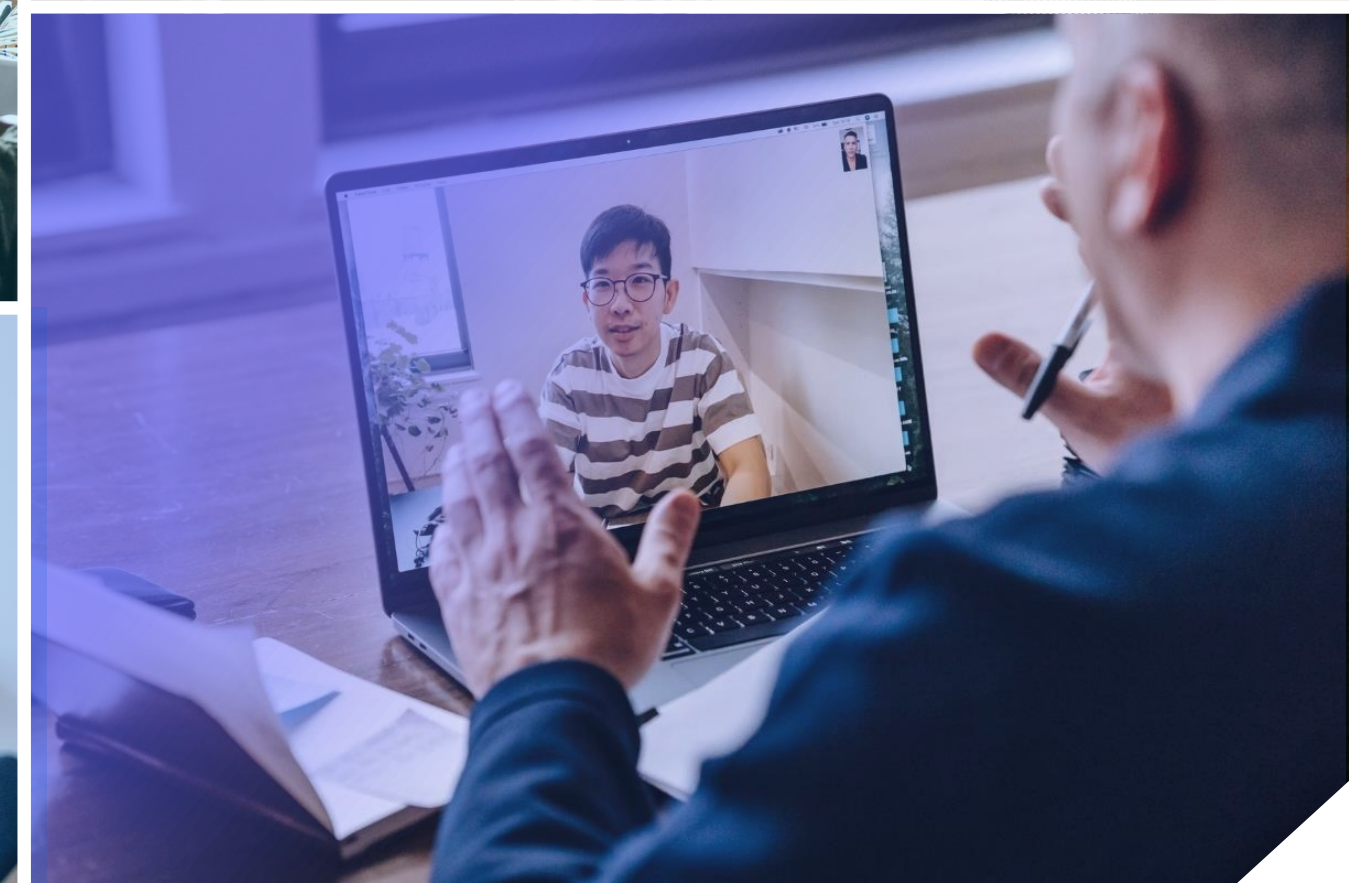


Mind Share Partners' 2021 Mental Health at Work Report

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About Mind Share Partners

Mind Share Partners is a national nonprofit that is changing the culture of workplace mental health so that both employees and organizations can thrive.

We build public awareness, host communities to support employee resource groups (or affinity groups) and professionals, and provide training and strategic advising to leading companies.

Mind Share Partners has been featured in prestigious media including *Harvard Business Review*, *The New York Times*, *The Wall Street Journal*, *TIME*, *Fast Company*, and others.

www.mindsharepartners.org



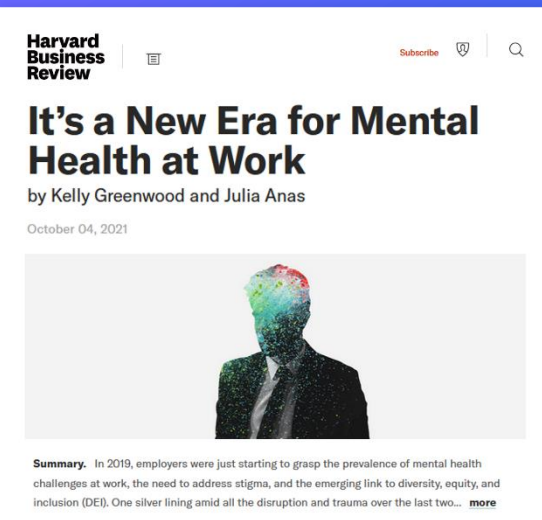
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Read our accompanying article in *Harvard Business Review*.

Get a summary of findings and early strategies to create a mentally healthy workplace based on the findings of our 2021 study. [Continue reading >](#)

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Introduction

Mental health at work is at a catalytic point in time.

All too often, we center the topic of mental health on trendy perks like mental health days or more palatable language like “mental fitness” or “emotional wellbeing.” We have created a narrative around mental health as an individual issue to solve for using benefits and perks. In reality, mental health is ingrained into the way an organization operates and how its people are valued. Every single individual will face mental health challenges in their lifetime as an innate human experience, and many do on a day-to-day basis. But we forget that the way we think, feel, and are treated drives how we navigate the world around us—from how an individual engages in their work, to how a manager speaks with their team, to how a company prioritizes (or not) the wellbeing of its people.

The universal stressors of 2020’s events and beyond were a breaking point for many when it comes to workplace mental health. It was a sudden, forced, and sobering realization that our livelihoods are interwoven into the fabric of work itself and our relationships with our teams and organizations. At the same time, many workers discovered benefits to the “new normal,” from flexibility to remote working. Together, many of us have reached a collective awareness of the urgent need to better prioritize mental health at work moving forward.

Mind Share Partners’ 2021 Mental Health at Work Report in partnership with Qualtrics and ServiceNow

explores the lived experience of mental health, stigma, and work culture in U.S. workplaces. It is a follow-on study using the same metrics from our 2019 Mental Health at Work Report. This enables a rare pre- and post-pandemic comparison with additional questions and segmentations on the effects of the pandemic, racial trauma, and return to office. From these results, we urge organizations and leaders to think deeply about the ways they are investing into the mental health of their people—not only making it a business priority, but also as an imperative value to meet the growing call for healthy and sustainable cultures of work.

As we look to the future, workers are beginning to demand true investment in organizational culture change for workplace mental health. In fact, many are increasingly leaving their roles for more supportive workplaces. The findings of this study are intended to help organizations, leaders, teams, managers, and individual employees alike deepen both their understanding as well as their investment in mentally healthy cultures for all.

Commitment to Diversity, Equity, Inclusion, and Belonging (DEIB)

Mind Share Partners remains committed to advocating for the mental health of historically underrepresented and disenfranchised communities. Many of these populations face unique challenges when it comes to workplace mental health. At the same time, they have also been disproportionately impacted by the global pandemic and ongoing racial injustices, and even

still continue to be underrepresented in the workplace and in research. Their experiences are an indispensable part of workplace mental health and critical to making lasting and inclusive change in the broader movement.

Just as we did in our 2019 study, our 2021 follow-on study includes statistically significant sample sizes for demographic groups across gender identity, racial and ethnic communities, generational divides, the LGBTQ+ community, and more. Throughout the report, we summarize the important, high-level differences and trends between demographic groups across our study outcomes.

For a detailed list of findings and numbers across these demographic groups, check out our [supplementary document here](#).



“We have created a narrative around mental health as an individual’s issue to solve for through benefits and perks rather than understanding mental health as being ingrained into the way an organization operates and how its people are valued.”



Executive Summary

Mental health challenges are the norm and they're persisting for longer than ever before.

Many of us know one of the one in five Americans who manages a diagnosable mental health condition every year. But mental health is a spectrum of experiences, and everyone is on this spectrum. In our 2021 study, **three-quarters (76%) of full-time U.S. workers reported experiencing at least one symptom of a mental health condition in the past year**—up from 59% in 2019 (a 29% increase or 17% point difference).

The most common symptoms were:

- **Burnout—56%** (no 2019 comparison)
- **Depression—46%**; up from 32% in 2019 (a 44% increase or 14% point difference)
- **Anxiety—40%**; up from 37% in 2019 (an 8% increase or 3% point difference)

These challenges weren't temporary either—they're lasting longer. 80% of those who reported mental health symptoms said their symptoms cumulatively lasted a month or more. **Over a third (36%) said their symptoms lasted five months to an entire year—up from 21% in 2019** (a 71% increase or 15% point difference).

Additionally, we observed differences in prevalence rates across seniority levels.

Executive (82%) and C-level (78%) respondents were more likely to report at least one mental health symptom, compared to

managers (71%) and individual contributors (71%). This differs from our 2019 study where mental health symptoms were equally prevalent across seniority levels. That said, there were no differences in the *duration* of symptoms across levels.

Mental health must no longer be thought of as a phenomenon impacting the “ill” minority. Increasingly, challenges with mental health are an everyday experience, impacting a majority of workers at all levels of seniority for significant periods of time.

The way we're working isn't sustainable—it's hurting us.

The pandemic and return to office is changing the way we work. And our work environment, work practices, and company culture all play critical roles on our mental health. Thus, we introduced a new measure to our 2021 study that measured the role of workplace factors on mental health.

84% of respondents reported at least one workplace factor that negatively impacted their mental health in the past year—the most common being emotionally draining work (37%) and challenges with work-life balance (32%).

Emotionally draining work in particular was also most commonly reported as being exacerbated by the pandemic and driving attrition due to mental health reasons. This aligns with reports showing that employees are working longer and more abnormal hours during the pandemic as well as long-standing research showing that unhealthy work practices can cause diagnosable conditions.

Many employers are already exploring return to office plans and their future of work. Our study

found, however, that **the most common elements of employers' return to office plans that negatively impacted employee mental health were the policies themselves around in-person versus remote work after the pandemic (41% of respondents) and the lack of work-life balance or flexibility based on the policy (37%).** Ultimately, this indicates a clear discrepancy in employer plans versus employee needs for the future of work.

There isn't, nor shouldn't be, a “return” to pre-pandemic normalcy with growing rates of mental health challenges, burnout, and a pervasive culture of overwork even before the pandemic. A healthier, sustainable culture of work is imperative for both the long-term mental health of employees and a company's ability to navigate future uncertainty.

Employees who felt supported amidst the pandemic, racial injustices, return to office, and/or with their mental health overall see better mental health and engagement outcomes.

We asked respondents whether they felt supported by their employer around their mental health overall and amidst key events since early 2020:

- **Mental health overall. 61%** felt that, overall, their company supports their mental health.
- **Pandemic. 69% of respondents felt supported amidst the pandemic and remote working.** This number rose to 74% of caregivers, compared to 63% of non-caregivers. Women, Latinx, Asian or Pacific Islander, Native American, and mixed-race respondents were less likely to feel supported, compared to male and white respondents.



Three-quarters (76%) of full-time U.S. workers reported experiencing at least one symptom of a mental health condition in the past year—a 29% increase from 2019 (59%).

80% of full-time U.S. workers said their mental health symptoms cumulatively lasted a month or more. Over a third reported symptoms lasting five months to an entire year.

84% of study respondents reported at least one workplace factor that negatively impacted their mental health in the past year.

Executive (82%) and C-level (78%) respondents were more likely to report at least one mental health symptom, compared to managers (71%) and individual contributors (71%).

- **Racial injustices. 56% felt supported** amidst ongoing racial injustices. While 58% of Black respondents felt supported, this declines to 55% of Latinx, 54% of Native American, and 49% of Asian or Pacific Islander respondents.
- **Return to office. 60% felt supported** amidst their company's return to office plans, with 64% of caregivers feeling this way, compared to 54% of non-caregivers.

From there, we compared respondents who *did* feel supported by their employer to those who *didn't* across these key events. **Those who *did* feel supported tended to be:**

- **Less likely to experience mental health symptoms.** E.g., those who felt supported amidst the pandemic were 45% less likely to experience their mental health symptoms for 5 - 12 months, compared to those who didn't.
- **Less likely to underperform and miss work.** E.g., those who felt supported amidst their company's return to office plans reported less than half the number of days they underperformed in the past year due to their mental health (10 days vs. 25 days).
- **More likely to feel comfortable talking about their mental health at work** E.g., those who felt supported amidst the racial injustices were roughly 2x more likely to feel comfortable talking about their mental health to their colleagues, manager, and HR.
- **More satisfied with their job and more likely to stay.** E.g., those who felt supported amidst the pandemic were 2.4x more likely to

be satisfied with their job and 2x more likely to intend to stay at their company for 2+ yrs.

- **More likely to have positive views of their company and its leaders.** E.g., those who felt supported by their employer overall with their mental health at work were:
 - 5.6x as likely to **trust** their company.
 - 3.5x as likely to be **proud** to work at their company.
 - 3.7x as likely to say that their **leaders are advocates** for mental health.
 - 3.1x as likely to say that their **manager is equipped to support them** with their mental health.

While these are correlations, not causations, we see a clear narrative around how employer support is associated with mental health, engagement, and productivity outcomes. Achieving this, however, requires organizational efforts—beyond perks and benefits—that are heard, seen, and felt by employees in their experiences at work and with work itself.

Employees are leaving their jobs to preserve their mental health.

When mental health at work goes unsupported, there are clear losses to absenteeism, productivity, and attrition. In our study, 17% of respondents missed more than 10 days of work due to their mental health—5.7 times more than in 2019 (3%) or a 14% point difference.

Additionally, **77% of study respondents said their productivity was negatively impacted by their mental health**—up from 61% in 2019

(a 26% increase or 16% point difference).

What's more, half (50%) of respondents have left previous roles at a company due, at least in part, to mental health reasons, both voluntarily or involuntarily. This is up from a third (34%) in 2019 (a 47% increase or 16% point difference).

This also grows to 81% of Gen Z (75% in 2019) and 68% of Millennial respondents (50% in 2019), compared to 12% of Baby Boomers (5% in 2019) and 38% of Gen X study respondents (19% in 2019).

When considering voluntary departures, 32% of all study respondents in 2021 reported voluntarily leaving previous roles due, at least in part, to mental health reasons—up from 22% in 2019 (a 45% increase or 10% point difference). These trends are even higher for caregiver respondents and historically underrepresented groups as well, including LGBTQ+, Black, and Latinx respondents—all more likely to leave roles for their mental health (compared to non-caregiver, non-LGBTQ+, and white respondents).

This poses significant implications amidst the growing dialogue around “The Great Resignation.” In fact, **91% respondents believed that, when job-seeking, a prospective company's culture should support mental health**—up from 86% in 2019 (a 6% increase or 5% point difference).

Unsupported mental health challenges are not only impacting productivity, but workers are increasingly taking their mental health into their own hands and leaving employers who fail to support them. This trend is particularly true for historically underrepresented talent, new talent (Gen Z), and the current largest pool of workers (i.e., Millennials).



“Half (50%) of study respondents reported having left previous roles at a company due, at least in part, to mental health reasons. This number grows to 81% of Gen Z and 68% of Millennials.”

— The Benefits of Company Support —

“Those who felt supported amidst the pandemic were 2.4x as likely to be satisfied with their job and 2x as likely to intend to stay at their company for 2+ yrs).”

“Those who felt supported amidst the racial injustices and reckoning were roughly 2x more likely to feel comfortable talking about their mental health to their colleagues, manager, and HR).”

