BUILDING A CARING CULTURE
Addressing Mental Health In The Workplace
Before, during, and after the pandemic, workers and workplaces have faced increasing stresses and pressures that threaten the wellbeing of the workforce. Mental health has been called an invisible crisis. This invisible crisis has included existing mental health conditions, chronic pain, fatigue, and substance misuse including rising rates of overdose, post-traumatic stress, and suicide risk.

Companies who are looking to incorporate mental health and wellbeing into company culture, programs, and practices will benefit from this whitepaper as workplace mental health experts, Cal Beyer, Leia Spoor, and Lisa K. Desai, Psy.D., dive into great detail to help leaders and organizations better understand all facets of mental health and workplace safety.

This whitepaper includes information on why mental health is important, how to address mental health in return to workplace strategies, understanding the whole health view, the difference between behavioral vs. mental health, psychological safety and resilience, mental health myths and realities, and comorbidities of depression. Also included are applied case studies of companies in Mechanical/HVAC construction, Technology, a General Contractor with some self-performed operations, and Warehousing/Distribution of Medical Supplies who have addressed mental health and wellbeing.

**Hallmarks of Caring Workplace Cultures to Promote Mental Health and Wellbeing**

- **Understanding that a “whole worker” shows up at the workplace or jobsite each day. Workers bring with them stresses, pressures, and distractions from their personal lives.**
- **Foster a workplace culture with empathy, psychological safety, and trust as core elements.**
- **Acceptance, respect, and inclusion where all employees are affirmed for who they are and the unique skills they bring to the organization.**
- **Train leaders and supervisors to provide support in both words and actions to demonstrate care, concern, and empathy and to be able to share appropriate resources to help employees navigate work/life balance issues and personal challenges.**
What does a return to work really mean?

Whether returning in a remote or hybrid fashion, the key question leaders will need to answer is: What does a return to work really mean? Leaders can most effectively address this question by being prepared to manage the expectations of individuals and teams. For example, it is important that leaders remain aware of the top stressors Americans faced during the last year. In the most recent McKinsey Lean-In report, workers were asked to select their five biggest challenges during the pandemic from a list of 12 options. The top five choices were:

1. Anxiety
2. Burnout
3. Mental Health
4. Childcare and Homeschooling Responsibilities
5. Physical and Mental Health of Loved Ones

WHY MENTAL HEALTH IS A WORKPLACE SAFETY, HEALTH, AND WELLNESS IMPERATIVE

The pandemic has surfaced mental health issues in the general population and has highlighted the significant impact on the workforce. While COVID-19 and national unrest have brought mental health struggles into the spotlight, the reality is mental health impacted employers and employees before these crises. The American Heart Association CEO Roundtable Report surveyed thousands of employees and found that 76 percent reported that they struggled with at least one issue affecting their mental health. In the same survey, 42 percent of employees answered yes when asked if they had ever been diagnosed with a mental health disorder.

Again, these survey results are pre-COVID-19. Numerous studies have captured the spike in anxiety, depression, and other mental health concerns as a result of the pandemic. Mental health struggles contribute to increased rates of absenteeism and presenteeism. Presenteeism is the practice of coming to work despite illness, injury, anxiety, impairment, or other distractions, often resulting in reduced productivity. Unlike absenteeism, presenteeism is not visible and can be difficult to identify. Given the impact on productivity, addressing mental health is a human and financial imperative. For example, depression costs the American economy $210 billion annually, with 50 percent of that cost shouldered by employers.

ADDRESSING MENTAL HEALTH IN RETURN TO WORKPLACE STRATEGY

As companies across all sectors balance the return of their workforce in person or in a hybrid format and address the mental wellbeing of their employees, a few strong trends emerge. Across sectors, there is a need to address mental health in the workforce from health, wellness, safety, and employee benefits perspectives. In a recent Future of Benefits Report by McKinsey and Gartner, human resource (HR) leaders and executive decision-makers in the U.S. recognized the need to revise their benefit strategies. Specific areas of focus regarding benefits are centered around care, flexibility, and mental health. Organizations are facing the reality that though employees are returning to work, the impact of the pandemic continues. In fact, remote work may become the norm for many. Sixty-six percent of HR leaders said they plan to offer greater work flexibility, which represents a family-friendly benefit that is cost-effective for the employer.

