Mental Health and Work
A Perennial Priority Peaks in the Wake of COVID-19

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Why does Mental Health Matter in the Workplace?

• Increased Productivity and Improved Work Performance

• Reduced Absenteeism, Turnover, and Injuries

• Enhanced Reputation, Recruitment, and Retention

• Improved Mental Health is Good for Overall Health
Common COVID-19 Stressors

- High Ambiguity & Uncertainty
- Overwhelming COVID-19 Related Information in the Media
- Risk of Infection
- Physical Distancing & Social Isolation
- Change in Work Demands, Structure, and Processes
- Changes in Domestic Responsibilities that Increase Stress or Impede Work
- Having a Loved One Sick with COVID-19 or Loss of Loved Ones
- Financial Concerns and Job Security
- Worsening of Comorbid Long-Term Health Conditions
- Privacy & Confidentiality Concerns with New Workplace Monitoring
By the Numbers
MAJOR MENTAL HEALTH IMPACTS OF COVID-19

$260 billion
ESPECTATED ANNUAL COST OF MENTAL ILL HEALTH TO US ECONOMY

96%
OF ALL U.S. ADULTS SAY THE PANDEMIC HAS IMPACTED THEIR OVERALL STRESS

80%
OF RESPONDENTS IN INDIA FELT THE NEED FOR MENTAL HEALTH SERVICES

42%
OF RESPONDENTS IN THE U.K. REPORTED MORE FATIGUE THAN BEFORE “LOCKDOWN”

4:1
AVERAGE RETURN FROM INVESTING IN EMPLOYEE MENTAL HEALTH

- “Development, Validation, and Reliability Testing of the Brief Instrument to Assess Workers’ Productivity during a Working Day”
- “America’s State Of Mind: U.S. Trends In Medication Use For Depression, Anxiety & Insomnia Ipsos “As COVID-19 quarantine continues, desire for virtual community grows but loneliness persists”
- “Study of knowledge, attitude, anxiety & perceived mental healthcare need in Indian population during COVID-19 pandemic”
- “IES Working at Home Wellbeing Survey”
- “Investing in treatment for depression and anxiety leads to fourfold return”
During late June, 40% of U.S. adults reported struggling with mental health or substance use.

**Anxiety/Depression Symptoms**
- 31%

**Trauma/Stressor-Related Disorder Symptoms**
- 26%

**Started or Increased Substance Use**
- 13%

**Seriously Considered Suicide***
- 11%

*Based on a survey of U.S. adults aged ≥ 18 years during June 24–30, 2020

[https://www.cdc.gov/mmwr/volumes/69/wr/mm6932a1.htm](https://www.cdc.gov/mmwr/volumes/69/wr/mm6932a1.htm)
Despite the implications of COVID-19 on mental health, symptoms are not disorders.

Key Considerations...

Severity  
Duration  
Impairment
What do we know from other public health crises?

<table>
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<tr>
<th>Prevalence of Probable Post-Traumatic Stress Disorder related to the September 11 attacks in Manhattan</th>
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<td>7.5%</td>
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<td>6 months after September 11</td>
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<th>Range of Health Workers who Experienced Psychological Distress Following a Crisis</th>
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<td>14% - 57%</td>
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<tr>
<td>immediately after an epidemic/pandemic ended</td>
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<tr>
<td>17% - 45%</td>
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<tr>
<td>1 year post outbreak</td>
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The vast majority of individuals recover their mental health to baseline.

- “Trends of probable post-traumatic stress disorder in New York City after the September 11 terrorist attacks”
- “The Mental Health of Frontline Health Care Providers During Pandemics: A Rapid Review of the Literature”
Who is at most risk?

The risk of the long term burden on mental health will be a function of:

- Pre-Existing Conditions
- Intensity & Severity of Exposure
- Support From Community
Effective Leadership During COVID-19 and Beyond

Leaders and managers have an opportunity to play a central role in shaping the organizational response to this pandemic.

- Communicating Clearly & Often
- Making Mental Health a Normal Part of Conversations
- Facilitating Peer & Team Support
- Promoting & Modelling Flexibility
- Supporting Open Two-Way Communication
- Normalizing Employees’ Heightened Anxiety
- Reminding Employees on the Importance of Mental Health
- Promoting & Modelling Self-Care

Columbia University Department of Psychiatry

WHO Collaborating Centre for Capacity Building and Training in Global Mental Health
Organizational Strategies – The Three Ps

- Protect
- Promote
- Provide

INTEGRATED APPROACH

Protect Employee Mental Health

Promote the Positive

Provide Access to Care

Adapted from "Workplace mental health: developing an integrated intervention approach"
Organizational Strategies – The Three Ps

Protect Employee Mental Health

INTEGRATED APPROACH

Promote the Positive

Provide Access to Care

Protect

• **PROTECT** mental health by preventing exposure to undue stress and situations that could cause mental distress or mental health problems

  Flexible Work Hours
  Family Leave
  Cultivating a Culture of Trust

• “Workplace mental health: developing an integrated intervention approach”
Organizational Strategies - The Three Ps

- Protect Employee Mental Health
- Provide Access to Care
- Promote the Positive

**Promote**

- **PROMOTE** good mental health that enhances skills, resilience and coping
  - Create routines and structures amidst uncertainties
    - Peer Support Groups
    - Skills Building Workshops
    - Model Self-Care

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“Workplace mental health: developing an integrated intervention approach”
Organizational Strategies – The Three Ps

INTEGRATED APPROACH

Protect Employee Mental Health

Provide
• PROVIDE opportunities for employees to talk about mental health needs and access care

Know what is available within your organization

Facilitate connection to resources for employees who are struggling with mental health concerns

Expand resources as needed

Promote the Positive

Provide Access to Care

“Workplace mental health: developing an integrated intervention approach”
Organizational Strategies – The Cycle

1. DEFINE THE PROBLEM
2. ARTICULATE SUCCESS
3. MEASURE & LEARN
4. INNOVATE & ITERATE
Key Takeaways

• The mental health consequences of COVID-19 are vast and serious

• A shadow pandemic is not inevitable; Fortune favors those who prepare

• Employers have an enormous opportunity by supporting employee mental health during and beyond COVID-19