“Those who felt supported by their employer overall with their mental health were over 5x as likely to trust their company and over 3x as likely to be proud to work at their company.”

Younger workers and historically underrepresented communities are still struggling.

We found consistent themes in unique study outcomes among younger workers (i.e., Gen Z and Millennial respondents), caregivers, and respondents from historically underrepresented communities, including LGBTQ+, transgender, Black, and Latinx respondents.

These groups tended to be more likely to:

- **Report mental health symptoms.**
- **Say that work or their work environment negatively impacted their mental health.**
- **Have left a previous role due, at least in part, to mental health reasons.**

With the murders of Black Americans by police, rise in anti-Asian violence amidst the pandemic, challenges with at-home schooling for parents coupled with COVID-19 exposure risk amidst the return to school, all of these groups have and continue to face disproportionate challenges when it comes to workplace mental health.

These differences are reflected in how these groups understand mental health as well. 54% of all study respondents agreed that mental health is a diversity, equity, and inclusion (DEI) issue—up from 41% in 2019 (a 32% increase or 13% point difference). Unsurprisingly, historically underrepresented groups were all more likely to agree with this statement.*

* For detailed findings and numbers across demographic groups, check out our [supplementary document here](#).

Mental health experiences are fundamentally tied to our identities, communities, and group membership. True investment in mental health necessitates equally true investment in diversity, equity, and inclusion to support workplace mental health equally for all.

Fortunately, we're talking about mental health at work more, even if it's hard.

One of the most optimistic trends from our study is that people are talking more about their mental health at work. **Two-thirds (65%) of respondents reported having talked about their mental health to someone at work in the past year**—up from 40% in 2019 (a 63% increase or 25% point difference). **In fact, 2.5x more did in the past week in 2021 (22%),** compared to in 2019 (9%; a 144% increase or 13% point difference).

Similarly, workers' comfort levels also grew in talking about mental health at work to:

- **Their colleagues—41%;** up from 28% in 2019 (a 46% increase or 13% point difference).
- **Their manager—40%;** up from 29% in 2019 (a 38% increase or 11% point difference).
- **HR—37%;** up from 25% in 2019 (a 48% increase or 12% point difference).

However, only half (49%) of respondents described their experience of talking about mental health at work as positive—comparable to rates in 2019 (48%). Additionally, 59% of study respondents felt comfortable supporting another colleague with their mental

health—similar to 2019—with the greatest obstacles being feeling awkward or not having the right place or time (40%) and not wanting to offend someone or make them uncomfortable (40%).

Increasingly, talking about mental health at work is the norm, though comfort levels and the experience of these conversations are still mixed. To ensure these conversations keep happening and remain productive, organizations have an imperative to not only equip managers, teams, and employees to navigate these conversations productively but also to cultivate safe and supportive cultures overall.

Employers are investing more into mental health—sort of.

Amidst the global pandemic, calls for racial justice, transition to remote work, economic instability, return to the office, and many more challenges both emerging and ongoing into 2021, we're finally seeing employers deepen their investment in supporting mental health at work.

Our study found that the availability of many resources provided by employers to employees grew since the pandemic, like extra paid time off (55% growth), mental health days (41% growth), and mental health training (33% growth).

Simultaneously, we saw significant growth in the use of accommodations by employees—specifically ones that supported the day-to-day experience of work, including:

- **Extended or more frequent breaks from work—a 550% increase** from 2% in 2019 to 13% in 2021 (or an 11% point difference).



“Two-thirds (65%) of full-time U.S. workers have talked about their mental health to someone at work in the past year—a 63% increase from 40% in 2019. In fact, 2.5x more did in the past week in 2021 (22%), compared to in 2019 (9%).”

“True investment in mental health necessitates equally true investment in diversity, equity, and inclusion to support workplace mental health equally for all.”



- **Adjustments to how they communicate with others and how often—a 333% increase** from 3% in 2019 to 13% in 2021 (or a 10% point difference).
- **Time in the work schedule for therapy appointments—a 300% increase** from 4% in 2019 to 16% in 2021 (or a 12% point difference).

This compares to time off (21%) and leaves of absence (13%), which saw no growth in utilization rates from 2019. Ultimately, this highlights a contrast in the resources employees are using versus what employers are providing. **Employees are increasingly drawn to resources that support them day-to-day versus temporary, Band-Aid solutions.**

Appropriately, employees are seeing greater investment from employers in creating safe and supportive cultures overall for mental health between 2019 and 2021. For example:

- **32% more study respondents believed that mental health was actually prioritized** at their company, compared to other priorities (54% in 2021 and 41% in 2019; a 13% point difference).
- **27% more study respondents believed that their company leaders were advocates** for mental health at work (47% in 2021 and 37% in 2019; a 10% point difference).
- **21% more study respondents believed that their manager was equipped to support them** if they had a mental health condition or symptom (47% in 2021 and 39% in 2019; an 8% point difference).

The growth in day-to-day support and organizational culture factors is promising for the future of work. At the same time, this investment in culture is still unfortunately mixed overall. In fact, when asked what “resource” for mental health they most wanted, **respondents most often wanted a more open company culture around mental health** (31% of respondents).

Many companies have increased their investment in mental health resources and company culture—a promising trend. It’s essential that they continue to invest in and grow a culture for mental health in the long term for the wellbeing of their employees and the organization at large.

The future of mental health is culture, not perks.

Mental health has long been framed and treated as an individual’s responsibility by employers, whether explicitly in messaging around self-care, or implicitly through the provision of individual resources like perks, benefits, and time off. But mental health isn’t something that is solved with a mental health day or an internal self-care campaign—at least not in isolation.

The future of workplace mental health is culture change—of openness, transparency, and compassion from organizations and leaders, of safe and supportive environments for mental health, of healthy and sustainable ways of working. And it’s on each and every one of us to play a meaningful part for the good of our organizations, our people, and ourselves.

Where do we go from here?

There are many strategies and avenues forward in creating what Mind Share Partners calls a “mentally healthy workplace.”

Based on the findings of the report, we outline in our *Conclusion* section five key considerations and starting strategies to help leaders, teams, individuals, and organizations on their way.

1. **Shift the understanding of mental health from an individual issue to a collective priority.**
2. **Get leadership buy-in and prioritization for mental health at work.**
3. **Equip leaders, managers, and employees to create supportive workplaces.**
4. **Prioritize healthy and sustainable ways of working.**
5. **Center diversity, equity, inclusion, and belonging in your mental health strategy.**



“Employees are increasingly drawn to resources that support them day-to-day versus temporary, Band-Aid solutions.”



Full Report:

I. The Prevalence of Mental Health Challenges at Work

Overall Mental Health And Prevalence Of Symptoms

To get a high-level understanding of mental health overall, we asked respondents “On average, how would you describe your mental health in the past year?” using a scale from 0 to 10.*

The percentage of those rating their mental health between 0 to 3 doubled between 2019 (5%) and 2021 (10%), and those who rated 7 to 10 decreased 14% from 2019 (78%) to 2021 (67%).

Mental health is a spectrum of experiences—from general stress, to mental health symptoms, to diagnosable conditions. To explore mental health prevalence more inclusively, we used an abridged version of the Mental Health Screening Form III—a clinically validated screening tool—to understand the types of symptoms that workers were experiencing. Additionally, we added the WHO’s definition of burnout to this measure to gauge the prevalence of burnout symptoms.

We found that **76% of full-time U.S. employees reported at least one symptom of a mental health condition in the past year—a 29% increase from 2019 (59%).** The most commonly reported symptoms were:

*0 = “Extremely challenged; nonfunctional or extreme symptoms for almost all of the past year.”
10 = “Perfectly healthy; no challenges at all.”

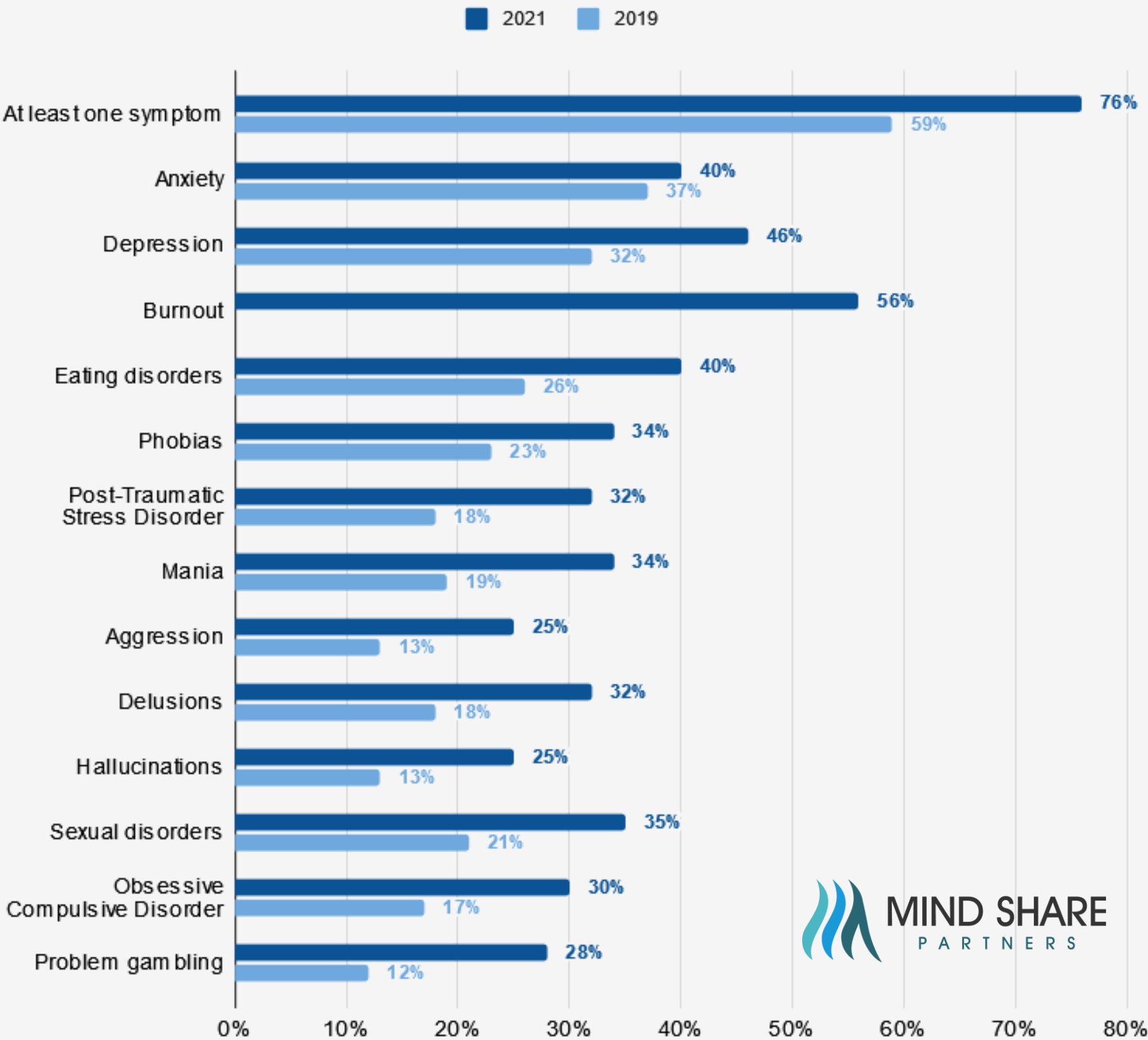
- **Burnout.** 56% reported experiencing symptoms of burnout (no 2019 comparison).
- **Depression.** 46% reported symptoms of depression—44% more than in 2019 (32%).
- **Anxiety.** 40% reported symptoms of anxiety—8% more than in 2019 (37%).
- **Eating disorders.** 40% reported symptoms of eating disorders—54% more than in 2019 (26%).
- **Phobias.** 34% reported symptoms of phobias—48% more than in 2019 (23%).
- **PTSD.** 32% reported symptoms of PTSD—78% more than in 2019 (18%).

Women and nonbinary respondents, younger generations (i.e., Millennials and Gen Z), caregivers, and historically underrepresented groups including LGBTQ+, transgender, Black, and Latinx respondents were all significantly more likely to experience at least one mental health symptom, as well as symptoms of anxiety, depression, and burnout. Similarly, the legal, financial services, and tech industries tended to report at least one symptom at higher rates than other industries, as well as symptoms of depression and burnout.*

Additionally, executive (82%) and C-level (78%) study respondents were actually more likely to report at least one mental health symptom, compared to individual contributors (71%) and managers (71%). Individual contributors were most likely to report symptoms of depression, and managers, executives, and C-level leaders were more likely to report symptoms of burnout.

Prevalence of Mental Health Symptoms in the Past Year

[Download this graph \(PNG\) >](#)



* For detailed findings and numbers across demographic groups, check out our [supplementary document here](#).

Seniority levels may influence the nature of mental health challenges. However, it still remains true that these challenges are still highly prevalent across all seniority levels.

Overall, our findings capture a decline in overall mental health and the growing prevalence of mental health challenges in a vast majority of workers. This aligns with other recent reports, such as Kaiser Family Foundation’s poll in July 2020 that found that 4 in 10 U.S. adults reported symptoms of anxiety or depressive disorder.

Ultimately, these findings are a call to action for employers to think deeply and strategically around how workers are supported in regards to their mental health long-term.

Duration of Mental Health Symptoms

Mental health challenges are persisting for much longer, with over a third (36%) cumulatively lasting 5 to 12 months.

There was a considerable increase in the duration of symptoms from our 2019 to 2021 studies among those who reported at least one mental health symptom:

- 20% said their symptoms cumulatively lasted 1 week or less—61% less than in 2019 (51%).
- 44% said their symptoms cumulatively lasted 1-4 months—57% more than in 2019 (28%).
- 36% said their symptoms cumulatively lasted 5-12 months—71% more than in 2019 (21%).

In other words, mental health challenges are not only present in the workplace, but they persist for considerable periods of time. In fact, 80% of study respondents reported their symptoms

lasting over a month, with a third reporting half to the entire year. In particular, Black and mixed-race respondents along with women, nonbinary, and younger respondents all tended to report symptoms for longer durations of time.*

In summary, mental health challenges are increasingly an everyday experience at work, which necessitates a much more comprehensive, longer-term investment by organizations. However, right now, the most common corporate strategies we often see for employee mental health tend to be Band-Aid solutions, focusing on coping mechanisms and the temporary alleviation of symptoms, such as mental health days. To truly support mental health at work, organizations must normalize mental health as a universal experience and emphasize strategies that support employees day-to-day.

The Role of Work and the Work Environment on Mental Health

Mental health challenges are near-ubiquitous, but are oftentimes framed as a result of individual factors, such as the brain, biology, or one’s ability to cope. Individual factors, however, are incomplete parts of the larger picture of mental health overall. An abundance of research (1, 2, 3, 4) shows that our environments—including the workplace—have a direct impact on our mental health. In fact, unhealthy work environments have been shown to cause the onset of diagnosable mental health conditions, regardless of pre-existing conditions.

To explore this further, we asked respondents whether their work or work environment had a negative impact on their mental health.