Whether returning in a remote or hybrid fashion, the key question leaders will need to address is: What does a return to work really mean?

WHY MENTAL HEALTH IS A WORKPLACE SAFETY, HEALTH, AND WELLNESS IMPERATIVE

The pandemic has surfaced mental health issues in the general population and has highlighted the significant impact on the workforce. While COVID-19 and national unrest have brought mental health struggles into the spotlight, the reality is mental health impacted employers and employees before these crises. The American Heart Association CEO Roundtable Report surveyed thousands of employees and found that 76 percent reported that they struggled with at least one issue affecting their mental health. In the same survey, 42 percent of employees answered yes when asked if they had ever been diagnosed with a mental health disorder.

Again, these survey results are pre-COVID-19. Numerous studies have captured the spike in anxiety, depression, and other mental health concerns as a result of the pandemic. Mental health struggles contribute to increased rates of absenteeism and presenteeism. Presenteeism is the practice of coming to work despite illness, injury, anxiety, impairment, or other distractions, often resulting in reduced productivity. Unlike absenteeism, presenteeism is not visible and can be difficult to identify. Given the impact on productivity, addressing mental health is a human and financial imperative. For example, depression costs the American economy $210 billion annually, with 50 percent of that cost shouldered by employers.

ADDRESSING MENTAL HEALTH IN RETURN TO WORKPLACE STRATEGY

As companies across all sectors balance the return of their workforce in person or in a hybrid format and address the mental wellbeing of their employees, a few strong trends emerge. Across sectors, there is a need to address mental health in the workforce from health, wellness, safety, and employee benefits perspectives. In a recent Future of Benefits Report by McKinsey and Gartner, human resource (HR) leaders and executive decision-makers in the U.S. recognized the need to revise their benefit strategies. Specific areas of focus regarding benefits are centered around care, flexibility, and mental health. Organizations are facing the reality that though employees are returning to work, the impact of the pandemic continues. In fact, remote work may become the norm for many. Sixty-six percent of HR leaders said they plan to offer greater work flexibility, which represents a family-friendly benefit that is cost-effective for the employer.

Whether returning in a remote or hybrid fashion, the key question leaders will need to address is: What does a return to work really mean?

WHY MENTAL HEALTH IS A WORKPLACE SAFETY, HEALTH, AND WELLNESS IMPERATIVE

The pandemic has surfaced mental health issues in the general population and has highlighted the significant impact on the workforce. While COVID-19 and national unrest have brought mental health struggles into the spotlight, the reality is mental health impacted employers and employees before these crises. The American Heart Association CEO Roundtable Report surveyed thousands of employees and found that 76 percent reported that they struggled with at least one issue affecting their mental health. In the same survey, 42 percent of employees answered yes when asked if they had ever been diagnosed with a mental health disorder.

Again, these survey results are pre-COVID-19. Numerous studies have captured the spike in anxiety, depression, and other mental health concerns as a result of the pandemic. Mental health struggles contribute to increased rates of absenteeism and presenteeism. Presenteeism is the practice of coming to work despite illness, injury, anxiety, impairment, or other distractions, often resulting in reduced productivity. Unlike absenteeism, presenteeism is not visible and can be difficult to identify. Given the impact on productivity, addressing mental health is a human and financial imperative. For example, depression costs the American economy $210 billion annually, with 50 percent of that cost shouldered by employers.

ADDRESSING MENTAL HEALTH IN RETURN TO WORKPLACE STRATEGY

As companies across all sectors balance the return of their workforce in person or in a hybrid format and address the mental wellbeing of their employees, a few strong trends emerge. Across sectors, there is a need to address mental health in the workforce from health, wellness, safety, and employee benefits perspectives. In a recent Future of Benefits Report by McKinsey and Gartner, human resource (HR) leaders and executive decision-makers in the U.S. recognized the need to revise their benefit strategies. Specific areas of focus regarding benefits are centered around care, flexibility, and mental health. Organizations are facing the reality that though employees are returning to work, the impact of the pandemic continues. In fact, remote work may become the norm for many. Sixty-six percent of HR leaders said they plan to offer greater work flexibility, which represents a family-friendly benefit that is cost-effective for the employer.

