



The Mental Health Crisis

Reducing the Stigma of
Mental Health

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Why addressing behavioral health in the workplace matters



19.1%

(48 million) of American adults experienced anxiety disorders in 2019²

18.5% of the adults

suffers from a depressive illness in a given year⁴

Mental Capital

is more valuable and more vulnerable to the effects of depression in today's service and knowledge-driven societies⁶



The incremental economic burden of adults with major depressive disorder was \$326 billion in 2018, 38% higher than in 2010.¹

1 in 5

Americans have mental health conditions in 2019 (51.5 million Americans)³

9.5 Million

co-occurring substance abuse disorder⁵

50% of employees,

when asked about days they were unable to perform their tasks, said it was due to mental health⁷

¹Major Depressive Disorders Have an Enormous Economic Impact." Scientific American, May 5, 2021. <https://www.scientificamerican.com/article/major-depressive-disorders-have-an-enormous-economic-impact/>

² U.S. Substance Abuse and Mental Health Services Administration, 2019 Results from the National Survey on Drug Use and Health <https://www.samhsa.gov/data/sites/default/files/reports/rpt29393/2019NSDUHFFRPDFWHTML/2019NSDUHFFR1PDFW090120.pdf>

³ U.S. Substance Abuse and Mental Health Services Administration, 2019 Results from the National Survey on Drug Use and Health

⁴Centers for Disease Control and Prevention, "Symptoms of Depression Among Adults: United States, 2019." NCHS Data Brief No. 379, September 2020. <https://www.cdc.gov/nchs/products/databriefs/db379.htm>

⁵ U.S. Substance Abuse and Mental Health Services Administration, 2019 Results from the National Survey on Drug Use and Health

⁶ Cuijpers, P. Beekman, A.T.F., & Reynolds, C.F. (2012). Preventing Depression: A global priority. Journal of the American Medical Association, 307(10), 1033-1034. Compensation

⁷ 10 ways to reduce the threat of 'presenteeism'. (2013). HR Specialist: & Benefits, 8(1), 1-2.

Coronavirus (COVID-19) impacts



Depression symptom prevalence was more than threefold higher during the COVID-19 pandemic than before - from 8.5% before COVID-19 to 27.8% during COVID-19.

Lower income, having less than \$5,000 in savings, and having exposure to more stressors were associated with greater risk of depression symptoms during COVID-19.

The high burden of depression symptoms in the U.S. associated with the COVID-19 pandemic falls disproportionately on individuals who are already at increased risk of depression.



Rise of mental health concerns since the onset of COVID-19

- 50% of American adults self-reported symptoms of anxiety and depression vs. 14% pre-pandemic¹
- 13% of adults reported new and increased substance use due to COVID-related stress²
- 11% report thoughts of suicide in the past 30 days²
- Drug overdose deaths highest at the onset of COVID²
- Others report difficulty sleeping (36%), eating (32%), and worsening of chronic conditions (12%)²
- 20% of people surveyed in the U.S. had lost a relative or close friend to COVID which could lead to a potential bereaved population of about 65 million³

Source: 1 <https://cnsmaryland.org/2021/09/23/pandemic-stressing-americans-mental-health-data-suggests/> 2 "The Implications of COVID-19 for Mental Health and Substance Use based on of the Census Bureau's Household Pulse Survey 2020-2021." KFF, February 10, 2021. <https://www.kff.org/coronavirus-covid-19/issue-brief/the-implications-of-covid-19-for-mental-health-and-substance-use/> 3 "COVID Has Put the World at Risk of Prolonged Grief Disorder." Scientific American, May 19, 2021 <https://www.scientificamerican.com/article/covid-has-put-the-world-at-risk-of-prolonged-grief-disorder/> (Retrieved 7/8/21)



Mental health risks of social distancing, isolation, and quarantine

- Fear and anxiety
- Boredom, loneliness, sadness
- Anger, frustration, or irritability
 - Loss of control can lead to anger with those imposing restrictions
- Stigma – those exposed or sick may feel stigma given the public outcry

Putting our Mental Health at Risk

- Surge Capacity Depletion
- Ambiguous Grief
- Burn-Out



Mental health stigma



- Stigma continues to exist
- Stigma can be a deterrent to seeking care for up to **54% -74%** of people, one study found¹
- Johns Hopkins Stigma Lab found **59%** of over **1,500** respondents were in favor of mental health parity, but those without personal experience were associated with more stigma and less support²
- Johns Hopkins Stigma Lab surveyed **314** people on their views of mental illness; **38%** responded with an unwillingness to work closely with someone with mental illness, and **59%** were unwilling to have someone with a mental illness marry into their family³

1. Clement et al., "What is the impact of mental health-related stigma on help-seeking? A systematic review of quantitative and qualitative studies." *Psychological Medicine*, Jan 2015. 2. Barry CL, McGinty EE. (2014). "Stigma and Public Support for parity and government spending on mental health: a 2013 national opinion survey." *Psychiatric Services* 65(10) 1265-1268. 3. Barry CL, McGinty EE, Goldman HH (2014). "Stigma, Discrimination, treatment effectiveness, and policy: Public views about drug addiction and mental illness." *Psychiatric Services*, 65(10), 1270-1272.

Encouraging Conversations with Employees



Questions to Ask

- How are you doing at the moment?
- You seem to be a bit down/upset/ /frustrated/angry. Is everything okay?
- I've noticed you've been arriving late recently and I wondered if you're okay.
- I've noticed the reports are late when they usually are not. Is everything okay?
- Is there anything I can do to help?
- What would you like to happen? How?
- What support do you think might help?
- Have you spoken to your primary care physician or looked for help anywhere else?