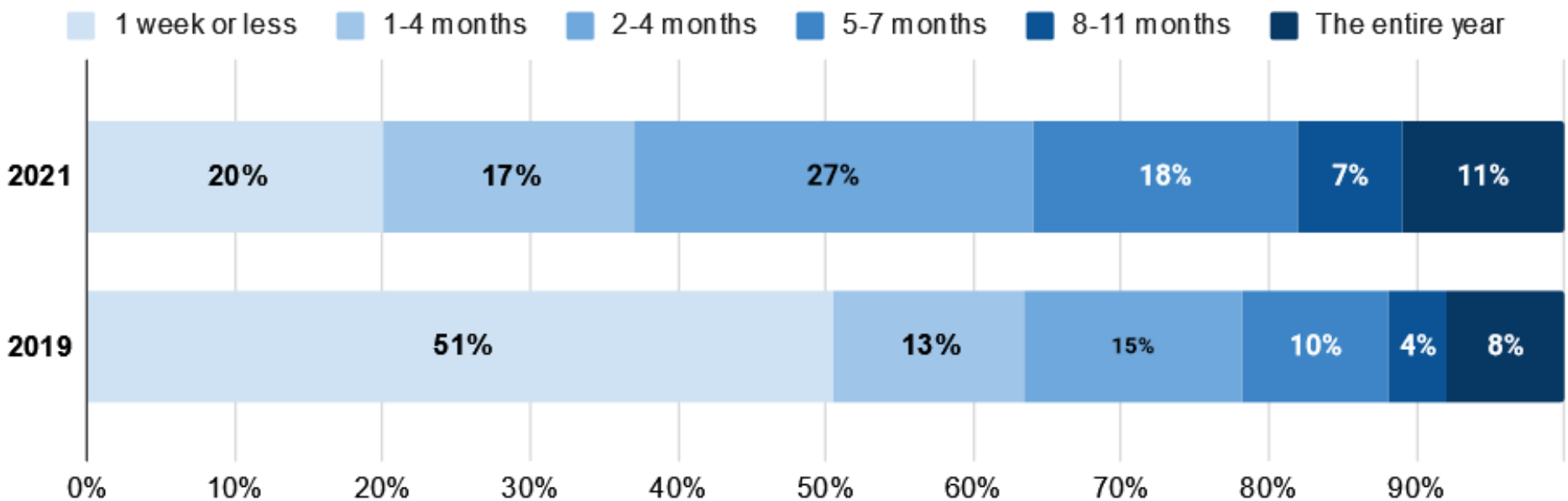
“36% of full-time U.S. workers reported mental health symptoms cumulatively lasting 5 months to the entire year.”

“84% of study respondents reported at least one workplace factor that had a negative impact on their mental health—the most common being emotionally draining work and challenges with work-life balance.”

“To truly support mental health at work, organizations must normalize mental health as a universal experience and emphasize strategies that support employees day-to-day.”

Duration of Mental Health Symptoms in the Past Year

[Download this graph \(PNG\) >](#)



* For detailed findings and numbers across demographic groups, check out our [supplementary document here](#).



Over half (53%) agreed—a 43% increase from 2019 (37%). Younger workers, caregivers, nonbinary, Black, Latinx, and LGBTQ+ respondents, and those working in legal, financial services, and tech industries were all more likely to report this relative to their counterparts.*

To better understand the nature of work environments and their role on mental health, we added a new measure to the 2021 study to measure the prevalence of common workplace factors tied to poor mental health, drawn from existing research (1, 2, 3, 4).

84% of respondents reported at least one workplace factor that had a negative impact on their mental health (no 2019 comparison). There were pronounced differences between generations, with 90% of Gen Z, 86% of Millennial, and 84% of Gen X respondents reporting at least one workplace factor, compared to 68% of Baby Boomer study respondents. LGBTQ+ respondents were also more likely (94%) to report at least one workplace factor, compared to non-LGBTQ+ respondents (81%).*

When looking across all respondents, **the most common workplace factors that negatively impacted mental health were:**

- **37% - Emotionally draining work** (e.g., stressful, overwhelming, boring, monotonous)
- **32% - Challenges with work-life balance**
- **25% - Lack of recognition** for the work I do
- **24% - Poor communication practices**

* For detailed findings and numbers across demographic groups, check out our [supplementary document here](#).

Our most commonly reported workplace factor, emotionally draining work, poses a striking concern about the growing impact of work itself on declining mental health. Overall, these findings align with [existing research](#) that finds stressful work, poor working conditions, and unhealthy work practices can cause poor mental health—even diagnosable conditions.

Contrary to this research, however, workplaces still often approach mental health as an individual’s issue, which translates to how they have historically invested in programs like benefits, time off, or self-care resources. While important, to truly support mental health at work, organizations must also invest deeply in cultivating healthy and sustainable ways of working for their employees.

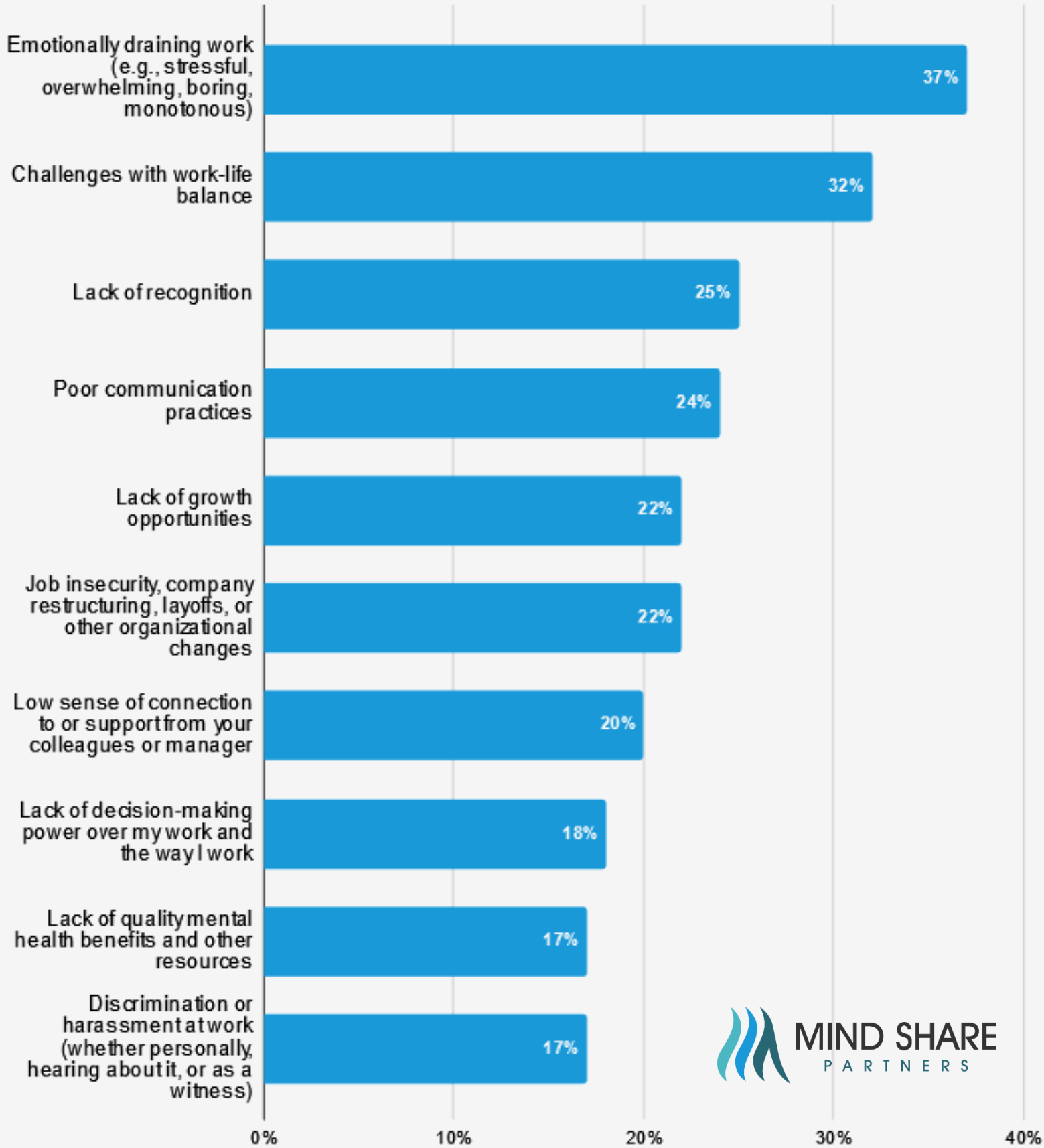
II. The Pandemic, Ongoing Racial Injustices, and Return to Office

The COVID-19 Pandemic and Mental Health

Given the world-shifting impacts of the events of 2020 into present day, we wanted to understand if and how employee mental health was impacted amidst these events—particularly from a workplace lens. 80% of study respondents reported working full-time in-person prior to the pandemic, and 54% reported working full-time in-person during the pandemic. This is aligned with broader national polls estimating roughly half of U.S. workers working remotely amidst the pandemic.

Workplace Factors that Negatively Impacted Mental Health in the Past Year

[Download this graph \(PNG\) >](#)



The most common workplace factors that **improved** since the pandemic were:

- **Discrimination or harassment at work*** (36% of respondents reported this factor improving since the pandemic). This is aligned with emerging research, finding that remote working may actually be benefiting the mental health of historically underrepresented and disenfranchised groups that experience forms of discrimination, microaggressions, and bias in the office.

* Whether they personally experienced it, heard about it, or witnessed it happening to someone else.
- **Challenges with work-life balance (35%).** Despite the challenges since the start of 2020, many workers reported benefits to the transition to remote working, particularly as workers have adjusted to this new mode of working over time. As employers begin moving towards their returns to office plans, they must also explore how they can preserve this growth in work-life balance to avoid the growing rates of employees leaving roles for their wellbeing.
- **Job insecurity, company restructuring, layoffs, or other organizational changes (35%).** This was surprising given many reports of unemployment and job insecurity amidst the pandemic and related economic decline. This finding may be due to our study timing where employment rates have improved since its initial decline early in the pandemic as well as our sampling full-time employees whose employment may have been less impacted, compared to part-time and other workers.

The most common workplace factors that **worsened** since the pandemic were:

- **Emotionally draining work (36%** of respondents report this factor worsening since the pandemic). This reflects reports showing employees are working longer and more abnormal hours amidst the pandemic, and further reinforces our previous findings (p.9) around work and workplace factors.
- **Low sense of connection to or support from your colleagues or manager (34%).** This was expected given the swift transition to remote work amidst the start of the pandemic and reflects many reports like Microsoft's Work Trend Index that found respondents' sense of connection to their teams declined over time through the pandemic.
- **Poor communication practices (32%).** While employees' *sense* of connection worsened, the same doesn't necessarily apply to connectivity itself. In the same Microsoft study, meetings, emails, and chats all increased amidst the pandemic. Another study by the *National Bureau of Economic Research* similarly found both the number of meetings and duration of the workday increased for workers.

Looking across specific communities, women were more likely to say “emotionally draining work” (41%) and “job insecurity” (38%) improved since the pandemic, compared to men (25% and 22%, respectively). Caregivers were more likely to report “lack of recognition” as improving (34%), compared to non-caregivers (21%). And finally,


managers, executives, and C-level respondents were more likely to report “low sense of connection or support from colleagues or your manager” (33%, 31%, and 55%, respectively) as well as “job insecurity” (43%, 40%, and 42%, respectively) as improving, compared to individual contributors (20% and 24%, respectively).

In summary, we are seeing the nature of work changing through the pandemic, with the greatest improvements observed for work-life balance while the greatest challenges were around work itself (i.e., “emotionally draining work”).

Still, the most consistent trend is that the way work changed differed across study respondents. There were relatively similar rates of those reporting workplace factors as having gotten better, stayed the same, or gotten worse. Thus, as employers continue supporting employees beyond the pandemic, they must ensure that they are tailoring their strategies to the unique needs of their people and ensuring these strategies are sufficiently inclusive and flexible.

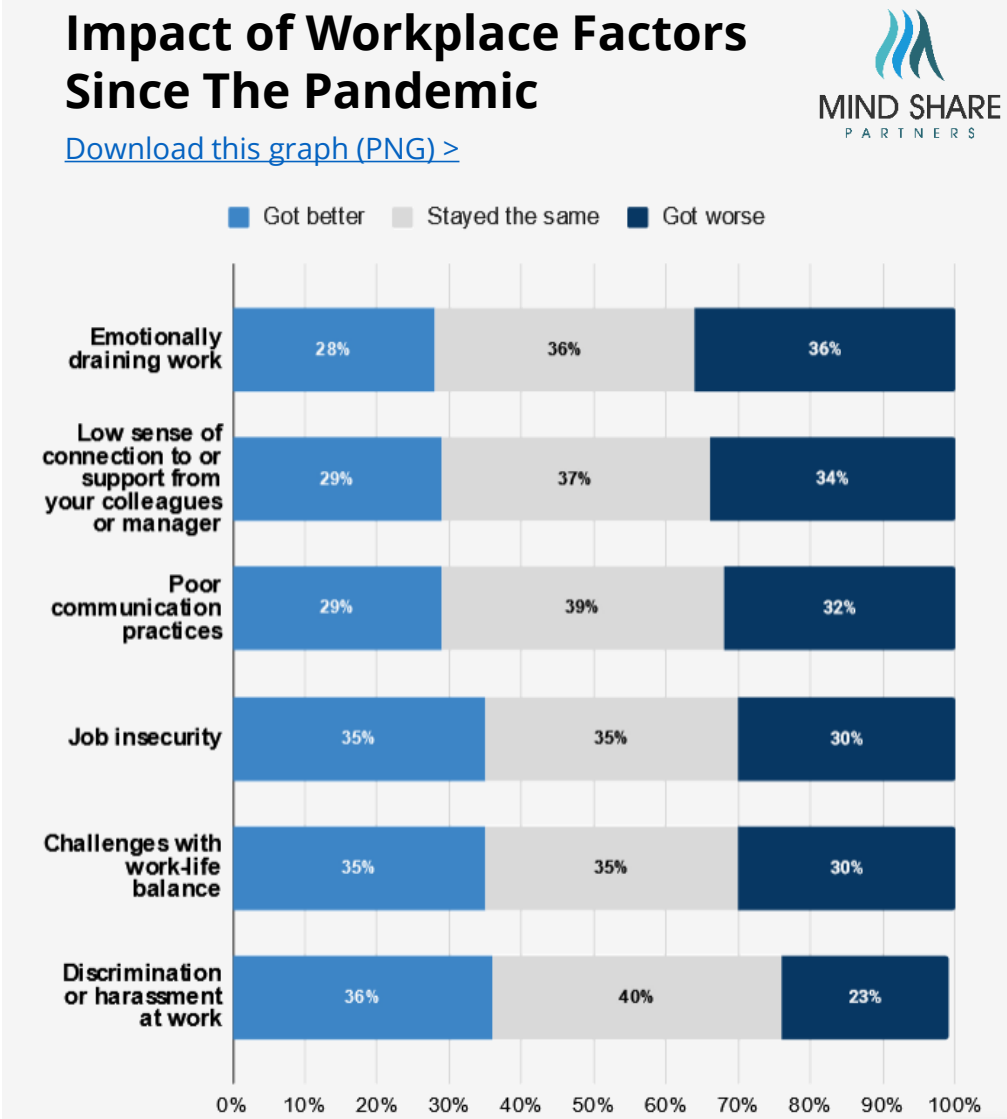
Return to Office

Many employers have already begun planning and executing their return to office plans. In our study, 62% of respondents said they expected to return to work full-time in-person after the pandemic. Employer plans and employee preferences, however, seem consistently mixed when it comes to fully remote, hybrid, or fully in-person work. Thus, we wanted to explore if and how employers’ return to office plans or activities had a negative impact on the mental health of their employees.



“The most common workplace factors that were exacerbated by the pandemic emotionally draining work, connection to colleagues, and poor communication practices.”

“The most common factors that improved since the pandemic were discrimination and harassment, work-life balance, and job stability.”



The most common ways employers' return to office plans negatively impacted employee mental health were:

- **41% - The policy itself around in-person vs. remote work after the pandemic**
- **37% - Lack of work-life balance or flexibility based on my company's policy**
- **31% - Lack of clarity about the return to work process or timeline**
- **30% - My company making a decision without input from employees**
- **28% - Lack of clarity or consistency about expectations around work, productivity, and related factors**

Most concerning is the topmost factor, "return to office policies themselves," negatively impacting employee mental health. **This means that many employers' plans aren't aligning with the wants and needs of their employees.** In fact, a growing number of reports show that nearly 40% of U.S. workers would plan on leaving their roles if full-time, in-person work were to be reinstated.

Return to office planning has a clear impact on employee mental health. Companies seeking to be leaders in workplace culture will inevitably need to embrace hybrid work and co-create hybrid solutions in partnership with employees to suit both individual and team needs. Flexibility and clear communications will be key as the workforce and the broader landscape of work and wellbeing change over time.