Whether returning in a remote or hybrid fashion, the key question leaders will need to address is: What does a return to work really mean?

WHY MENTAL HEALTH IS A WORKPLACE SAFETY, HEALTH, AND WELLNESS IMPERATIVE

The pandemic has surfaced mental health issues in the general population and has highlighted the significant impact on the workforce. While COVID-19 and national unrest have brought mental health struggles into the spotlight, the reality is mental health impacted employers and employees before these crises. The American Heart Association CEO Roundtable Report surveyed thousands of employees and found that 76 percent reported that they struggled with at least one issue affecting their mental health. In the same survey, 42 percent of employees answered yes when asked if they had ever been diagnosed with a mental health disorder.

Again, these survey results are pre-COVID-19. Numerous studies have captured the spike in anxiety, depression, and other mental health concerns as a result of the pandemic. Mental health struggles contribute to increased rates of absenteeism and presenteeism. Presenteeism is the practice of coming to work despite illness, injury, anxiety, impairment, or other distractions, often resulting in reduced productivity. Unlike absenteeism, presenteeism is not visible and can be difficult to identify. Given the impact on productivity, addressing mental health is a human and financial imperative. For example, depression costs the American economy $210 billion annually, with 50 percent of that cost shouldered by employers.

ADDRESSING MENTAL HEALTH IN RETURN TO WORKPLACE STRATEGY

As companies across all sectors balance the return of their workforce in person or in a hybrid format and address the mental wellbeing of their employees, a few strong trends emerge. Across sectors, there is a need to address mental health in the workforce from health, wellness, safety, and employee benefits perspectives. In a recent Future of Benefits Report by McKinsey and Gartner, human resource (HR) leaders and executive decision-makers in the U.S. recognized the need to revise their benefit strategies. Specific areas of focus regarding benefits are centered around care, flexibility, and mental health. Organizations are facing the reality that though employees are returning to work, the impact of the pandemic continues. In fact, remote work may become the norm for many. Sixty-six percent of HR leaders said they plan to offer greater work flexibility, which represents a family-friendly benefit that is cost-effective for the employer.

Whether returning in a remote or hybrid fashion, the key question leaders will need to address is: What does a return to work really mean?
MYTH: MENTAL ILLNESS DOESN'T AFFECT ANYONE I KNOW.

Given the incidence rates of depression, anxiety, and trauma, it is likely you have a family member or friend that experiences a mental illness. Mental health exists on a continuum, and mental illness is on one end. Everyone is affected by stressors in their life which can lead to mental health struggles even if they are temporary. Given the stigma surrounding mental illness, many people do not disclose their experience even to loved ones.

MYTH: MENTAL ILLNESS DOESN'T REALLY GET BETTER.

Treatment for mental health concerns can be very effective in managing symptoms and leading to a productive life. Chronic mental illnesses, such as bipolar disorder, schizophrenia, and others, are often treated with medication and talk-therapy. Consistent adherence to treatment is a strong factor in successful and happy life outcomes. As with physical and medical health problems, early identification and treatment make a huge difference in the trajectory of mental illness.

MYTH: PEOPLE WITH MENTAL ILLNESS ARE VIOLENT AND DANGEROUS.

This is a particularly damaging myth because people with mental illness are 10 times more likely to be victims of crime, rather than to commit crimes. Only 3-5 percent of violent acts can be attributed to individuals living with a serious mental illness.

MYTH: PEOPLE WITH MENTAL ILLNESS CAN'T HOLD DOWN A JOB.

People with mental health problems can be very productive and successful in their careers. There is a tremendous range in symptoms people experience when they are struggling with mental health challenges, just as with physical illness. In fact, because people do not talk openly about behavioral health, you are likely working with a few colleagues who are successfully managing mental health concerns you don’t know about.

