations and community members/teams have responsibilities to support the mental health of workplaces, but employees also have the responsibility of identifying and treating their own needs when possible. This often takes a considerable amount of self-advocacy that makes doing so seem daunting, which is why macro-level interventions are also essential. This does not mean, however, that the employees are free from responsibility.

Employees can promote workplace mental health by doing the following (Centers for Disease Control and Prevention, 2019):

1. Encouraging employers to offer mental health and stress programs and education at work if they are not in place
2. Participate in programs developed by organizations and provide feedback for how to improve those programs and/or validate what is going well in those programs to ensure those components stay
3. Participate in teams for health and wellness and attend training sessions that are offered in the workplace. For example, financial planning, unacceptable vs. acceptable behaviors, and others
4. Share personal experiences where stigma is related to reduce stigma
5. Be open-minded and optimistic about the future of the workplace mental health environment
6. Be empathetic, supportive of peers, and encouraging of others in seeking their help and support
7. Adopt behaviors that promote health and stress management

8. Eat well, sleep and exercise regularly, and drink plenty of water
9. Attend activities for health and relaxation
10. Promote in-face contact in addition to virtual or electronic contact
11. Identify moments of gratitude and reflect on the positive experiences
12. Identify individual and team goals related to health and develop plans for how to achieve them

An activity that individuals and their managers can do together to promote self-care and employee responsibility in health is the Assets vs. Challenges vs. Goals activity (Mental Health Foundation, 2021). In this activity, the employee is to identify two self-care tasks they do well at work, two they struggle to do at all, and two goals that they have for the upcoming weeks/months. The list they choose from is as follows (Mental Health Foundation, 2021):

1. Talking about feelings (with peers and supervisors as needed and regularly during meetings and training when prompted)
2. Staying active (lunch or break walks, attending workplace activities, etc.)
3. Eating well and drinking water (regular mealtimes at work is important)
4. Drinking sensibly (avoiding alcohol at home as much as possible and being careful with it at work functions)
5. Maintaining connection (positive work relationships can be incredibly important for mental health)
6. Asking for support as needed (whether this is with a peer, manager, or EAP program, it is important to ask for help)
7. Take breaks as needed (taking paid breaks and being willing to walk away from tasks when needed to return feeling better and more prepared)
8. Engage in activities that the individual is good at (doing things that are consistent with an individual's strengths will help them to be confident and feel successful as well as reduce stress)

9. Practice acceptance of self (individuals who can accept who they are and have strong self-confidence are less likely to be triggered by work anxieties and will be more able to find pride in their work)
10. Practice caring for others (when individuals care for others at work they feel they are contributing, are a part of a community, and feel valued)

## **Summary**

Ensuring that mental health at work is strong and environments are positive will require cross-system work with many different professionals and individuals. Employers, community members, employees, government teams, healthcare professionals, and other people must all interact and support the development and implementation of programs to promote health. This requires addressing problem areas and needs, developing programs, and assuring that there are effective ways to assess how well those programs are working. There is not one single player or team responsible for the health of workplaces, but rather all parties are responsible and should communicate about the best way to enhance well-being.

## **Section 6: How employees are protected**

### **Introduction**

Historically, many employees have been afraid to ask for support at work, even when they really need it, and they dread the thought of having to take time off from work for mental health treatment. Most people would not be comfortable taking a leave of absence for inpatient mental health treatment or even to take a respite break at home. The thought of this is embarrassing and often terrifying because of the stigma associated with mental illness or the fear of repercussions. It is important to understand, though, that there are protections in place for individuals if they need to be absent from work to address mental health issues.

### **The Americans with Disabilities Act (ADA)**

Under the Americans with Disabilities Act, a disability is defined as “a physical or mental impairment that substantially limits one or more major life activities” (Americans with Disabilities Act National Network, 2021). When employees have a mental health condition that meets these criteria, they are eligible for protection in the workplace under the act. The act also prohibits discrimination at work against those who have a



history of having a psychiatric disability. Examples of this include anxiety, depression, schizophrenia, and other psychiatric disorders. Under the ADA, individuals have the right to accommodations that support their ability to function, flexible hours, guidance about feedback and job performance, leaves of absence as needed, and supervision accommodations (Americans with Disabilities Act National Network, 2021).

Both employers and employees must understand these protections to ensure that they are in compliance and that individuals are given access to their rightly owed support, protection, and services.

## **The role of Human Resources (HR) and the Americans with Disabilities Act**

Employees who are struggling at work with identifying the supports needed to perform and maintain health can rely on their human resources staff to provide some guidance and support. Human resource professionals are knowledgeable about mental health impairments that impact employees and applicants in the workforce (SHRM, 2021). These staff members know about laws, rules, and managing people with mental health disabilities and they can be used as a resource for employers and employees alike (SHRM, 2021). For example, managers struggling to support their employees with a mental illness can ask HR for resources/tools that can be helpful.