Racial Injustices and Mental Health Outcomes

It's clear that the pandemic and return to office plans are impacting employee mental health. But how do mental health and engagement outcomes differ between employees who felt supported amidst these events, compared to those who didn't? In the next section, we explore this question along with other events including the ongoing fight for racial justice.

The Role of Company Support Amidst Turbulent Times on Study Outcomes

While the ongoing events since early 2020 have had strong and persisting effects to employee mental health and the experience of work overall, support from employers made a meaningful impact on these outcomes.

In our study, we compared those who felt supported by their employer to those who *didn't* feel supported amidst each of the following events across key mental health, productivity, and engagement outcomes from our report:

- Mental health overall
- Pandemic and remote working
- Racial Injustices and trauma
- Return to office

Each of these were measured as distinct segmentations, but when we looked across our study outcomes, common themes began to arise.

Those who felt supported by their employer across these events tended to be:

- **Less likely to experience mental health symptoms.** E.g., those who felt supported amidst the pandemic were:
 - 19% less likely to experience a mental health symptom (75% vs. 89%).
 - 45% less likely to experience their symptoms for 5 - 12 months (33% vs. 48%).
- **Less likely to underperform and miss work.** E.g., those who felt supported amidst their company's return to office plans:
 - Were 11% less likely to say their productivity was negatively impacted by their mental health (79% vs. 88%).
 - Operated at 10% higher of their full capability on average (72% vs. 65%).
 - Reported less than half of the days they underperformed in the past year due to mental health (10 days vs. 25 days).
- **More likely to feel comfortable talking about their mental health at work.** E.g., those who felt supported amidst the ongoing racial injustices were roughly 2x more likely to feel comfortable talking about their mental health to their colleagues (1.9x), manager (2x), and HR (2.1x).
- **More satisfied with their job and more likely to stay.** E.g., those who felt supported amidst the pandemic were:
 - 2.4x as likely to be satisfied with their job.
 - 2x as likely to intend to stay at their company for 2+ yrs.

- **More likely to have positive views of their company and its leaders.** E.g., those who feel supported by their employer overall when it came to mental health at work were:
 - Over 5x as likely to say they trust their company (79% vs. 14%).
 - Over 3x as likely to be proud to work at their company (83% vs. 24%).
 - Over 3x to say that mental health is prioritized at their company, compared to other priorities (73% vs. 20%).
 - Over 3x to say that their leaders are advocates for mental health (64% vs. 18%).
 - Over 3x to say that their manager is equipped to support them with their mental health (62% vs. 20%).



"Those who feel supported by their employer around the pandemic, racial injustices, return to work, and with their mental health overall are:

- **Less likely to experience mental health symptoms**
- **Less likely to underperform and miss work**
- **More comfortable talking about mental health at work**
- **More satisfied with their job and more likely to stay**
- **More likely to have positive views of their company and its leaders"**

There are clear, positive impacts on mental health, productivity, and engagement outcomes when employees feel supported both overall and amidst trying times. It's important to also recognize that these outcomes are based on *perceived support* by employees. A company can have comprehensive benefits and the latest perks, but if employees do not feel supported, it's unclear whether these outcomes will arise.

Social and Political Topics at Work

As organizations have grown their investment in diversity, equity, and inclusion work in recent years, conversations about social and political topics are similarly becoming commonplace at work. In response, some companies have opted to ban these conversations entirely. Thus, we wanted to explore this topic to see whether this has an impact on mental health, productivity, and employee experience.

We asked study respondents if they felt comfortable talking about political and social topics at work. 54% agreed, while 4% were not allowed to at all. We then segmented key outcomes from our study, comparing those who were not allowed to talk about political and social topics at their company entirely to those who could—regardless of comfort level.

Respondents who were *not* allowed to talk about political and social topics were:

- **Roughly half as likely to feel comfortable talking about mental health at work** to their colleagues, manager, and HR (all 0.6x less likely) as well as senior leaders and the CEO (0.4x less likely).

- **Less likely to have positive views of their employer.** In fact, they were 2.5x more likely to *not* trust their company and its leadership, compared to those who were allowed to regardless of comfort level (40% vs. 16%).
- **Less satisfied with their job** (48% vs. 75%).
- **3x as likely to *not* feel supported by during the pandemic** (11% vs. 34%).

While our study did not observe tangible impacts on the actual prevalence and duration of mental health symptoms for employees based on the ability to talk about political or social topics at work, we saw very clear impacts on organizational culture elements, including employees' comfort levels talking about their mental health and perceptions of their employer and leaders.

Research shows that these cultural factors tied to the stigma around mental health are key factors in enabling or preventing employees from seeking support for mental health. Thus, when operating in environments without this safety and openness—particularly amidst turbulent times—employees may be less likely to seek help. And as a result of unsupported and unaddressed mental health challenges, employers face losses in productivity, engagement, and retention.

III. The Impact of Mental Health on Productivity and Engagement

Mental Health and Productivity

From our previous findings (p.9), it's clear that both work and the work environment can impact our

mental health. Similarly, our mental health can impact work and productivity as well, particularly when mental health go unsupported or unaddressed. In fact, experts project the global cost of mental health to be \$16 trillion USD by 2030.

In our study, we asked study respondents whether their productivity at work was impacted by their mental health. 77% agreed—a 26% increase from 2019 (61%). Female, nonbinary, Gen Z, Millennial, Black, Latinx, Asian or Pacific Islander, mixed-race, LGBTQ+, transgender, and caregiver respondents were all more likely to report this. Additionally, respondents from the legal, financial services, and tech industries as well as managers and executives were also more likely to say this.

The most common ways productivity was impacted were:

- **38% - Difficulty concentrating—**a 31% increase from 2019 (29%).
- **32% - Avoiding social activities—**a 33% increase from 2019 (24%).
- **24% - Difficulty thinking, reasoning, or deciding—**a 26% increase from 2019 (19%).
- **23% - Being less responsive to email and other communications—**a 64% increase than in 2019 (14%).
- **21% - Taking longer to do tasks—**a 31% increase from 2019 (16%).

To further explore the relationship between mental health and work, we measured three dimensions of productivity and engagement.



“77% of full-time U.S. workers said their productivity at work was impacted by their mental health in the past year—a 26% increase from 2019 (61%).”

“Respondents who were not allowed to talk about political and social topics were half as likely to feel comfortable talking about mental health at work, over 2.5x more likely to not trust their company and its leadership, and over 3x as likely to not feel supported by their employer during the pandemic.”

Attrition

We asked study respondents whether they had ever left a previous role at a company due, at least in part, to mental health reasons. **50% of study respondents have left a previous role due, at least in part, to mental health reasons—47% more than in 2019 (34%).**

In fact, 32% reported having ever left a role *voluntarily* due, at least in part, to mental health reasons—a 45% increase from 22% in 2019.

There were pronounced differences between generations. **81% of Gen Z and 68% of Millennial respondents reported having left previous roles due, at least in part, to mental health reasons**, while only 12% of Baby Boomers and 38% of Gen X respondents reported doing so. This trend similarly applied to historically underrepresented groups like LGBTQ+, trans-gender, Black, and Latinx respondents, respondents working in the legal, financial services, and tech industries, and those in manager, executive, or C-level roles. This trend across groups persisted when considering voluntary departures as well.*

These findings are clear indicators that employers are facing huge losses to talent due to unsupported mental health. In fact, workers are increasingly leaving voluntarily, paralleling growing reports around “The Great Resignation,” where workers are choosing to leave their jobs to prioritize their mental health and overall wellbeing. What’s more, this trend is particularly

* For detailed findings and numbers across demographic groups, check out our [supplementary document here](#).

salient among historically underrepresented workers, new talent, and the current largest generation in the workforce—Millennials.

Knowing the role of workplace factors on mental health, we also wanted to explore whether these same workplace factors included in our study played a role in why respondents left.

The most common factors reported when considering attrition due to mental health reasons were: *(no 2019 comparison)*

- **Emotionally draining work (32%** reported this as a factor for why they left a previous role due to mental health reasons)
- **Low sense of connection to or support from your colleagues or manager (29%)**
- **Poor communication practices (26%)**
- **Discrimination or harassment (26%)** Whether personally, hearing about it, or witnessing it happen to someone else.
- **Lack of recognition for the work I do (25%)**

These outcomes reinforce our previous findings (p.9) that both work itself and organizational culture factors play significant roles in workplace mental health, whether it be employees’ experience of work or their reasons for leaving.

Absenteeism

We asked respondents how many days of work they missed in the past year due to mental health reasons. **Respondents reported missing an average of 8 days of work in the past year—**an 85% increase from 2019 (4.3 days). In a similar vein, we saw an increase in those who missed at

least one day of work due to mental health, with 59% of respondents saying this in 2021—a 48% increase from 2019 (40%). More concerning, we saw significant growth on the higher end of absenteeism, with **17% of respondents missing more than 10 days of work due to mental health—5.7 times more than in 2019 (3%).**

These findings suggest two possible trends: employees are struggling and turning to time off as a way to take care of their mental health. Simultaneously, this may also suggest a broader cultural trend around greater awareness and acceptance for taking care of our mental health, making it safer and more normal for employees to take time off for mental health reasons.

Presenteeism

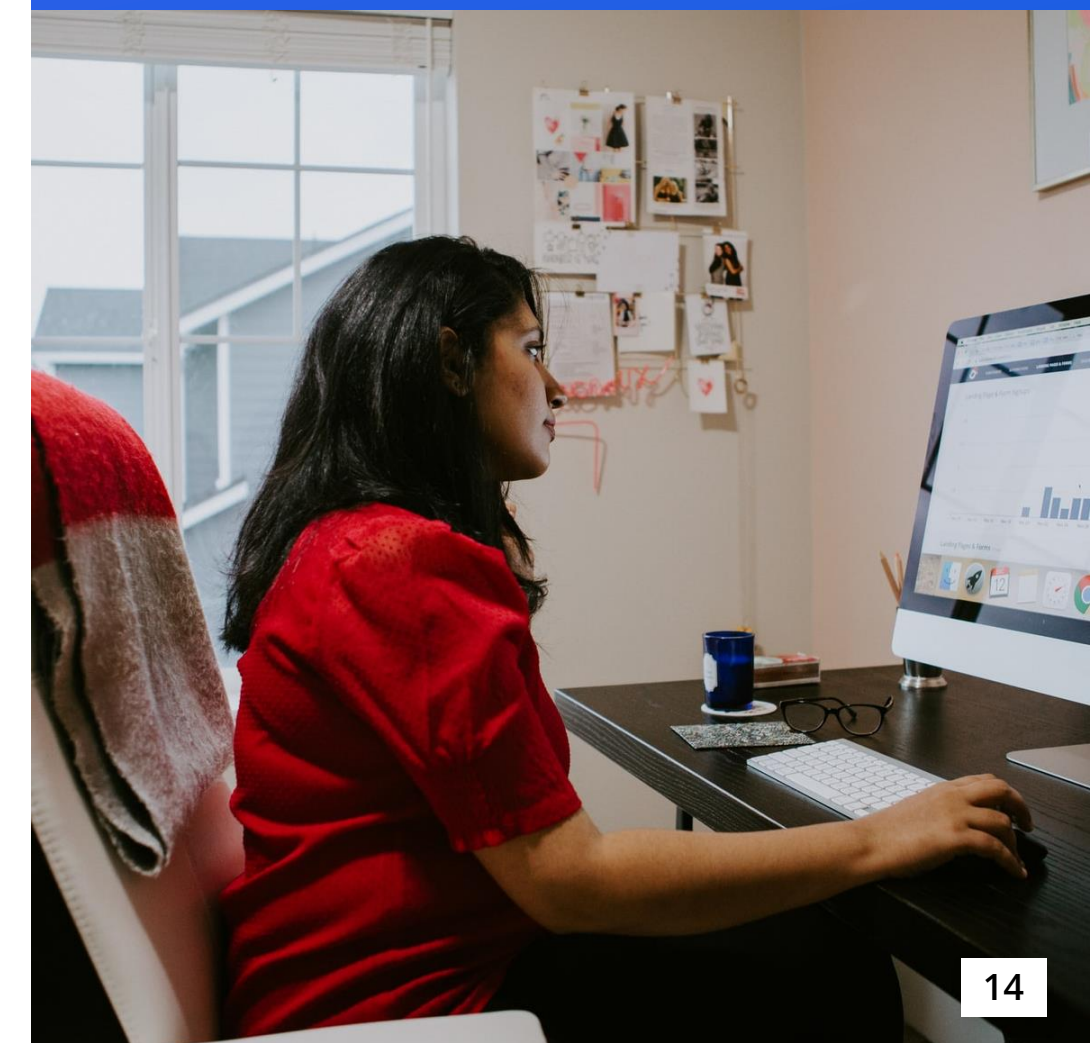
Finally, we introduced a new measure for our 2021 study—what percent of respondents’ full capability they were able to perform at work on average, considering their mental health in the past year. **On average, study respondents reported performing at 72% of their full capability in the past year** when considering their mental health. In other words, employers are losing 28% of employee productivity due to unsupported mental health challenges.

Those among historically underrepresented groups like LGBTQ+, transgender, Black, Latinx, and female respondents were all significantly more likely to report lower rates of working their full capability due to mental health. The same trend appears for younger workers, managers and executives as well as respondents in the legal, financial services, and tech industries.*



“50% of study respondents have left a previous role due, at least in part, to mental health reasons. In fact, 32% had done so voluntarily.”

“81% of Gen Z and 68% of Millennial respondents have left previous roles due, at least in part, to mental health reasons.”



It's worth noting that the negative impacts to productivity are not inherently tied to the mental health challenges themselves. Oftentimes, mental health challenges go unsupported due to lack of access, stigma, and other reasons. In the next section, we explore how workers are getting support for their mental health and why others aren't.

IV. Getting Support for Mental Health at Work

Historically, employers have encouraged workers to take care of their mental health by leveraging benefits and EAPs—a mere sliver of the broader ecosystem of support that employees can rely on. Knowing this, we sought to explore a few different dimensions of support-seeking for mental health.

Comfort Talking About Mental Health at Work

Roughly 37-41% of study respondents feel comfortable talking about their mental health to other colleagues, their manager, and HR.

To start, we asked respondents whether they felt comfortable talking to a variety of stakeholders in the workplace setting.

Overall, comfort levels talking about mental health grew from 2019 to 2021 in talking to...

- **41% - Colleagues**—46% more than 28% in 2019.
- **40% - Managers**—38% more than 29% in 2019.
- **37% - HR**—48% more than 25% in 2019.
- **37% - Senior leaders**—48% more than 25% in 2019.
- **36% - Their CEO**—50% more than 24% in 2019.

There was consistent and substantial growth in comfort levels talking to all stakeholders from our 2019 study, ranging 24-29%. This is an optimistic trend and reflects growing openness around discussing mental health in workplaces.

Additionally, Black, LGBTQ+, trans, and surprisingly, male respondents were *more* comfortable talking about their mental health to all stakeholders, offering a unique opportunity for internal advocates for both mental health and diversity, equity, inclusion, and belonging.

Millennial respondents were more comfortable talking about their mental health specifically to their colleagues, manager, and HR. Gen X and Baby Boomer respondents, on the other hand, were more comfortable talking to their CEO. Notably, Asian or Pacific Islander, Native American, and mixed-race respondents tended to be least comfortable talking about mental health at work.*

Despite the growth in comfort levels overall, over half of respondents still don't feel entirely comfortable talking about their mental health to others at work.

This is particularly concerning for comfort levels talking to colleagues, managers, or HR—stakeholders workers are most likely to turn to for support. This flags a persisting need to continue cultivating a culture of safety in workplace settings through broader advocacy, manager training, and communications.