MYTH: TALKING WITH SOMEONE ABOUT THEIR MENTAL HEALTH STRUGGLES, EVEN SUICIDE, WILL MAKE THEM FEEL WORSE.

Many people struggle silently with mental illness and can find it supportive when a trusted friend, coworker, or family member asks how they are doing. In fact, a big myth surrounds suicide: the fear that if you ask someone who is depressed if they are suicidal, that it will put the idea in their head. In fact, for a person who is having thoughts of suicide, it can be a tremendous relief to talk about it. Suicide is a complicated act with many contributing factors. Asking someone who is not suicidal will not put the idea in their head.

WHOLE HEALTH VIEW: BEHAVIORAL HEALTH VS. MENTAL HEALTH

The World Health Organization (WHO) defines mental health as “a state of wellbeing in which an individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and is able to make a contribution to his or her community.” Behavioral health is a broader term that refers to the interaction between our behaviors and our mental, social, and physical wellbeing. In the clinical world, behavioral health is often used as an umbrella term that includes both mental health conditions and substance use.

Why is conceptualizing mental health more broadly as behavioral health important? It recognizes the interplay between the physical and mental health in a more holistic fashion. For example, people with depression have a 40 percent higher risk of developing cardiovascular and metabolic diseases than the general population. People with serious mental illness are nearly twice as likely to develop these conditions.

Additionally, mental health and substance use can be highly correlated in the adult population. A 2017 Survey found that more than 8.5 million Americans had a substance use disorder and co-occurring mental illness. A growing area of study is the connection between brain health and mental health, as an alternate medical way to understand how our brain vulnerabilities can surface through mental illness. If we can think about behavioral health from a holistic perspective — perhaps including brain health — then we can approach treatment, social support, and self-care in a way that is less stigmatizing.

HUMAN CASE VS. THE BUSINESS CASE

The National Alliance on Mental Illness (NAMI) states that only half of all Americans experiencing an episode of major depression receive treatment. NAMI also reports an average delay of 11 years from the onset of mental health symptoms to receiving effective treatment.

The major impact from depression on people is a lower quality of life, especially during episodes of major depression. The Anxiety and Depression Association of America (ADAA) reports that depression is the leading cause of disability in the U.S. among people ages 15–44. WHO indicates that by 2030, depression will be the leading cause of lost productivity in all economically advanced countries.
According to actuarial consulting firm Milliman, behavioral health has a dramatic effect on overall health benefit claim costs. Key findings from a major 2020 study of 21 million insured claims (from 2017) included:

**COMORBIDITIES OF DEPRESSION**

Mental health is rarely an isolated condition. According to data from Springbuk Analytics, 69 percent of patients with a mental health condition also have a chronic condition. These long-term health challenges often involve chronic pain, discomfort, regular doctor visits, and regular medications — any of which can impact mental health problems.

Depression is known to co-occur with other chronic health conditions and together this affects quality and longevity of life. The added complexity of co-occurring mental health diagnoses also results in increased costs in health insurance benefit claims. When patients have a mental health condition and at least one chronic condition, costs rise by 126 percent.

The three examples below illustrate the effects of depression and comorbidity of other chronic health conditions:

- **Musculoskeletal Pain**: Depression has been shown to increase the severity and intensity of pain, and chronic musculoskeletal pain increases the risk for depression. Of people who live with depression, 65 percent also have chronic pain and employers incur an extra $4,300 spend per worker per year for those with a major depressive disorder and chronic pain.

- **Diabetes**: Twelve percent of those diagnosed with diabetes also have depression. In addition, those diagnosed with depression are 60 percent more likely to develop diabetes. This bi-directional association is found in other chronic conditions as well, such as cardiovascular disease.

- **Cancer**: People with mental illness are 24 percent less likely to get screened for cancer than the general population. Early cancer screening has been shown to reduce mortality. Delayed cancer diagnosis among people with mental illness could be one reason they are also more likely to die of cancer than the general population.

When people suffer from mental illnesses, other dimensions of health are similarly affected, which, in turn, increases healthcare spending and diminishes an individual’s ability to gain or regain meaningful employment or perform at their optimal level while at work.