Questions to Avoid

- You're clearly struggling. What's up?
- Why can't you just get your act together?
- What do you expect me to do about it?
- Your performance is really unacceptable right now – what's going on?
- Everyone else is in the same boat and they're okay. Why aren't you?
- Who do you expect to pick up all the work that you can't manage?

Self-care tips to share with employees



1. Reach out to your employer
2. Maintain your work rhythm
3. Take a deep breath
4. Take care of your health
5. Be aware of information overload (T.V., News, Social Media)
6. Turn on music
7. Maintain connections with family and friends
8. Get outside
9. Recognize your anxiety is normal
10. Stay connected

The American Psychological Association (APA)

APA IDENTIFIED FIVE ELEMENTS OF PSYCHOLOGICALLY HEALTHY WORKPLACES (2014):



- 1. Employee Involvement**
- 2. Work–life Balance**
- 3. Employee Growth and Development**
- 4. Health and Safety**
- 5. Employee Recognition**

How have the mentally healthy workplace elements evolved during COVID?

Source: American Psychological Association Center for Organizational Excellence, "Creating a Psychologically Healthy Workplace."
<https://www.apaexcellence.org/resources/creatingahealthyworkplace/>

What are the benefits to the organization of a psychologically healthy workplace?¹



- Improved quality
- Performance and productivity
- Reduced absenteeism, presenteeism, and turnover
- Increased employee engagement
- Fewer accidents and injuries
- Improved ability to attract and retain quality employees
- Improved customer service and satisfaction
- Lower health care costs

Mental Health America Workplace Health Survey respondents reported high rates of absenteeism (33 percent). But organizations that have responded to high turnover rates with employee engagement strategies have shown significantly reduced absenteeism (37 percent)²

According to GCC Insights (2016), presenteeism accounts for a loss of 57.5 days a year, a loss of 25% of maximum productivity level. However, employees who received high quality depression care management over two years realized a 91% improvement in presenteeism.³

¹ Matthew J. Grawitch, PhD, and David W. Ballard, PsyD, MBA (editors), "The Psychologically Healthy Workplace: Building a Win-Win Environment for Organizations and Employees," American Psychological Association, 2016.

² Cameron, Emma Seppala Kim. "Proof That Positive Work Cultures Are More Productive." Harvard Business Review., 08 May 2017. Web. 02 June 2017. ³ "Open Minds", Dori Meinert, HR magazine, October 2014, p.30.



Into the future

What should we do?

- Understand stigma in our workplaces and take steps to alleviate it
- Promote transparency and openness in discussions of mental health concerns
- Encourage symptom management through early recognition
- Support employees when they seek assistance
- Encourage employees to reach out to the EAP for support
- Share personal stories
- Promote mental health parity
- Work with HR and/or EAP to submit a referral if necessary
- Implement health and productivity policies and programs to support stay-at-work and return-to-work
- Get creative with access to care



People are less impaired at work if they have **positive expectations** and knowledge about the effectiveness of **treatment**.

Additional references



- Beauregard, T.A., Ozbilgin, M. & Bell, M. P. (2009). Revisiting the social construction of family in the context of work. *Journal of Managerial Psychology*, 24(1), 46-65.
- Bureau of Labor Statistics (February 1, 2012). "Median age of the labor force, by sex, race and ethnicity".
- Centers for Disease Control (2014). The Cost of Obesity. <http://www.cdc.gov/obesity/data/adult.html>.
- Choi, S.D. (2009). Safety and ergonomic considerations for an aging workforce in the US construction industry. *Work*, 33, 307-315.
- Corbiere, M., Negrini, A, and Dewa, C.S. (2013). Mental health problems and mental disorders: Linked determinant to work participation and work functioning. *Handbook of Work Disability*, 267-288.
- Fried, V.M., Bernstein, A.B., Bush, M. (2012). Multiple chronic conditions among adults aged 45 and over: Trends over the past 10 years. *NCHS Data Brief* (100).
- Golden, M. (2013). 7 ways generation X'ers differ from baby boomers. <http://top7business.com/?Top-7-Ways-Generation-Xers-Differ-From-Boomers&id=1860>.
- Gonyea, J. (2008). America's aging workforce: A critical business issue. Boston University School of Social Work.
- Hawley, C. E., Diaz, S., & Reid, C. (2009). Healthcare employees' progression through disability benefits. *Work*, 34, 53-66.
- Harnois, G., & Gabriel, P. (2000). Mental health and work: Impact, issues and good practices. Retrieved from http://www.who.int/mental_health/media/en/712.pdf.
- Kazdin, A.E. & Rabbitt, S.M. (2013). Novel models for delivering mental health services and reducing burdens of mental illness. *Clinical Psychological Science*, 1(2), 170-191.
- Klonsky, D.E, Saffer, B.Y., and Bryan, C.J., "Ideation-to-action theories of suicide: a conceptual and empirical update," *Current Opinion in Psychology*, 22: 38-43, 2018.
- McVicar, D. (2008). Why have UK disability benefit rolls grown so much? *Journal of Economic Surveys*, 22(1), 114-139.
- Mitchell, K. (2006). Productive Aging: The new life stage. *World at Work*, 62-72.
- Sommers, D. & Franklin, J.C. (2012). Employment outlook : 2010-2020: Overview of Projections to 2020. *Monthly Labor Review*, Bureau of Labor Statistics, 1-20.
- Ward B.W., Schiller J.S., Goodman R.A. Multiple chronic conditions among US adults: a 2012 update. *Prev Chronic Dis*. 2014;11:130389. DOI: <http://dx.doi.org/10.5888/pcd11.130389>.



Questions?

For more information on *The Mental Health Crisis – Strategies for the Workplace*, email kristin.tugman@prudential.com.



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