Recency Talking About Mental Health at Work

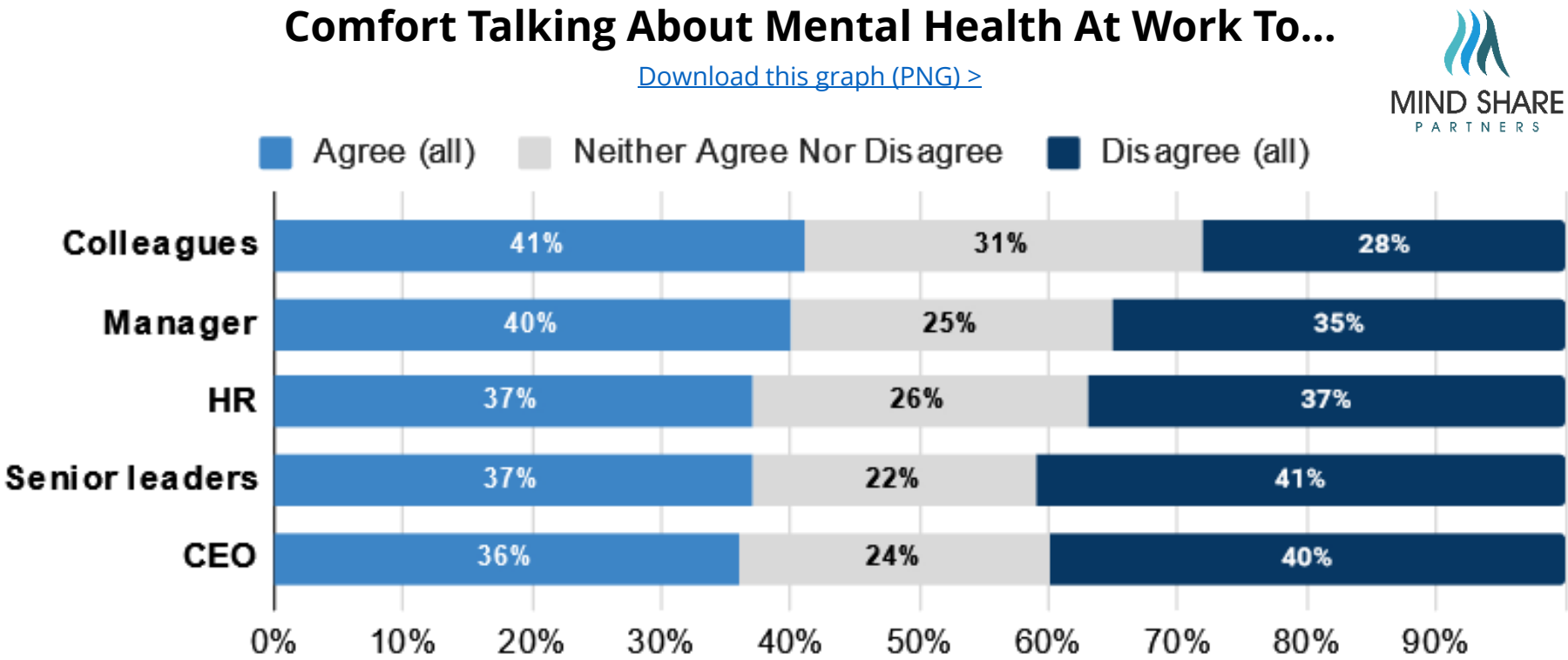
While we saw greater comfort in talking about mental health at work, do we see a similar growth in these conversations actually happening? Fortunately, yes. **Two-thirds (65%) of respondents had talked about their mental health to someone at work in the past year**—a 63% increase from 2019 (40%). **More people are doing so recently, too, with a fifth (22%) having talked in the past week**—more than double than in 2019 (9%).

Younger workers, caregivers, nonbinary, Black, Latinx, LGBTQ+ and trans respondents, respondents who were managers and executives, and those in the legal, financial services, and tech industries were all more likely to have talked about their mental health to someone at work in the past month, compared to their counterparts. Asian or Pacific Islander, Native American, and mixed-race respondents were all less likely than white respondents to have talked about their mental health at work in the past month.*



“Less than half of full-time U.S. workers feel comfortable talking about their mental health to other colleagues, their manager, and HR.”

“Two-thirds (65%) of full-time U.S. workers have talked about their mental health to someone at work in the past year. 22% had in the past week, which was more than double than in 2019 (9%).”



Overall, this paints a more optimistic picture. While many study respondents didn't entirely feel comfortable talking about their mental health at work, these conversations are still happening and happening on an increasingly recent basis. Whether 1:1 between colleagues or from an executive to all employees in an all-hands meeting, every conversation is an opportunity to not only normalize mental health at work but to move towards action in supporting employees, teams, and workplaces alike.

Experience of Talking About Mental Health at Work

The final step in exploring conversations about mental health at work is understanding the nature of these conversations themselves. Thus, we asked study respondents, "What was the experience like talking to someone at your company about your mental health?"

Roughly half (49%) of respondents described their experience of talking about mental health at work as positive—comparable to in 2019 (48%). 29% of respondents described the experience as neutral—comparable to in 2019 (30%)—and 14% described the experience as negative—again, comparable to in 2019 (15%).

That said, women, nonbinary respondents, younger workers, LGBTQ+, Latinx, Asian or Pacific Islander, Native American, and mixed-race respondents, respondents from the legal industry, and individual contributors and managers all tended to be less likely to report receiving a positive or supportive response.*

This finding paints a less optimistic trend.

Not only did only half of respondents receive supportive responses when talking about mental health at work, but these rates remained stagnant from 2019 to 2021.

Additionally, members of historically under-represented communities are experiencing lower rates of supportive interactions.

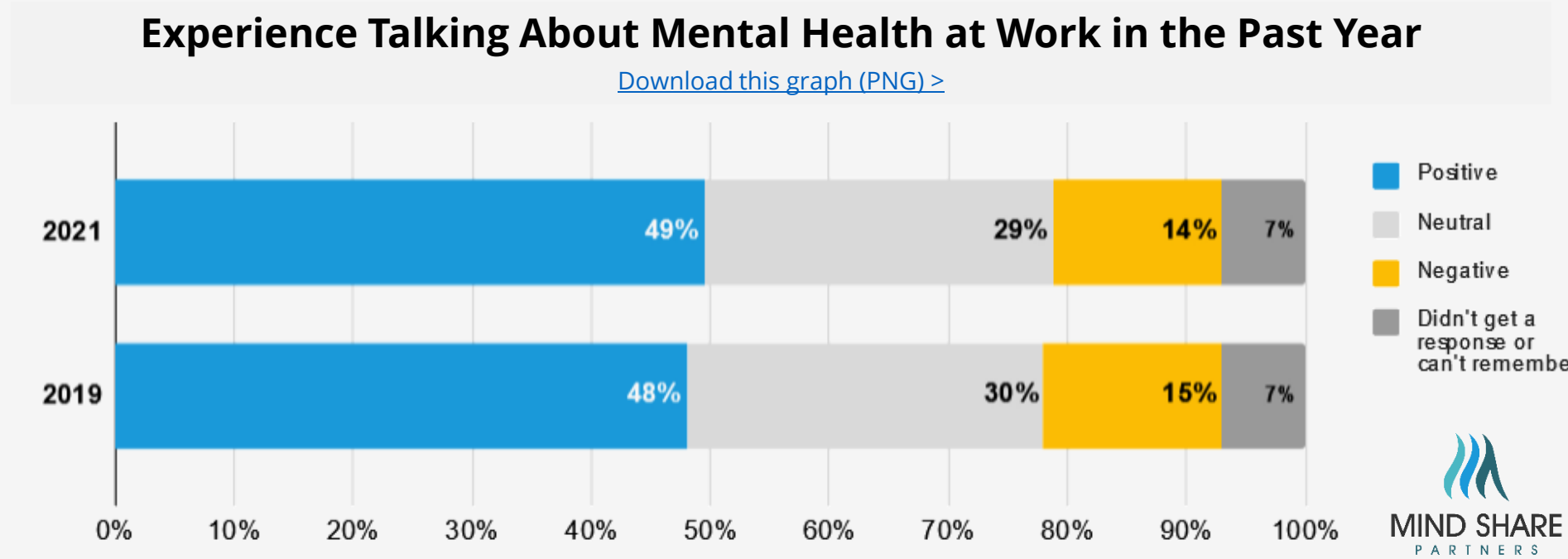
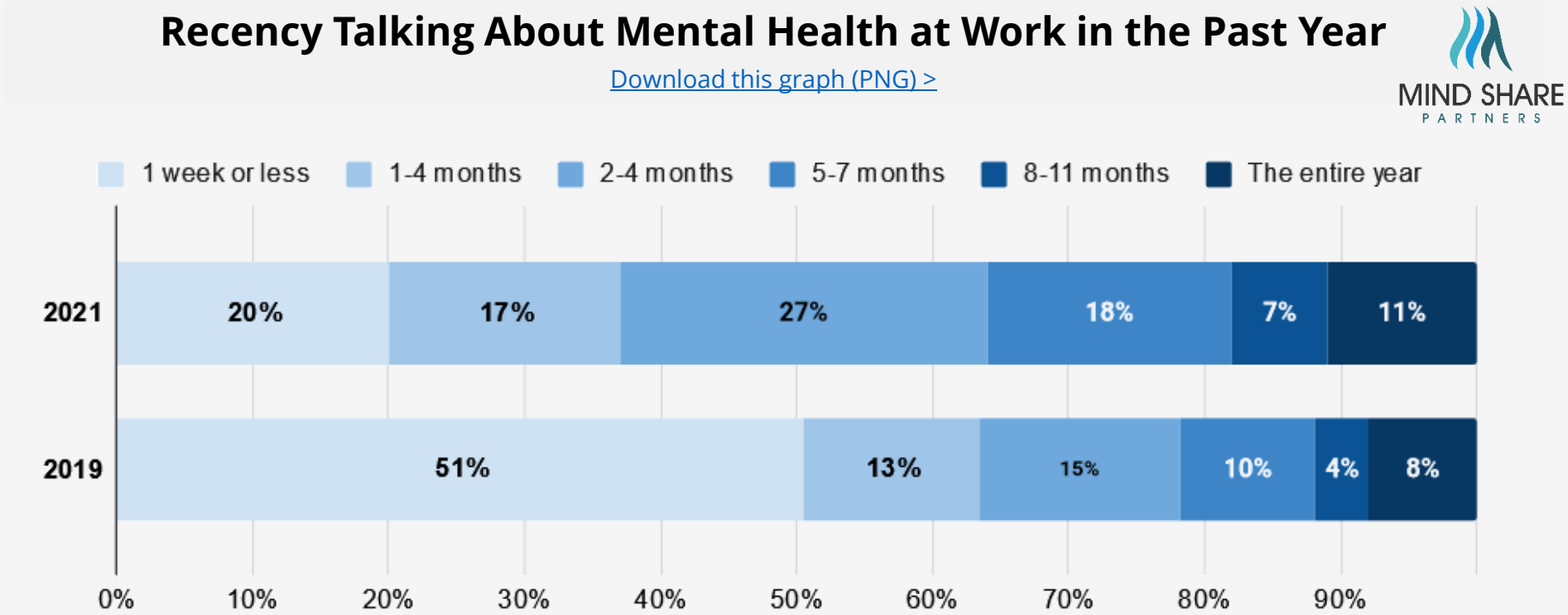
As the prevalence of mental health challenges and frequency of conversations about mental health have similarly grown, it is even more important that these conversations are safe, productive, and supportive, especially if an employee is opening up about their mental health for the first time. The nature of these conversations may determine whether an employee continues to seek support from others at work, and negative experiences are likely to increase the sense of stigma and shame, thereby reducing the likelihood of getting treatment or other support.

Supporting Others

Moving from seeking support to giving support, we asked respondents if they felt comfortable with a colleague or someone who worked for them approaching them to talk about their mental health. Over half (59%) were—a 5% decrease from 2019 (62%).

The most common reasons for *not* reaching out to a struggling colleague were:

- **40% - Feeling awkward; no right place or time**—no change from 2019.
- **40% - Not wanting to offend someone or make them feel uncomfortable**—no change from 2019.



* For detailed findings and numbers across demographic groups, check out our [supplementary document here](#).

- **25% - Not sure how to start the conversation or what to say**—comparable to in 2019 (28%).
- **26% - Not wanting to intervene in their personal struggles**—comparable to in 2019 (25%).

Similar to our previous findings, we were surprised that the prevalence of these obstacles to supporting others persisted from 2019 to 2021 despite many more individuals experiencing mental health challenges themselves. The reported obstacles to reaching out reflect individuals' lack of confidence, skills, and language. Thus, employers have an opportunity to equip employees and teams with the knowledge and skills through education (such as training) as well broader awareness-building activities to continue normalizing talking about mental health at work.

Diagnosis and Treatment

When we asked study respondents about their treatment history, we saw optimistic increases in those having sought treatment in the past as well as workers' openness to treatment, whether or not they were personally experiencing mental health challenges:

- **Diagnosis. 38%** of all respondents reported having ever been diagnosed with a mental health condition by a clinical professional in the past—a 58% increase from 2019 (24%).
- **Treatment. 42%** of all respondents reported having ever received treatment for a mental health condition in the past—a 62% increase from 2019 (26%).

* For detailed findings across demographic groups, check out our [supplementary document here](#).

- **Openness to treatment. 70%** of all respondents reported being open to treatment for a mental health condition—an 11% increase from 2019 (63%).

These numbers are aligned with [an analysis](#) by McKinsey in September 2020 that found that the COVID-19 pandemic may result in a 50% increase in prevalence of mental health conditions.

Looking across demographic groups, younger respondents, caregivers, respondents from historically underrepresented groups including Black, Latinx, LGBTQ+, and trans respondents, and respondents from the legal, financial services, and tech industries were all more likely to have been diagnosed as well as treated for their mental health, compared to their counter-

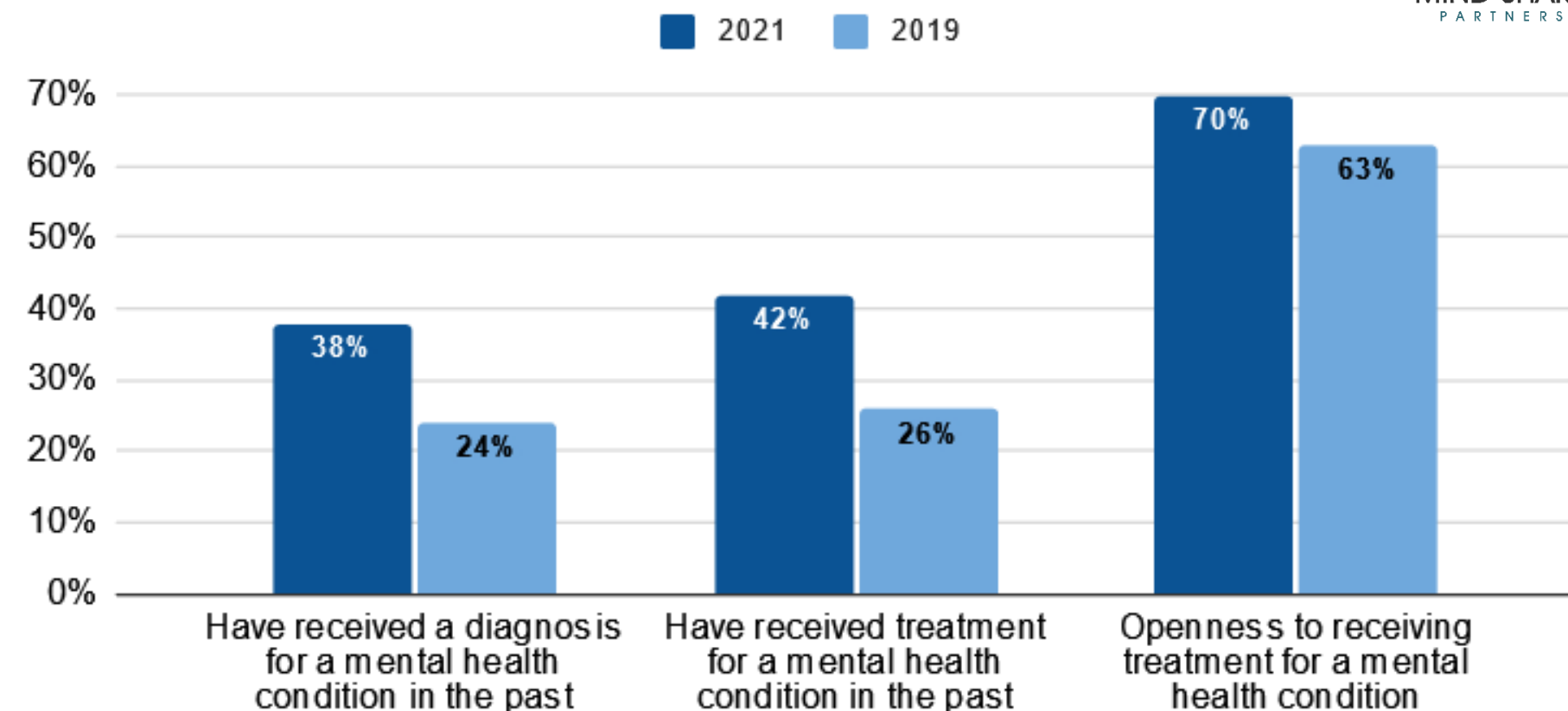
parts (with the exception of white respondents having similar rates of having been treated).