To effectively manage the combination of mental health and chronic conditions from both a human and cost perspective, organizations must take a holistic approach and work to address both physical health and mental health together.
COMMON BARRIERS TO OVERCOME IN ADDRESSING MENTAL HEALTH IN THE WORKPLACE

Just because a company has adopted a caring culture does not mean it will be easy to address mental health in the workplace. It can be challenging to galvanize leadership support for mental health initiatives whether the company is privately held or publicly traded. Even family-owned businesses and companies with employee stock ownership plans (ESOPs) experience struggles addressing mental health in the workplace.

A major barrier is that stigma for mental health runs deep. There are many workers who are uncomfortable talking about mental health. They did not talk about it in their families and therefore they have not expected to talk about it in the workplace. A positive trend countering this stigma is the generational differences that are shifting the relative comfort of talking about mental health in the workplace. The younger generations are more receptive to discussing mental health and desire to work for a company that focuses on providing wellbeing and resilience resources.

There are other hurdles to be overcome for a company to address mental health in the workplace. A traditional view often held by HR professionals and corporate legal advisors is that mental health is best addressed as a matter of privacy and confidentiality as with other employment matters. There is an absolute requirement for privacy and confidentiality to be maintained when dealing with the mental health diagnosis, work restrictions and accommodations, and medical and pharmaceutical treatment for mental health.

However, this does not mean a company cannot promote a workplace culture and share resources with employees to encourage individuals to seek and accept care for mental health conditions. Too often, companies taking the most conservative position on privacy and confidentiality concerns express confidence that this why the company offers an Employee Assistance Program (EAP). Often these companies are very surprised to learn that access and utilization of services is extremely low. One reason can be lack of ongoing promotion of the eligibility of the EAP, the types of services that are offered within the EAP, and how frequently these services can be accessed. The EAP cannot be expected to promote itself. The best promotion is when leadership actively supports talking not only about the EAP, but specifically how the EAP benefitted them or their family.

A common barrier that still exists is some companies hinge their reluctance to address mental health to the lack of state or federal safety regulations or requirements that they do so. These companies underestimate the scope of the problem, and by waiting to address the issue, will fall farther behind the companies proactively embracing the need to address mental health. Moreover, this strategy of “wait and see” for a regulation that may or may not be instituted also underestimates the number of project owners and general contractors taking proactive steps to institute mental health on their project sites.
1. Understand the eligibility requirements, services, and the frequency of services available from the EAP. Develop a proactive communication and promotion strategy for the EAP.
2. Request a utilization report from your EAP to better understand impact metrics. Additionally, it’s important to have an honest conversation with your EAP provider to not only better understand if/how their services are helping to reduce absenteeism and healthcare costs, but also to identify ways to make services more visible.
3. Display posters from various mental health organizations to demonstrate your company’s commitment to openness on providing mental health resources. Examples include:
   a. Crisis Text Line
   b. National Suicide Prevention Lifeline
   c. City and/or county health department or nonprofits in local communities
   d. Substance Use Mental Health Services Administration (SAMHSA)
   e. Construction Industry Alliance for Suicide Prevention
   https://preventconstructionsuicide.com/Posters
4. Incorporate mental health awareness, EAP information, and wellbeing resources into the new hire orientation program, including safety orientation video or checklist.
5. Incorporate mental health tips, information, or awareness topics into an established safety meeting while encouraging managers to also model the behaviors and conversations they want employees to feel safe to have. This can be done by talking about the managers’ own stress levels, struggles or how they have had to ask for help.
6. Start including behavioral health under the same umbrella as safety. There are protocols to prevent injury on job sites, but you should also have and promote processes to support employees if a mental health or substance use incident occurs. MindWise Innovations can offer more details on incorporating a behavioral health incident protocol into your existing safety guidelines. The linked article from the Construction Financial Management Association Building Profits titled “The Critical Human Element of Crisis Management” also speaks to the importance of such a protocol.
7. In the event of a traumatic loss, such as death by suicide or workplace accident, utilize expert postvention services to address the impact of trauma and prevent future similar events.
8. Evaluate your organization’s employee health benefits to determine if additional services are necessary to reduce the impact of chronic conditions and offer further support for mental health and substance use conditions. It’s also important for managers and leaders to reassure employees that there is no stigma associated with taking advantage of resources and there should never be negative repercussions in doing so.
9. Ensure access to a variety of treatment options — including telehealth and teletherapy — to connect with hard-to-reach populations.
10. Send awareness resources to families using home mailings. Expanding the communication to the entire home unit will show commitment to a 24/7/365 support of this topic from the company.
11. Offer anonymous online depression and/or mental health screenings to employees to encourage the early detection of conditions such as anxiety, depression, or substance use. Custom websites with organization-specific resources can be created by MindWise Innovations to provide additional support for mental health awareness programs.
12. Refer to the webpage (https://workplacementalhealth.org/) for the Center for Workplace Mental Health. The Center for Workplace Mental Health is affiliated with the American Psychiatric Association Foundation and has developed many tools and resources to help employers, including:
   • Mental Health Cost Calculators: https://workplacementalhealth.org/employer-resources/mental-health-calculators
   • Right Direction Depression Awareness Campaign: https://www.rightdirectionforme.com/
Company leadership grew increasingly concerned as they read reports about the rising risks of substance misuse and suicide in the construction industry. The company shared information about the EAP with all employees. Selected company leaders and supervisors agreed to share how the program helped them or their family members.