The following are examples of accommodations that HR teams might recommend (SHRM, 2021):

1. Telecommuting, part-time hours, job-sharing, or making up missed work at a later time
2. Sick leave for mental health and flexible use of vacation time
3. Breaks according to needs rather than a fixed schedule and more frequent breaks
4. Permitting food and water at workstations
5. Removing distractions from the environment
6. Adding workplace barriers/dividers
7. Offering a private workstation
8. Increasing the natural lighting
9. Providing music

10. Recording tools for meetings and training
11. Remote job coaching
12. Software
13. Removal of nonessential job tasks
14. Division of large tasks into smaller tasks
15. Implementing a more flexible supervision style with positive reinforcement and feedback
16. Additional forms of communication as needed
17. Regularly scheduled meetings
18. Plan for coping ahead of time when new policy/procedure is implemented
19. Education about the disorder
20. Relevant training as needed (SHRM, 2021)
21. Changing work hours to better support the potential side effects of medication (Mental Health Foundation, 2021)
22. Excusing someone from work for the day as needed (Mental Health Foundation, 2021)

When individuals do have to take time off of work for their mental health, it must be well handled by their teams, managers, and peers. The following will need to be addressed for the best and most appropriate transitions (Mental Health Foundation, 2021):

1. Planning with the employee what their peers and colleagues will be told in their absence
2. Planning with the employee what kind of return to work they will have. For example, some individuals find a phased return to be helpful
3. Planning with human resources how to support the individual
4. Inviting the person who is on an absence out to informal gatherings outside of work when appropriate

5. Sending the individual cards and calling just as you would with any other physical health issue
6. Giving the person a call a few days before the return to work to identify if there is anything needed for a safe and predictable return
7. Greet the individual when returning to work
8. Help the individual adjust back into work routines and schedules as needed

## **Addressing discrimination**

If there is discrimination in the workforce as related to mental health disorders, it must be immediately addressed. The following should be implemented in all workplaces for the wellbeing of staff (Mental Health Foundation, 2021):

1. Promote a culture where discrimination is viewed as unacceptable
2. Encourage staff members to report any discrimination they see
3. Provide a clear process for employees to navigate through, with support, when they are being discriminated against - it is important that individuals feel supported during this process as they may be experiencing anxiety and fear
4. Support local and national anti-stigma initiatives such as Mental Health Awareness Week and Time to Change

## **Summary**

Americans with mental health disabilities/psychiatric conditions should be protected from unfair treatment under the Americans with Disabilities Act. It is important that they know their rights and that employers understand their responsibilities where supporting staff members with mental illnesses are concerned. The human resource department at any place of business should be able to offer this information and guidance as needed.

## **Section 7: What have specific workplaces done to be successful in promoting positive mental health?**

### **Introduction**

Every organization will be different in how it addresses mental health. The workplaces that have been the most successful in their efforts to focus on mental health struggles with their staff have done a variety of things to ensure that the culture they create is an inclusive and supportive one.

## Examples of success in the workplace

The following organizations have been successful in implementing wellness and mental health programs (Cingras, 2020):

1. **Bell** - this telecommunications company implemented a Let's Talk Day where they have created initiatives and donated money related to improving dialogue about mental health. They offer 24/7 help and digital resources to their employees
2. **Influence & Co** - this content marketing agency wrote an entire policy on mental health to reflect what they were seeing in the workplace, which was that their employees were struggling. They consulted with mental health professionals and delivered training for staff and managers to get familiar with the new policy
3. **Unilever** - this organization developed an entire app for their staff to utilize that provides health information and crisis supports for employees to utilize whenever they need it
4. **Microsoft** - at Microsoft, managers started sharing their struggles and stories with mental health issues to help create a culture of mental wellness and inclusivity. This was a conscious act of normalizing and reducing stigma. At Microsoft staff have access to in-person and digital counseling as well as support groups and workshops. There is also food and water available throughout the office positioned for staff to access as needed/desired
5. **Johnson & Johnson** - this organization also developed an app for wellness for their staff and their family members. Built into the app are mindfulness activities and behavioral interventions for stress reduction and management

## Summary

Successful organizations have many of, if not all of, the following: Employee Assistance Programs, robust online content with 24/7 access, groups for wellness, classes, training, and workshop opportunities, flexible hours and supervision, clear communication strategies, crisis support, counselors available, and a strong investment in employee

health. The organizations listed are only a few of the many examples of employers seeking to do well by their employees where health and stress reduction are concerned.

## Section 8: Case studies

### Travis

Travis is a 34-year-old man with an Information Technology degree who started working at a start-up company several years ago. He has grown with the company and is now in an upper management position that requires him to be on-call for technology-related issues within the app that his company owns and manages. He is also a recent first-time father with a six-month-old newborn at home. His wife is becoming increasingly frustrated with his phone ringing in the middle of the night to “put out fires” as she calls it because they are already being awoken by a crying baby. She states she “can’t take it anymore.” Travis also reports that being on-call 24/7 is taking a significant toll on his mental health and marriage. Travis is feeling anxious about his phone ringing and potentially prompting a fight with his wife. Additionally, he is constantly on edge and is struggling due to a lack of sleep.