Notably, Asian or Pacific Islander respondents were the least likely to have been diagnosed (23%) or gotten treatment (26%), compared to other races and ethnicities. That said, we did not see significant differences in *openness* to treatment across groups, with the exception of caregivers, LGBTQ+, and trans respondents being more open, compared to their counterparts.*

Given the growth in both access to care and openness to care, employers must also explore the adequacy of their benefits. This includes quality of care, cultural competency, and accessibility of care given heightened demand across the nation. Ways to improve these include reducing the cost

Diagnosis & Treatment of Mental Health Conditions

[Download this graph \(PNG\) >](#)



of individual therapy sessions, increasing the number of free therapy sessions provided, expanding the list of covered therapists and providers, or adding supplemental teletherapy services and additional options. Simultaneously, companies must also ensure employees are both aware and comfortable using these benefits. In fact, research has shown that employees don't use mental health benefits without explicit support from their manager or organization.

Obstacles to Self-Care

The greatest obstacles that kept respondents from more proactively taking care of their mental health were culture factors, like leaders not promoting it and mental health not being talked about at work.

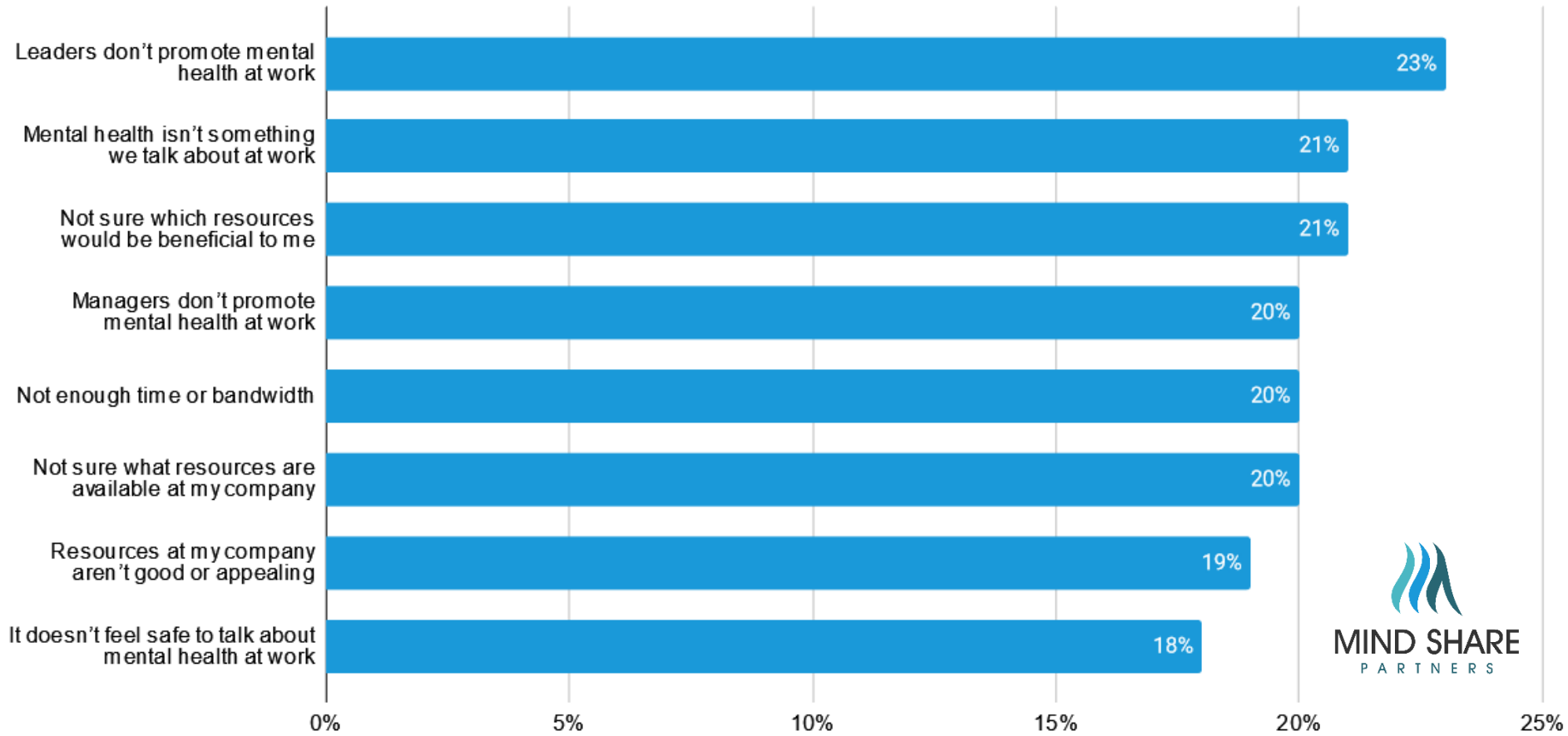
Thus far, we've seen several ways individuals can seek support for their own mental health. Still, we see many continue to struggle. In our 2021 study, we wanted to better understand what keeps individuals from being more proactive around taking their mental health care at work, hoping the insights would help inform employers of opportune strategies for increasing utilization of resources and other support systems.

When presented with a list of common obstacles to self-care, the most commonly reported reasons were: (no 2019 comparison)

- 23% - Leaders don't promote mental health at work.
- 21% - Mental health isn't something we talk about at work
- 21% - Not sure which resources would be beneficial to me

Obstacles to Being More Proactive Around Taking Care of One's Own Mental Health

[Download this graph \(PNG\) >](#)



- 20% - Managers don't promote mental health at work
- 20% - Not enough time or bandwidth
- 20% - Not sure what resources are available at my company

Younger workers were more likely to report leaders not promoting mental health at work as an obstacle, with only 15% of Baby Boomer respondents reporting this obstacle, compared to 29% of Gen Z, 26% of Millennial, and 21% of Gen X respondents. Additionally, respondents from historically underrepresented groups were all more likely to cite not being sure which resources would be beneficial to them as an

obstacle to self-care, including LGBTQ+, trans-gender, Black, Latinx, and Asian or Pacific Islander respondents. The same trend appeared for caregivers and younger respondents as well.

These trends highlight the unique needs and challenges faced by these groups. Resources and benefits are not a one-size-fits-all solution, nor are the available options made clear to employees. Ultimately, looking to the future, employers must continue to explore robust, tailored, and inclusive offerings for an increasingly diverse workforce.*

* For detailed findings across demographic groups, check out our [supplementary document here](#).



“The most commonly reported obstacle to being more proactive around mental health self-care was leaders not promoting mental health at work.”



V. Organizational Culture and Support for Mental Health at Work

Individuals seeking support for their own mental health is just one part of the broader ecosystem of support. Organizational culture plays another significant role, as many of our previous findings suggest. In fact, raising awareness and culture-based approaches to mental health support tend to show the greatest ROI at up to 6:1 compared to reactive, treatment-focused approaches at 3:1.

In our 2021 study, we explore a variety of dimensions relating to organizational culture as it pertains to workplace mental health.

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Overall Organizational Support

61% of study respondents believed that, overall, their company supports their mental health (no 2019 comparison). While this is a majority of respondents, it still leaves significant room for improvement in reaching a point where all employees feel like their company supports their mental health.

Company Support for Individuals with Mental Health Conditions

While many organizations are encouraging mental health or “wellbeing” more broadly, these efforts often fail to name more challenging experiences like diagnosable mental health conditions. In fact, one recent study found that many corporate “wellness” offerings resonate more with already-healthy employees and alienate those managing more challenging health issues, both physical and mental.

In our study, 56% of study respondents believed that their company supports employees with mental health conditions— 22% more than in 2019 (46%). This is a promising shift towards safer and more supportive cultures for mental health. That said, we see slightly less perceived support for individuals with mental health conditions in this measure (56%), compared to our previous finding in perceived personal support for mental health overall (61%). This discrepancy is an important reminder that any mental health strategy must recognize the full spectrum of mental health, beyond general wellness, to also support more challenging experiences as well.

Mental Health as an Organizational Priority

While organizations may verbally encourage mental health at work, these sentiments don’t always translate to meaningful change in employees’ experience at work. In this study, **54% of study respondents believed that mental health was actually prioritized at their company, compared to other priorities—**32% more than in 2019 (41%). Similar to our previous finding, the 32% growth is a promising outcome, reflecting a cultural shift for mental health at work. That said, we still see the same discrepancy in overall support from our previous measure versus true prioritization of mental health, suggesting that there is still work to be done in making true mental health support a priority for employees at work.

Leadership as Advocates for Mental Health

Leaders play a key role in setting the tone for an organization’s culture. As we saw in a previous finding (p.18), organizational leaders not promoting mental health at work was the topmost reason for why respondents were not more proactive in taking care of their own mental health.

In our study, 47% of study respondents believed that their company leaders were advocates for mental health at work— 27% more than in 2019 (37%). Yet again, we see promising growth in these cultural indicators for mental health at work. An increasing number of employees are navigating mental health challenges for longer periods of time in highly

The global law firm Morrison & Foerster’s commitment to workplace mental health training prior to the pandemic positioned them well to navigate the uncertainty that has unfolded.

In a [Harvard Business Review article](#) offering ways managers can support employee mental health, Stacey Sprenkel, a partner at Morrison & Foerster, shared how she “proactively told her teams that she was working odd hours because of her childcare responsibilities and invited them to share what they needed to work best during the pandemic.” Modeling this new flexibility helped normalize the expectation for her teams.

[Continue reading >](#)



unprecedented and unpredictable times. It's now ever more important that leaders are deeply involved in proactively and consistently creating safe and supportive environments for mental health in the workplace by encouraging support-seeking, normalizing self-care behaviors, and setting norms around healthy work practices.

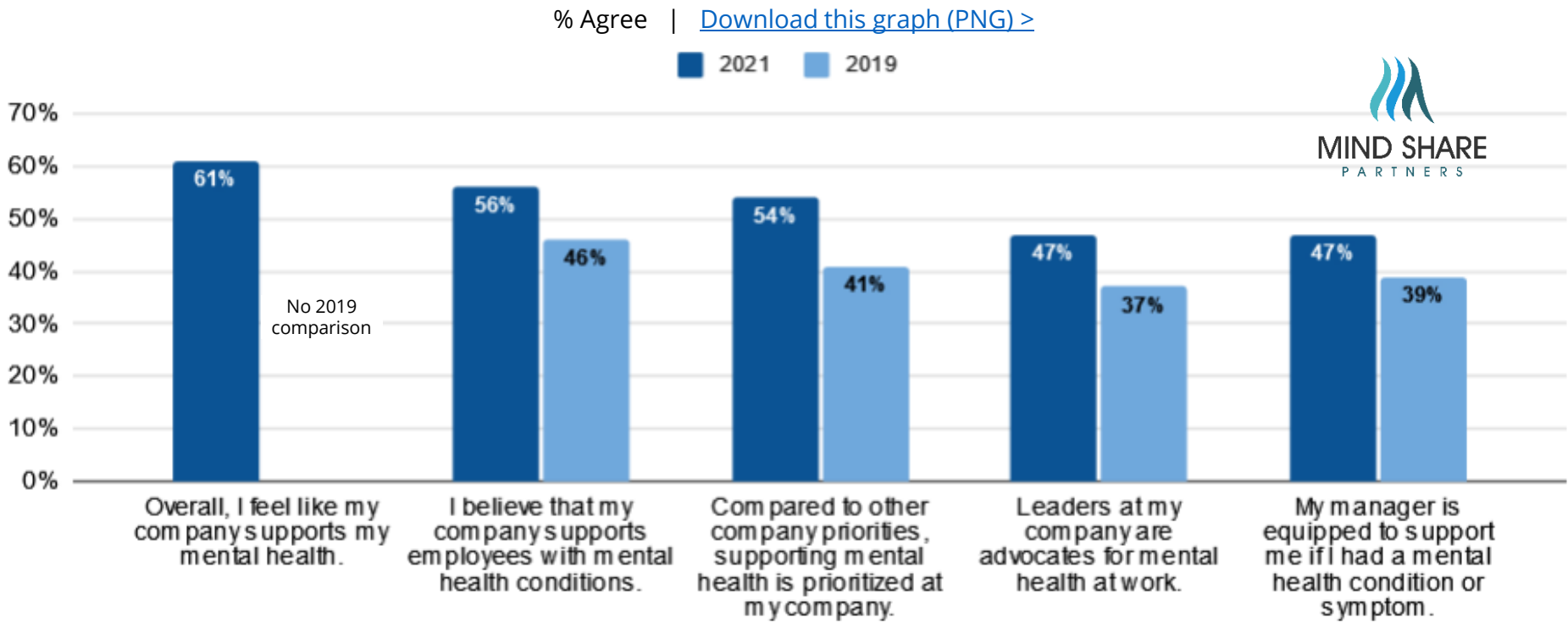
Manager Support

Finally, we move from the organization and leadership to managerial support. While leaders play critical roles in the overall tone and culture of an organization, managers shape employees’ day-to-day experience of work itself, including work load, communications, norms around work, and more.

47% of respondents believed their manager was equipped to support them if they had a mental health condition or symptom—21% more than in 2019 (39%). This is aligned with our previous finding (p.15), where only 40% of study respondents felt comfortable talking to their manager about their mental health.

Consistent with our findings, we are seeing optimistic growth in the support felt by employees—this time, from their managers. That being said, there is still significant room for improvement. This is especially true in light of our previous finding (p.10) where 84% of respondents reported at least one workplace factor that negatively impacted their mental health, and knowing that managers can play a meaningful role in shaping employees’ experience of work.

Organization, Leadership, and Manager Support for Mental Health



Demographic outcomes for organizational culture and support.

Across these measures in organizational, leadership, and manager support, we tended to see the most positive views coming from male, Millennial, Black, LGBTQ+, trans, and caregiver, respondents as well as and respondents from the legal, financial service, and tech industries. Notably, individual contributors were *least* likely to express these views.*

Still, overall, this is an optimistic trend given that younger workers, underrepresented communities, and respondents from the legal, financial service, and tech industries all tended to face greater challenges with mental health and the work environment on mental health.

* For detailed findings across demographic groups, check out our [supplementary document here](#).



“47% of respondents believed their manager was equipped to support them if they had a mental health condition or symptom—21% more than in 2019 (39%).”

“47% of study respondents believed that their company leaders were advocates for mental health at work—27% more than in 2019 (37%).”



VI. Attitudes and Stigma Around Mental Health

From our findings, it's clear that mental health challenges are increasingly the norm and not mere “blips” in time. However, many individuals often don't seek treatment or support. This idea of “stigma” is a common, albeit frequently undefined topic in the broader conversation around workplace mental health. Generally, stigma can be defined as the actual, perceived, or anticipated negative views, attitudes, or treatment of individuals with a mental health challenge. At work, this can show up as viewing those with any sort of mental health challenge as weak, unpredictable, dangerous, or incapable.

Combating the stigma of mental health is critical. Not only has research has shown stigma discourages individuals from seeking support and treatment, but stigma itself can cause declines in mental health and physiological health like immune system functioning.

In our 2021 study, we measured a variety of common dimensions around mental health stigma to gauge the overall perceptions and attitudes of study respondents towards mental health in workplace settings.