The company initiated toolbox talks addressing mental health and wellbeing and health and wellness monthly to supplement the topics on physical safety hazards and regulatory requirements. The company held a safety stand-down on opioids.

Company leadership decided to expand their knowledge and commitment to learning more about mental health to be better able to provide resources for the workforce. Several company leaders attended three different mental health training programs to decide which approach would work best in their company. The three choices were:

- **90-minute** Question-Persuade-Refer (QPR) Gatekeeper Training session offered by the county health department [www.QPRinstitute.com](http://www.QPRinstitute.com)
- **45-60-minute** session titled Talk Saves Lives by the American Foundation for Suicide Prevention [www.AFSP.org](http://www.AFSP.org)
- **8-hour** Mental Health First Aid training course offered by the National Council for Mental Wellbeing [www.mentalhealthfirstaid.org](http://www.mentalhealthfirstaid.org)

After attending all three sessions, the company leaders suggested offering QPR training for all managers and supervisors in the company. In addition, the company invited all HR administrators, field safety coordinators, and office managers to attend the Mental Health First Aid training.
TECHNOLOGY (SOFTWARE AS A SERVICE AND IT SUPPORT CALL CENTER)

The founder of the company openly shares his personal lived experience of anxiety and depression with his workers and business partners. He shares how his unwillingness to accept and share his mental health conditions led to his first business venture failing. He decided to confront the barrier of stigma by openly advocating for mental health in the workplace.

The company offers a flexible work environment and schedule. The company’s open workspaces feature soothing pastel colors, aromas (like sandalwood and lavender), and soft lighting to encourage calmness. The office area has private workspaces and relaxation stations for employees seeking greater privacy or to engage in meditation and mindfulness practices.

The company has adopted a flexible time-off policy in a progressive and accommodating work culture. Examples of the practices that have made this company an employer of choice include:

- A formal “buddy system” for new hires to ensure each new team member understands the expectations of the company for self-care and preventing burnout common among technology workers
- Robust standalone EAP offering monthly mental health counseling sessions for workers and dependents
- Wellness program to provide nutritional consulting
- Initiated discounted virtual gym memberships to help employees maintain physical exercise

“...The office area has private workspaces and relaxation stations for employees seeking greater privacy or to engage in meditation and mindfulness practices...”