Travis has recently chosen to discuss this with his manager. He asks to schedule a meeting and when he attends the meeting he states, “I am feeling a lot of stress and therefore pressure at home because of being on call 24/7. This stress is making me wonder if I can sustain my position long-term and that’s making me very anxious. Is it possible that we can try to find another way to manage the on-call nature of this position because I am very invested in it?” Travis’s manager validates his worries and anxieties and over the next few months, they work together to develop an on-call schedule with other managers who will be trained to assist with this responsibility. Travis will go from constantly being on-call to only being on call one to two days per week.

Upon finding a solution, Travis’ anxieties instantly lessen and his relationship with his wife greatly improves. He and his wife also decided that on the 1-2 days per week he is on-call he will sleep in the guest room to prevent her from being woken up. Travis’s case illustrates how stress at work can be very debilitating even when there is no underlying mental health disorder. Upon the removal of the environmental factor, Travis’ health returns to baseline.

### Kalis

Kalis is a 47-year-old registered nurse who works in an Emergency Room (ER) in a small town. She has been working in this Emergency Room for over 20 years, which is the only ER in town, and she reports feeling completely exhausted by work. Every day she dreads going to work and feels as if the frustrations of nursing will never end. Despite the ability to transfer to other departments, Kalis stays in the emergency room because she can make the most money and she was recently divorced and is saving up to purchase a home of her own. She is currently renting a home with her teenage children.

Kalis has always struggled with anxiety, but she was recently diagnosed with depression. Her therapist feels that her symptoms are likely changing in response to the divorce and the sustained dissatisfaction at work. Kalis is beginning to feel suicidal, and although she is not planning for suicide, she thinks of it daily. Together Kalis and her therapist work toward her speaking with her supervisor about taking an extended break for her mental health. During this time Kalis will attend an intensive outpatient program for three weeks for her depression. Although Kalis is nervous to do so, she realizes that advocating for herself is a step she must take.

Upon meeting with her supervisor, Kalis was validated in her struggles, and her supervisor states “I have felt as though you have been struggling, and if this is what you feel needs to happen for your mental health we support you fully.”

After Kalis completed the intensive outpatient program and was considering returning to work, she decided that going back to the emergency room would not be good for her health and she would rather accept less money working in a slower-paced environment that would allow her to manage her anxiety and depression better. Kalis follows through with this and quickly finds herself a position in the post-surgical unit, which she reports is much slower than the ER and a “nice change of pace.” Kalis’s case study is a good example of how stressful work environments can exacerbate mental health symptoms and disorders. Her employer was very supportive of the steps she needed to take for her mental health, which was essential in her recovery from very intense symptoms.

## **Karla**

Karla is a 28-year-old mother of two who recently re-entered the workforce after several years of staying home with her babies. She works in finance and returned to the company where she had previously worked for several years. Upon returning to work she quickly realizes that she does not know anyone who is on her team any longer. Many of her friends and peers that she enjoyed have moved up or on. Karla begins to feel isolated at work. She feels left out and worried that nobody will like her and accept her

because she is the only mom on her team. She feels as though it is hard to relate to others.

Karla also notices that when she returns to work the workload is much higher than it once was and she was not expecting this. Karla's supervisor is quite fast-paced and has high expectations of her team. Karla quickly finds herself feeling as though she cannot keep up and is not being productive enough to maintain her position. That stress and fear build over time and she is afraid to address it. Eventually, she has a panic attack at work. She bursts into tears and begins to hyperventilate.

Karla's peer comes into her cubicle and asks if he can speak to her privately in an empty office. He is friendly and seems compassionate so Karla feels comfortable with him. Her peer asks her to count backward from ten to zero and then forward from zero to ten. After a few rounds of this, her breathing returns to normal and although Karla feels physically better, she begins to feel embarrassed. Her peer says to her, "Don't worry, I get them too. It's scary at the moment but afterward you remember that having anxiety is mostly just a normal part of living." Karla felt so validated by her peer that she asked him how he learned to do that.

Karla's peer explained that not only has he had anxiety for many years and that panic attacks have been common for him, but he attended a Mental Health First Aid at Work training last year and it has helped him feel empowered to support peers when they are struggling. Karla asked him more about the training and she was given more details. Once she returned to baseline and went back to work, Karla decided to ask her supervisor if there would be an opportunity for her to attend training like that. Karla's supervisor reminded her that he wants to support her and everyone else the best that he can and to please talk to him whenever she needs him. He helped her find training available at work on self-care and Mental Health First Aid. After several months Karla begins to feel more comfortable at work and with her team. She realizes that a lot of her feelings were related to worry and anxiety. She asked her supervisor to help her write a plan for how to complete the tasks she is responsible for and he did this quickly and efficiently with her.

Karla's case illustrates the importance of making mental health resources and other assistance available, and how such support is beneficial for the individual and the team.

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