Willingness to Hire or Work with Individuals with Mental Health Conditions

58% of study respondents were willing to hire or work with someone with a mental health condition—26% more than in 2019 (46%).

While there is still substantial room for improvement, the 26% growth is an optimistic trend in the reduction of stigmatizing views towards mental health in the workplace.

Perceptions of Ability

55% of study respondents believe that an employee with a mental health condition could be just as productive as one without—6% more than in 2019 (52%). Again, there is still a significant opportunity in reducing stigmatizing views such as these, particularly in the ability of organizational leaders to influence these perceptions. It is important to recognize that the impact of mental health in performance and other work-related outcomes is often due to stigma itself and the lack of proper resources and support for these individuals rather than the conditions themselves.

Personal Relationships with Individuals with Mental Health Conditions

Stigma can also manifest through the lack of social contact with individuals managing mental health challenges or conditions, whether due to intentional avoidance and distancing from these individuals or these individuals hiding their own challenges from others out of fear.

To better understand this, we asked our study respondents whether they personally knew someone with a mental health condition:

- **55% said they knew someone personally**—10% more than in 2019 (50%).
- **43% said they knew someone personally at work**—34% more than in 2019 (32%).

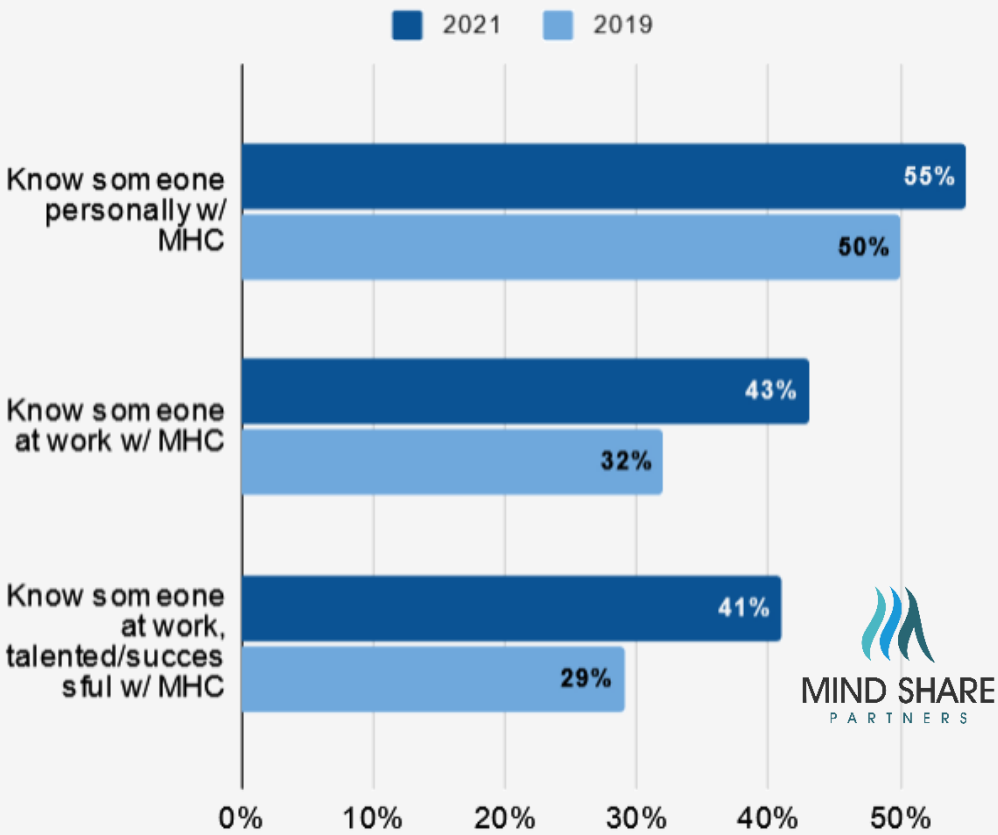
- **41% said they knew someone personally at work who they also considered talented or successful**—41% more than in 2019 (29%).

Optimistically, the discrepancy in exposure to those with mental health conditions between respondents' personal lives vs. at work grew slightly smaller from 2019 (18%) to 2021 (12%). We are hopeful that this reflects a growing sense of safety in those sharing about their mental health challenges in the workplace setting.

Similarly, the discrepancy between “knowing someone at work with a mental health condition” versus “knowing someone at work with a mental

Awareness & Personal Relationships with Individuals with Mental Health Conditions (MHC)

[Download this graph \(PNG\) >](#)





"When searching for a new job at a company, 91% of study respondents believe that the company's culture should support mental health—a 6% increase from 2019 (86%)."

"54% of study respondents believe that mental health is a diversity and inclusion issue—32% more than in 2019 (41%)."



health condition who they also consider talented or successful" remained very small (only 2% in 2021 and 3% in 2019). Again, this is an optimistic trend. In other words, **most of those who personally know colleagues managing a mental health condition also consider them talented or successful.** We are hopeful that positive views such as these—and making these views widely known—can create a sense of safety for those who may be struggling and hopefully encourage support-seeking as a result.

Importance of Mental Health

Another dimension of stigma is the perceived importance or value of mental health in the workplace setting. In less supportive environments, mental health can be seen as superfluous, unimportant, or even detracting from focusing on business or work itself.

When searching for a new job at a company, 91% of study respondents believe that the company's culture should support mental health—a 6% increase from 2019 (86%).

Similar to our other key findings, we saw significant differences in the perceived importance of mental health among younger generations, caregivers, and historically underrepresented groups that included LGBTQ+, transgender, Black, Latinx, Asian or Pacific Islander, mixed-race and respondents—all of whom were more likely to believe a company should support mental health at work.*

* For detailed findings across demographic groups, check out our [supplementary document here](#).

Not only is supporting mental health important from an attrition and retention perspective (as indicated in our previous measure), but mental health is increasingly playing a larger role in recruitment. This is particularly important as we consider the ongoing and projected "Talent War." Over half of North American employees are planning to look for a new job in 2021 as surveyed by the *Society for Human Resources Management*. For employers to remain competitive in attracting and retaining top talent, they must invest in meaningful strategies to support employees' mental health.

Mental Health as a Diversity, Equity, and Inclusion (DEI) Issue

54% of study respondents believe that mental health is a diversity and inclusion issue—32% more than in 2019 (41%). This is likely a result of both growing cultural awareness around DEI issues as well as the racial trauma reignited by the events of 2020. Unsurprisingly, younger generations, caregivers, and those from historically underrepresented groups including LGBTQ+, transgender, Black, Latinx, and Asian or Pacific Islander respondents were all more likely to see mental health as a DEI issue.*

At Mind Share Partners, we often frame mental health as the next frontier of the DEI movement. Not only is mental health intrinsically tied to people's experiences based on their identity, cultural background, and other demographic factors, but mental health can also be considered a DEI subcategory in and of itself. In 2020 in particular, we saw the clear impact that the

murders of Black Americans by police and rise in anti-Asian violence amidst the pandemic had on Black and Asian or Pacific Islander workers.

It's ever more important for organizations to approach mental health as an intersectional issue. This can look like a variety of things, like ensuring a robust network of culturally competent mental health providers, creating space for conversations about mental health for specific communities within employee resource groups (ERGs or affinity groups), or deepening accountability practices for equitable hiring and advancement practices.

Ultimately, mental health at work—like DEI—must be approached intentionally, proactively, and consistently across an organization's policies and practices, as well as intersectionally to center underrepresented voices within the broader conversation of workplace mental health.

VII. Resources for Mental Health at Work

We have talked about the social and cultural components of a mentally healthy workplace. Now, we move to explore the resources offered by companies to employees. In our study, we define "resources" broadly to include formal programs and offerings like benefits and EAPs, as well as culture elements and activities like communications about said resources or an overall supportive culture for mental health.

For most measures included in this section, study respondents selected from a list of common mental health resources.

Resources Used

First, we asked study respondents what resources they personally used in the past year that their employer provided to them. Overall, we saw an increase in the use of most resources.

The most commonly used resources for mental health were:

- **32% - Training on skills related to your job**—9% less than in 2019 (35%).*
- **27% - Mental health training**—59% more than in 2019 (17%)
- **22% - Spending one-on-one time with those I manage or work with**—23% than in 2019 (17%).
- **22% - Health insurance coverage for mental health**—no change from 2019.
- **21% - Clear or available information about where to go or who to ask for support or information about mental health within my company**—40% more than in 2019 (15%).

That said, the resources that saw the greatest growth in use from 2019 to 2021 was mental health training, growing 59% from 2019, indicating greater investment by employers in raising awareness for mental health and equipping their employees to navigate mental health at work.

* This was included as a mental health “resource” given the role that work, job preparedness, and self-efficacy has on mental health.

It is worth noting here, however, that the content and quality of mental health trainings can be highly variable. Some emphasize learning about mental health conditions and challenges themselves; others focus on noticing “warning signs” and navigating crisis situations; and others still may emphasize self-care practices like mindfulness and meditation.

As companies continue to explore this type of offering, it is important that these trainings cover the right topics, including understanding mental health in a workplace context, cultivating a safe and supportive organizational culture for mental health, strategic considerations for leaders and managers, navigating common mental health scenarios, and going deep into the relationship between mental health and workplace factors.

Accommodations

Similar to formal resources for mental health are accommodations—company-sanctioned adjustments to an individual employee’s work or work environment to support them (commonly in the context of disability).

In our 2021 study, we provided a list of common accommodations for mental health and asked respondents whether they had personally used them in their current role and company.

From 2019 to 2021, we only saw minor growth in the overall use of accommodations, with **68% of respondents reporting having used at least one accommodation at work for their mental health**—a 13% increase from 60% in 2019.

The most commonly used accommodations were:

- **21% - Taking time off, vacation, or PTO**—no change from 2019.
- **18% - Flexible hours**—a 157% increase from 2019 (7%).
- **16% - Time in your work schedule for therapy appointments**—a 300% increase from 2019 (4%).
- **15% - Given support with workload**—a 150% increase from 2019 (6%).
- **15% - Regular check-ins with manager**—a 200% increase from 2019 (5%).
- **15% - Coaching or mentoring**—a 275% increase from 2019 (4%).

The accommodations that saw the greatest growth from 2019 to 2021 were:

- **550% increase - Extended or more frequent breaks from work** (2% in 2019 and 13% in 2021).
- **333% increase - Adjustments to how you communicate with others and how often** (3% in 2019 and 13% in 2021).
- **300% increase - Time in your work schedule for therapy appointments** (4% in 2019 and 16% in 2021).
- **275% increase - Coaching or mentoring** (4% in 2019 and 15% in 2021).
- **250% increase - Adjustments to organization, workflow, or team collaboration** (4% in 2019 and 14% in 2021).
- **200% increase - Regular check-ins with your manager** (5% in 2019 and 15% in 2021).



“Mental health trainings need to go beyond self-care or “noticing the warning signs.” Employees need to understand mental health in a workplace context, how to cultivate a safe and supportive organizational culture for mental health, and how to develop and maintain a sustainable culture of work.”



Notably, we see significant growth in the use of accommodations that support employees' day-to-day experience of work such as flexible hours, workload support, and regular check-ins. This contrasts the ways we typically see organizations supporting mental health at work, which are often temporary and time-bound, such as time off "mental health days." And while companies investing in mental health days amidst the pandemic have frequently made headlines, it's promising to see employees exploring ways to support their mental health day-to-day.

Resources Provided During the Pandemic

Next, we sought to understand how employers supported workers specifically in response to the pandemic and remote working. We asked study respondents what kind of support they received from their company a) prior to March 2020 when the pandemic and remote working began and b) after March 2020, presenting respondents with a list of common mental health and pandemic-related resources (e.g., extra paid time off).

Since March 2020, we saw an increase in resources provided across the board. Resources that saw the most growth in provisions since the pandemic were:

- **Company communications about work and productivity** during the pandemic – 59% growth from before March 2020 (29%) to after March 2020 (46%).
- **Extra paid time off** - 55% growth before (22%) to after (34%).

- **Resources or flexibility for caregiving** amidst the pandemic - 46% growth from before (26%) to after (38%).
- **Company-wide mental health days** - 41% growth from before (22%) to after (31%).
- **Messages of support for mental health from senior leaders** - 37% growth from before (27%) to after (37%).
- **Mental health training** - 33% growth from before (24%) to after (32%).

The resources that saw the least growth in provisions since the pandemic were:

- **Company communications about mental health and wellbeing** - comparable from before March 2020 (37%) to after (35%).
- **Encouragement of setting boundaries** (e.g., not working too late, not checking email after hours, etc.) - no change from before (32%) to after (32%).
- **Regular check-ins with my manager** - comparable from before (32%) to after (33%).
- **Encouragement to use company resources for mental health** - comparable from before (31%) to after (34%).
- **Encouragement of self-care resources for mental health** - comparable from before (31%) to after (35%).

Many companies have increased their investment into tangible resources and activities around work-life balance, mental health, and wellbeing. However, it's equally important that organizations invest in workplace culture to not only ensure employees feel able and empowered

to leverage these support systems, but also to minimize the impact of work and the work environment itself on mental health.

Resources Wanted

We then asked respondents what resources they most wanted that their company did not currently provide to gauge the most in-demand resources as well as unmet needs.

The most desired resources for mental health at work were:

- **31% - An open culture about mental health at work**—a 29% increase from 2019 (22%).
- **** 31% - On-site therapist**—a 23% increase from 2019 (24%).
- **** 30% - Mental health app**, such as coaching, meditation, or sleep support—a 27% increase from 2019 (22%).
- **** 29% - Mindfulness training**—a 24% increase from 2019 (22%).
- **28% - Employee Resource Group for health, disability, or mental health**—a 21% increase from 2019 (22%).
- **28% - Clear or available information about where to go or who to ask for support or information about mental health** within my company—a 21% increase from 2019 (22%).

Paralleling the growth in utilization of mental health resources, we observe an increase in resources desired across the board, which reflects both the increase in prevalence of mental health symptoms as well as the growing



The most desired “resource” for workplace mental health was an open culture about mental health at work.



importance of mental health to U.S. workers. The most desired resource that also had the greatest growth from 2019 to 2021—an open culture about mental health at work—reflects our conversation thus far on the importance of organizational culture and work environment on employee mental health. It also reflects broader trends where employees are increasingly prioritizing mentally healthy culture elements, such as work-life balance and flexibility, over perks like catered lunches or in-office yoga.

Finally, it is worth noting that while the asterisked resources (**)—on-site therapists, mental health apps, and mindfulness training—were among the most desired in this measure, they were also the top resources that respondents reported *not* wanting. The polarizing sentiments suggest a mixed desire for these resources among employees. Thus, companies must think deeply around what resources will make a meaningful, positive impact for their people.

Awareness of Resources

While a company may provide a robust portfolio of resources for mental health at work, it is equally important that employees are aware of how to access that support. Despite greater investment and support from organizations, leaders, and managers in 2020 to 2021, it seems that many employees still lack clarity around getting support and accessing resources at work for their mental health.

In our study, 50% of respondents knew the proper procedure to get support for mental health at work—comparable to 51% in 2019.

It's worth noting here that even if employees are aware of the resources available, a report by NAMI states that employees will be reluctant to use these benefits unless they perceive that their supervisor or the organization as a whole is supporting the use of the benefits, further reinforcing the importance of the broader organizational culture around mental health.

Obstacles to Providing Resources

Finally, we wanted to explore what workers perceived as the greatest obstacles to offering more resources and investment in supporting mental health at work.

When provided with a list of common obstacles to offering more resources, **80% of respondents reported at least one obstacle—7% more than in 2019 (75%).**

The most common obstacles offering more resources and investment in supporting mental health at work were:

- **29% - Lack of knowledge or understanding of workplace mental health**—comparable to in 2019 (28%).
- **25% - Lack of professional expertise on the topic**—comparable to in 2019 (23%).
- **26% - Lack of time commitment**—comparable to in 2019 (23%).
- **25% - Lack of trust among employees; doesn't feel safe to talk about it**—47% more than in 2019 (17%).
- **24% - Leaders don't want to talk about mental health**—33% more than in 2019 (18%).