WAREHOUSING/DISTRIBUTION OF MEDICAL EQUIPMENT AND SUPPLIES

Company leadership recognized how workers would be impacted by rapid sales growth. Leadership anticipated the rising pressures on employee and family wellbeing. HR focused on expanding employee wellbeing strategies, including:

- Holding a training session with all supervisors to communicate the importance of creating empathy within the workforce and being understanding and flexible.
- Sharing family mental health and wellbeing resources with all employees.
- Displaying posters for the EAP and the county health department information line.
- Reintroducing the EAP to all employees in small group meetings.
- Providing information about financial counseling available from nonprofit organizations in the community.
- Eliminating mandatory overtime for supervisors by promoting additional supervisors and expanding responsibilities of production, packaging, and shipping line leaders.
- Providing special holiday gift cards and offering extended breaks and special snacks periodically to show appreciation for the extra efforts.

The company has reported positive morale and teamwork as the company’s volume of sales and product to assemble, package, and ship has increased. Company leaders believe their employees rallied around the critical mission and have seen how increased communication has fostered empathy and caring among all team members.
CONSTRUCTION: GENERAL BUILDER WITH SELF-PERFORMED CARPENTRY

The company's safety manager learned about suicide prevention at a construction association that hosted a presentation by an industry leader. He immediately shared his new learnings with the safety director, and together they discussed bringing this issue to the attention of company leadership. The company’s senior leaders asked about options for how to address the topics of mental health, substance misuse, and suicide prevention. The company subsequently hosted a training program for senior operational and project supervision leaders using the industry leader as a facilitator.

There was consensus to offer a brief, focused training program to company supervisors during the pre-season training sessions. Four 45-minute sessions were held for superintendents, foremen, project managers, and project engineers. The sessions included a guest presenter, 1-2 brief videos, and the distribution of wallet cards and company EAP information. The company made enough packets of wallet cards and hardhat stickers to share with subcontractors on their projects. The company held combined toolbox talks for their crews and subcontractor crews to distribute the wallet cards and hardhat stickers.

What was unique about this company was how swiftly they took action to address their workforce. The safety manager almost immediately reached out to workers – and retirees – he had not spoken to recently to ensure they were doing well. He focused on employees who lived alone or had experienced life changes due to injuries, grief, and any other factors that would have them more isolated. He helped provide resources for several employees and retirees who were struggling with various life issues. He demonstrated the company’s employee-centric culture and made a difference to these current and past employees.

ADDRESSING BEHAVIORAL HEALTH NEEDS OF TOMORROW'S LEADERS

A national trade association recognized the need to better understand the unique pressures of their young workforce and provide mental health resources to support employee wellbeing. Young professionals face stressors that result in burnout, high job turnover, and company challenges in recruiting. Through brief discovery interviews and focus groups, specific needs surfaced for: Behavioral health education, a psychologically safe work culture, and improved intergenerational understanding and communication in the workplace.

The following programs and services were delivered:

- Behavioral Health Literacy sessions to level set understanding about behavioral health, impact on the workplace, holding supportive conversations, and connecting to resources.
- Train-the-trainer roundtable discussions to prepare Young and Senior Professionals to lead trainings focused on intergenerational conversations about mental health and workplace culture.
- Young Professional Webinar focused on behavioral health was provided during the annual YP week.
- Online behavioral health screening program was provided to allow for anonymous, brief self-assessments to gain information about 13 unique behavioral health conditions.

The organization’s proactive stance in addressing the behavioral health needs of the future workforce is garnering positive attention and can improve retention and recruitment in a competitive climate. A key feature of the intervention is to create systemic, sustainable change that the organization can maintain internally.

Key elements in establishing a sustainable mental health and substance misuse program for an organization include visibility, accessibility, effectiveness, and sustainability.
CITED RESOURCES

1 American Health Association CEO Roundtable Report. (March 25, 2019). Mental Health - A Workforce Crisis - CEO Roundtable [heart.org]


8 National Alliance on Mental Illness (NAMI). Mental Health by the Numbers. https://nami.org/mhstats


10 National Alliance on Mental Illness (NAMI). Mental Health by the Numbers. https://nami.org/mhstats


12 World Health Organization (WHO). https://www.who.int/news-room/fact-sheets/detail/depression


14 Hinge Health (2018). Discover How Your Workforce Can Overcome Depression & MSK Pain. https://assets.ctfassets.net/0al85xna3m3d/3QgqX0qP1ee20c/59e8g4f8d49035a533/Chronic_MSK_Pain_and_Mental_Health.pdf


