**BUILDING A RESILIENT WORKFORCE:** *Proactive Approaches to Employee Mental Health and Well-Being*
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## I. Objectives and Methodology

Business leaders are paying increased attention to employee mental health and well-being, prompting human resource leaders to transform total rewards packages to incorporate wellness-focused resources. This research aims to establish a benchmark of mental health and well-being benefits that companies are implementing, identify short- and long-term trends, uncover challenges and opportunities, and collect successful practices and innovative ideas to mitigate barriers and sustain a mentally healthy workforce long-term.

This research is informed by interviews with more than 33 HR leaders from 23 national and multinational companies, and accompanied by a systematic literature review of workplace well-being reports and employee surveys. Companies represented various industries, including technology, manufacturing, pharmaceutical, consulting, service operations, and nonprofit. Company size ranged from medium to large and included private and publicly traded organizations. Leaders interviewed held roles in Total Rewards, Benefits, Compensation, Well-being, Human Resource Business Partners (HRBPs), Occupational Physicians, and similar responsibilities.

Qualitative data was collected over a three-month period through voluntary, structured interviews that lasted approximately 45 minutes. Each leader was asked a standard set of eight questions with additional follow-up questions to assess companies' strategies across key dimensions of workplace well-being.

**Figure 1. Overview of participating companies by industry**
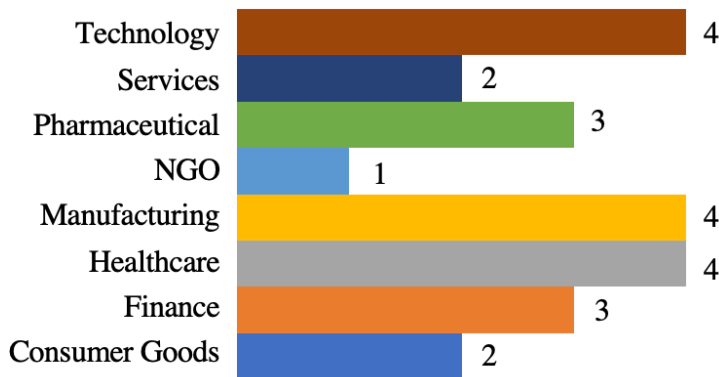


Following the completion of the interviews, responses were aggregated by question and coded to evaluate the frequency of specific variables, identify trends, and recognize patterns. The qualitative coding process to identify major themes was adapted from Charmaz (2006). Outlier data points and diverse perspectives were evaluated for their originality, generalizability, and scalable implementation.

**II. Mental Health and Well-Being Trends**

Respondents reported implementing various mental health-focused strategies and well-being initiatives ranging in scope, price, and maturity. All respondents reported making reactionary changes to at least one aspect of their healthcare, pharmacy, Employee Assistance Program (EAP), caregiving benefits, or leave policy plans over the past three years. There was widespread consensus on the following three trends:

*1. A holistic definition of well-being*
Respondents overwhelmingly reported that mental health and well-being benefits should not be viewed as a program-focused cost center. Moreover, mental health cannot be addressed in isolation. Mental health is one aspect of overall well-being alongside multiple dimensions such as physical, social, and financial wellness. Most respondents associated mental health and well-being with culture-integrated terminology such as "holistic, evolving, preventative, proactive, and necessary for recruiting and retaining employees." Others referenced employee mental health as a spectrum or continuum, with severity levels ranging from medical interventions to lifestyle management.

*2. Exacerbating mental health concerns and shared employer-employee responsibility*
Respondents consistently stated that the events in the last two years have highlighted the impact of workflows on employees' mental health. Thus, there is greater recognition that well-being is a shared responsibility between employers and employees. HR leaders emphasized that employers can provide the tools to help employees be successful, while employees have a personal responsibility to use the tools and be self-aware of factors that help or inhibit success.

Additionally, remote and hybrid work environments for corporate (non-frontline) employees have made it more difficult for managers to identify employees' challenges outside of work. In many companies, rising burnout, stress, anxiety, digital exhaustion, and disconnectedness from unsustainable working arrangements were among the most concerning workforce issues. In addition, loneliness is rising for younger workers in remote locations and those new to the workforce. Overall, well-being concerns were dependent on various factors, including geographical and cultural influences, the type of work (front line or corporate), the employee's pay level (hourly or salary), family dynamics, and generational differences. Concerning work-specific issues included poor management and working across global time zones. In evaluating health claims, substance use services were the highest cost drivers. Most respondents reported an increase in behavioral health pharmacy claims and EAP usage for family and dependents.

*3. Leadership and managerial involvement critical for program success*
There was a widespread consensus among respondents that senior leadership has taken an increased recognition of the importance of mental health and wellness in the past three years. However, beyond HR professionals, many still view benefits strategy with a "cost-centered" mindset. Competing business interests and a pendulum of executive priorities impact total rewards, health benefit budgets, and attention. Executive sponsors and leadership buy-in is essential, yet role modeling from the top down tends to be the most impactful. Respondents claimed that engaging middle managers is equally, if not more critical, for long-term results.