These findings present an interesting juxtaposition. While we saw an overall 7% decline in reporting any perceived obstacle to providing resources, rates for individual obstacles increased. We speculate that this may be a result of greater attention, focus, and understanding of supporting mental health at work. Thus, some study respondents may understand more clearly that there are truly no obstacles to exploring greater investment in mental health resources, while others may be more aware about the intricacies around implementation and access, and thus more aware of such obstacles when present.



"Only half of full-time U.S. workers knew the proper procedure to get support for mental health at work. While providing resources for mental health at work is important, it's equally important that employees are clear on how to access that support."



Conclusion:

The Future Is Workplace Mental Health—Where Do We Go From Here?

The future of workplace mental health is culture change—no longer are the days of superfluous perks. Workplace mental health is how we live, work, and breathe both in and outside of our organizations.

Based on the findings of this report, we’ve outlined five key considerations and starting points as we move towards action in creating mentally healthy workplaces.

1. Shift the understanding of mental health from an individual issue to a collective priority.

“Culture” may feel like an ambiguous, amorphous, and challenging idea to work towards. However, it’s crucial for leaders and employees alike to understand that the relationship between mental health and work is fundamentally built into the people and systems of the organization. One way we frame culture at Mind Share Partners is through our Ecosystem of a Mentally Healthy Workplace Framework.

Ultimately, what this comes down to is moving away from the idea that supporting employee mental health is merely the provision of resources to cope. It’s about reinforcing the narrative that everyone within an organization has a role in

influencing and changing the broader culture around work and mental health. It’s baked into the way leaders think and treat their workers as people; how a company’s policies protect employees from overwork; and the way a team flexibly navigates turbulent times amidst competing demands while caring for its people.


More formal accountability practices like tracking and measurement can supplement these broader efforts. However, organizations must do this thoughtfully. Is an increase in benefits utilization a result of poor mental health? Or a reduction in stigma? Or reflecting a broader fear of getting support more interpersonally like checking in with managers and team members? Tracking mental health outcomes can be helpful, but awareness, stigma, and skills surrounding mental health at work are all equally important.

Regardless of the individual approach, program, or mechanism for change, workplace mental health must be addressed strategically. It needs to be prioritized across teams, functions, and seniority levels, and baked into the way an organization operates.

- A few resources to help get you started:
- [\[Download\]](#) “Frameworks for Creating Mentally Healthy Workplaces & Programs,” a free toolkit by Mind Share Partners
 - [\[Read\]](#) “Companies Are Embracing Empathy to Keep Employees Happy. It’s Not That Easy,” TIME
 - [\[Read\]](#) “What Wellness Programs Don’t Do for Workers,” Harvard Business Review

The Ecosystem of a Mentally Healthy Workplace

People			Accountability
Leaders understand, visibly support, and normalize mental health.	Managers are proactive in supporting mental health and know how to respond to challenges.	All employees are aware of the mental health supports available.	Mental health goals are measured, tracked, and iterated on to meet the needs of the organization.
Daily practices and working norms are supportive of mental health.			Clear ownership over mental health strategy and goals.
Systems	Policies name mental health and support mental health goals.		Strategy, programs, and practices are inclusive.
	Benefits are high-quality, well-understood, and accessible.		


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[Download our toolkit “Key Frameworks for Success: Creating Mentally Healthy Workplaces and Programs”](#)



2. Get leadership buy-in and prioritization for mental health at work.

Leaders set the tone for their organizations. This is true for mental health, stigma, and the broader culture of work. In fact, employees won't use mental health resources without support from their manager or the organization. And this is especially true amidst turbulent or unpredictable times.

As we consider the future of workplace mental health, leaders must play a meaningful role in driving and shaping an organization's mental health strategy, including, but not limited to:

- Sharing their own mental health story to normalize mental health experiences and make it okay to talk about it at work.
- Modeling healthy work practices to set an example for other leaders and the rest of the organization.
- Expanding or creating a dedicated budget for workplace mental health.
- Participating in a cross-functional steering committee to drive mental health strategy and maintain accountability.
- Acting as an executive sponsor for an employee resource group (or affinity group) for mental health.

Regardless of the approach, leaders must be closely involved in creating and shaping the vision of any mental health strategy.

A few readings to help you get started:

- [\[Read\]](#) "You Don't Have To Work 80 Hours A Week To Be Successful, Shopify CEO Says," *CNBC*
- [\[Read\]](#) "The Boss Factor: Making The World A Better Place Through Workplace Relationships," *McKinsey*
- [\[Read\]](#) "How CEOs Can Support Employee Mental Health In A Crisis," *Harvard Business Review*
- [\[Read\]](#) "Leading Through Anxiety: Inspiring Others When You're Struggling Yourself," *Harvard Business Review*
- [\[Read\]](#) "Leaders, Don't Be Afraid To Talk About Your Fears And Anxieties," *Harvard Business Review*

3. Equip leaders, managers, and employees to create supportive workplaces.

Many organizations—including many HR and people teams—aren't formally trained in navigating mental health scenarios, let alone developing a comprehensive culture strategy for workplace mental health.

As we've seen in our report, mental health training is an increasingly common offering from companies, and it's critical that these trainings cover the right topics. **Focus on topics like cultivating a safe and supportive team and organizational culture for mental health, navigating common mental health scenarios in compassionate ways, and understanding the relationship between mental health, workplace factors, and DEI. Organizations should also consider training across seniority levels, including employees, managers, and senior leaders. This helps each stakeholder understand their unique role in broader culture change.**

Conversely, be careful around overemphasizing "noticing warning signs" in others or self-care

practices like mindfulness and meditation. "Noticing warning signs" puts employees in a precarious situation in diagnosing their peers. And while self-care tools can be helpful for individuals, they reinforce the narrative of mental health as a personal issue and neglect the clear impact that work and the workplace environment has on mental health. We have seen greater success in focusing on the broader culture of safety, support, and sustainable work.

A few readings to help you get started:

- [\[Read\]](#) "5 Essentials When Implementing Mental Health Training," *Mind Share Partners in Training Mag*
- [\[Read\]](#) "8 Ways Managers Can Support Employees' Mental Health," *Harvard Business Review*

4. Prioritize healthy and sustainable ways of working.

When we think about mental health at work, we often think about storytelling and raising general awareness. This is critical, but only a part of the picture. We must not forget that a mentally healthy workplace is also about adapting the way individuals, teams, and organizations work and think about work. We have recently seen organizations offering "mental health days" as a way to mitigate burnout, but fewer have spent time understanding how their culture of work itself may be driving burnout or how mental health days may actually reinforce a toxic cycle of coping and overwork.



There are many elements to healthy and sustainable ways of working. A few core ideas to consider that we have synthesized from academic literature (1, 2, 3, 4) include:

- **Work-life balance.** In what ways can we keep work from negatively impacting employees' lives outside of work? How are boundaries formally established and clearly communicated to team members?
- **Flexibility and autonomy.** In what ways can we empower employees with the autonomy to work when and how they work best?
- **Norms.** In what ways can our team align on a common understanding around work, communications, deadlines, and other work norms to ensure clarity? How do we do this while being inclusive of individual working styles and flexibility?
- **Resources and capacity.** How do we ensure that individuals and teams have the time, energy, bandwidth, and resources to not only do their job effectively but remain healthy?
- **Connection.** In what ways are we facilitating healthy, productive, and meaningful interactions among team members? How do we avoid toxic behavior? How do we have hard conversations that are still productive? And how do we address positive intent that has negative impacts?

A few readings to help you get started:

- [\[Read\]](#) "What You're Getting Wrong About Employee Burnout," *Mind Share Partners in Forbes*

- [\[Read\]](#) "The Futility Of Mental Health Days," *Mind Share Partners in Forbes*
- [\[Read\]](#) "Burnout Is About Your Workplace, Not Your People," *Harvard Business Review*

5. Center diversity, equity, inclusion, and belonging in your mental health strategy.

Many events since early 2020 have highlighted the urgent need for intersectional conversations around mental health. From the murders of George Floyd, Breonna Taylor, Eric Gardner, and countless others to American Asian and Pacific Islanders amidst the surge of anti-Asian violence during the pandemic, our identities shape our experience of mental health, stigma, organizational culture, and work itself.

Understanding this and how different programs and strategies for mental health within an organization differentially benefit employees is critical. This could look like ensuring a robust directory of diverse and culturally competent mental health providers. It can also be staying attuned to the conversations in [employee resource groups](#) or affinity groups (e.g., for women, people of color, LGBTQ+ employees, etc.) to understand the unique needs of these communities as they pertain to mental health and the culture of work at your organization.

We've discussed before that mental health at work requires a deep investment in a healthy and sustainable culture of work itself. Similarly, centering DEI within the conversation about mental health goes beyond talking about cultural differences. It means ensuring that different groups or cultures aren't framed as backwards or "less than" in conversations

about mental health. It also means tackling the bigger questions of inequity and exclusion in how underrepresented and disenfranchised communities are treated, hired, promoted, and paid.

A few readings to help you get started:

- [\[Read\]](#) "Navigating DEI, Mental Health And Emerging Needs Amidst Multiple Pandemics," *Mind Share Partners in Forbes*
- [\[Explore\]](#) "Mental health Is The Next Frontier Of The Diversity, Equity, And Inclusion Movement," *Mind Share Partners*
- [\[Explore\]](#) "Identity And Cultural Dimensions," *NAMI*
- [\[Read\]](#) "How To Form A Mental Health Employee Resource Group," *Harvard Business Review*



Closing Statements

Culture change can sound daunting. For companies who haven't historically prioritized mental health at work and healthy, sustainable ways of working, it may very well be. However, for many of us, and particularly since the onset of the pandemic, we have already begun shifting our awareness and understanding of what it means to be mentally healthy and work in mentally healthy ways.

From being more honest and vulnerable about the challenges we're facing, to scheduling an evening email for the next morning rather than hitting send, to simply asking our team members, "What can I do to help?"—we're changing our cultures already.

From here, it's about formalizing and operationalizing our positive intentions to strategic action based on the evidence of what works. And all of this starts with you and the unique role you play in the ecosystem of change in your workplace.





Mind Share Partners is a national nonprofit that is changing the culture of workplace mental health so that both employees and organizations can thrive.

We build public awareness, host communities to support employee resource groups (or affinity groups) and professionals, and provide workplace training and strategic advising to leading companies.

Company Solutions

Corporate training & advising

Equip employees with the key knowledge, skills, and strategies to create a mentally healthy culture. We offer trainings for:

- Executive leaders
- Managers
- HR and People teams
- All employees
- Champions

[Learn more >](#)

Mind Share Partners Institute

Our instructor-led, online certification program for company changemakers in HR, DEI, and leadership. Each of the 5 live training sessions leverages expertise from mental health, management, and legal fields to help you develop the knowledge and skills to create a mentally healthy culture.

[Learn more >](#)

Individual Solutions

Mental Health Now

Mind Share Partners' virtual library of self-directed, on-demand, and bite-sized learning for all audiences for workplace mental health.

[Learn more >](#)

Virtual community for mental health employee resource groups

An exclusive network of ERGs from 250+ companies who are committed to creating mentally healthy workplaces.

[Learn more >](#)

Resources & Guides

Free online toolkits

Our toolkits cover a wide range of topics including, but not limited to:

- [\[Download\]](#) Key Frameworks For Creating Mentally Healthy Workplaces and Programs
- [\[Download\]](#) Communications Toolkit For Mental Health Awareness Month 2021
- [\[Download\]](#) Creating An Employee Resource Group For Mental Health

Articles

We publish on a variety of editorial channels including:

- [\[Explore\]](#) Harvard Business Review
- [\[Explore\]](#) Our Forbes channel
- [\[Explore\]](#) Mind Share Partners' blog

Support Mind Share Partners

We are one of the only nonprofits in the U.S. focused exclusively on changing the culture of workplace mental health. Your contributions will directly support programs and activities like our virtual community for mental health ERGs, free online toolkits, and our other movement building activities. Whether through an individual donation or company sponsorship, you are contributing to a growing movement. [Donate >](#)

Appendix A

Methodology

Sampling

We collected responses from 1,500 individuals via an online survey from May 21, 2021 to June 18, 2021 through a Qualtrics panel of survey respondents. All respondents in our report were at least 16 years of age, employed in a full-time position at a company with at least 11 employees, and resided in the U.S. at the time of survey completion.

Qualtrics gathers responses through panel partners that randomly select respondents for surveys where respondents are highly likely to qualify. Each sample from the panel base is proportioned to the general population and then randomized before the survey is deployed. For hard-to-reach groups (e.g., C-level executives, transgender community, etc.), Qualtrics utilizes niche panels brought about through specialized recruitment campaigns.

For this survey, we collected a statistically significant number of responses across a variety of demographic groups, including gender identity, racial and ethnic background, LGBTQ+ identity, primary caregiver status, residential population density, and level of seniority.

The full breakdown of our demographic measures can be found in our [supplementary document here](#).

Analysis and Reporting

The data in this report are rounded to whole numbers. As a result, cumulative sums for questions with multiple answer options may differ by a percentage point.

All findings included in this report were statistically significant at a 95% confidence level. Additionally, all findings calculated for all respondents (i.e., when not segmenting by demographic group or question answer), were weighted to more closely align with U.S. census data for groups that were overrepresented in our sample, while still maintaining statistical significant sampling in order to analyze group-specific outcomes.

2021 study sample		Adjusted representation in all respondent outcomes
LGBTQ+	371	100
Transgender	151	100
Exec	223	100
C-level	169	75

After conducting weighted analyses for all-respondent outcomes, the weighted results consistently fell within the 95% confidence interval of the unweighted results. Thus, throughout this report, we report the weighted outcomes for all-respondent outcomes and do not provide unweighted versions of those results as we do not foresee significant differences in these outcomes as a result of our statistically significant demographic sampling.

Appendix B

Demographics

Demographic Groups with Segmented Findings

Generation	
Millennials	42%
Gen X	29%
Baby Boomer	18%
Gen Z	11%
Age Group	
18-30	29%
31-40	31%
41-50	16%
51-60	14%
>60	10%
Gender Identity	
Male	48%
Female	49%
Non-binary	2%
Prefer to self-describe	0%
Prefer not to say	1%
Race	
Caucasian	52%
Black or African American	20%
Hispanic or Latinx	13%
Asian or Pacific Islander	9%
Native American	3%
(includes Americas, Hawaii, and Alaska native)	
From multiple races or ethnicities	2%

LGBTQ+ Identity	
LGBTQ+	24%
Non-LGBTQ+	76%
Transgender Identity	
Transgender	10%
Non-transgender	90%
Caregiver Status	
Caregiver	58%
Non-caregiver	41%
Prefer not to say	1%
Seniority	
Manager	33%
Individual contributor	41%
Executive	14%
C-level	11%
Industry	
Legal Services	7%
Financial Services	17%
(e.g., banking, accounting, etc.)	
Other Professional Services	20%
(e.g., consulting, engineering, etc.)	
Tech	20%
Other Industry	36%

Other Demographics & Information

Is Your Job a Desk Job?	
Desk job	66%
Not a desk job	34%
Years at Company	
1 or less	9%
2-5	38%
6-10	26%
11-20	17%
21-30	6%
31-40	3%
40+	1%
Company Size	
Less than 50 employees	17%
51-200 employees	19%
201-500 employees	14%
501-1000 employees	15%
1001-5000 employees	15%
5001-10,000 employees	7%
10,001+ employees	13%
Organization Type	
Nonprofit	10%
Government	13%
For-profit company, public	28%
For-profit company, privately-held	49%

Education	
Some high school	1%
High school graduate	13%
Some college	13%
Associate degree	10%
Bachelor's degree	28%
Some postgraduate	3%
Master's degree	24%
Ph.D., law or medical degree	6%
Other advanced degree beyond a Master's degree	1%
Living Situation	
“I live alone”	21%
“I live with a partner or spouse and no children”	24%
“I live with a partner or spouse and one or more children”	38%
“I am the only adult and live with one or more children”	7%
“I live with roommates”	4%
“I live with extended family”	6%
Region	
South	35%
West	27%
Northeast	20%
Midwest	18%