Meet the Authors:

Cal Beyer, CWP is the Vice President of Workforce Risk and Worker Wellbeing for CSDZ, a Holmes Murphy Company. He is a member of the Executive Committee of the National Action Alliance for Suicide Prevention. He serves on the Expert Advisory Group of the Center for Workplace Mental Health and the Lived Experience Advisory Committee of the Suicide Prevention Resource Center. Cal was instrumental in the launch of the Construction Industry Alliance for Suicide Prevention. Contact Cal at cbeyer@CSDZ.com or (651) 307-7883.

Lisa K. Desai, Psy.D., is the Chief Behavioral Health Officer at MindWise Innovations, a service of Riverside Community Care. Dr. Desai has over 20 years of clinical and administrative experience working in college counseling centers, community mental health hospitals, and private practice. In her role at MindWise, Dr. Desai leads the development and implementation of behavioral health programs for workplaces and has developed construction-specific protocols, trainings, and resources. Contact Lisa at ldesai@mindwise.org or (781) 329-0909 ext. 5439.

Leia Spoor is a Senior Clinical Consultant with Holmes Murphy Employee Benefits in Dallas. She is a resource for clients and works closely with the Health Asset Management Team and its Clinical Learning and Understanding Engine (CLUE). She leads data driven and evidence-based disease-specific interventions to improve quality of life for employees and family members. Leia is one of the Top 100 Wellbeing Leaders for the Corporate Health and Wellness Association. Contact Leia at Lspoor@holmesmurphy.com or (214) 265-6301.
ABOUT HOLMES MURPHY

Holmes Murphy’s mission is to make a difference by promoting health, protecting wealth, and delivering peace of mind. Since 1932, we have been known for pushing the envelope, asking the tough questions, and breaking free of the pack. Our passion lies in helping our clients realize their potential. While our competition focuses on profit, we take pride in being privately held and creating strategies to help employers achieve their biggest goals. We also pride ourselves on selling “thinking,” not insurance. In a nutshell, we sell the cumulative knowledge and experience that make insurance and businesses work better. It’s a philosophy that’s worked for us since our inception. As an independent brokerage, we serve business and industry leaders across the nation in the areas of property casualty insurance, employee benefits, captive insurance, risk management, and loss control. For more information on Holmes Murphy, to include specialties, locations and what makes us tick, visit www.holmesmurphy.com.

ABOUT CSDZ

CSDZ has been serving the construction industry since 1919. In 2018, Holmes Murphy and CSDZ merged and are proud to be one of the largest employee-owned and controlled brokers in the nation. This partnership has allowed further depth of property casualty, construction, and surety industries and more innovation in serving our clients.

When you work in the construction industry, risk is always part of the job. Controlling that risk is more than just procuring an insurance policy. At CSDZ, we view ourselves as your indispensable business partner. We work hard to create smarter business risk solutions that will significantly impact your bottom line. We also care about the wellbeing of the construction workforce and have a team dedicated to worker risk and wellbeing. For more information, visit us at www.csdz.com.

ABOUT MINDWISE INNOVATIONS

MindWise Innovations offers a comprehensive approach to mental health, substance use, and suicide prevention. Utilizing our suite of digital and consultative services, we support early intervention, education, and crisis management to promote improved health outcomes and help shape the future of behavioral healthcare.

With a clinically validated screening program, MindWise helps a range of entities, including corporations, states, and universities, to reimagine the behavioral health needs of their organization. Our data-driven strategies encourage the early detection of mental health and substance use disorders, connect employees to quality treatment, and foster psychological safety. MindWise also works with schools to provide SOS Signs of Suicide, an evidence-based youth suicide prevention program, which has shown a 64% reduction in self-reported suicide attempts. Delivering services to more than 3.7 million students and 600 organizations across 20 countries, MindWise is powered by Riverside Community Care, a non-profit leader in behavioral health and human services. For more information, visit us at www.mindwise.org.