After the three themes above consistently surfaced in initial interviews, subsequent respondents were asked to distinguish key elements of an "effective and generalizable" well-being strategy from less

successful approaches used in the past. The consensus on these elements informed the strategic recommendations in this paper and is summarized below:

1. Integrated approach, not standalone interventions
2. Proactive, not reactive strategy
3. Need for cultural and structural change

Respondents noted that standalone interventions were less effective for sustainable well-being outcomes than integrated approaches that "meet employees where they are." An integrated well-being strategy was typically characterized by cross-functional efforts across HR functions (such as Total Rewards, Learning and Development, and Diversity, Equity, and Inclusion), business units outside of HR, and executive sponsorship. Additionally, reactive or piecemeal efforts introduced during the pandemic were less effective than proactive well-being strategies that had been in place for nearly a decade. In this respect, HR leaders had mixed reviews about EAPs – most participants believe EAPs are an essential part of Total Rewards, but still constitute a reactive strategy. Companies that introduced new screening tools as part of their EAPs reported a significant turnaround in anxiety symptoms during 2021-2022. Several respondents noted dissatisfaction with existing EAPs and an intent to move away from traditional EAPs to new providers with screening tools, resilience training, and continuous education.

Further, all respondents agreed that companies should embed well-being into organizational design and emphasized greater manager accountability to achieve long-term impact. However, well-being is often still relegated to HR and continues to be considered with a cost-centered mindset outside the HR function. To build the right support system, companies should adapt organizational structures, influence cultural norms, and require managers to role model.

### III. Opportunities and Challenges for HR

Three opportunities and challenges emerged for HR leaders to consider and conquer within benefits design implementation. The opportunities are focus areas for the short-term, with solutions that are relatively cost-effective and practical to implement. The challenges are long-term systemic issues, with limited control to influence outcomes and no straightforward, industry-wide solution. Thus, the long-term challenges for HR are distinct from the short-term opportunities as the former requires more significant resource investment and extensive collaboration to achieve measurable results. Although a straightforward solution may not be apparent, a cognizance of the long-term challenges can benefit HR leaders looking to reevaluate their well-being strategies for the future. These findings are noted below:

### A. Short-term opportunities
There are three focus areas with scope for HR leaders to take immediate action. The first opportunity lies in leveraging the rapid innovation in the health care market by exploring different vendors for EAPs, health programs, and digital solutions with a sharp focus on selecting a portfolio appropriate for the organization. The second opportunity lies in moving away from a traditional one-size-fits-all benefits model toward individualistic models tailored to employee populations and individual needs. Thirdly, the stigma around mental health continues to be prevalent in workplaces and affects employees' ability to use resources or approach colleagues for support.

*1. Innovative healthcare vendors*
Several new solutions are available for well-being leaders and program managers. Currently, there are at least 60 new vendors for EAPs alone and several hundreds of digital apps and tools. Most participants reported signing on with new vendors for resilience training, telehealth, and digital coaching. New vendors typically had similar claims, such as providing a higher quality of care and an enhanced employee experience compared to traditional healthcare plans. However, many respondents were concerned that there is currently no reliable means of calculating vendors' return on investment (ROI). While digital innovation offers tremendous benefits, the rapid pace of disruption makes it challenging for program managers to keep up with new offerings. Respondents noted other concerns besides the need to assess vendors' credibility, such as duplication of resources, user data privacy, and integrating new platforms with existing benefits.

To quote a respondent, "the rapid digital innovation could complicate healthcare for employees, instead of simplifying it, if not done correctly." For instance, an organization attempts to introduce a new app for mindfulness training that has been rated highly by a specific employee demographic within the company. Then, the evaluation process could include questions such as: What is the business case for the new app when the existing healthcare provider offers one form of meditation training? What is the ROI for the supplemental benefit? What are the risks in sharing employees' data with an external partner? Finally, what is the optimal way to consolidate old and new resources to offer an integrated platform rather than fragmented solutions that can overwhelm the user?

While there is currently no widespread consensus on a streamlined evaluation process, respondents noted that trust, confidentiality, and reputation were the top criteria for evaluating EAP vendors and digital solutions. In the case of EAPs, program managers looked for quick turnaround times for appointments, white-glove services, dedicated hubs, and the ability to provide a seamless and integrated experience for employees. The primary criteria for digital apps and solutions included innovative pricing models and presence in local markets. When two digital applications were identical in most aspects, providing engaging content in multiple languages for local audiences proved to be the deciding factor for signing the vendor for various geographies and markets.

*2. Unique employee needs and situations*
Most respondents stated that there is no "one-size-fits-all approach" to well-being. When each company's top mental health concerns were coded by employee subgroup, there were few overlapping mental health needs. Instead, individual needs vary by age group, region, job role, culture, and other factors. External stressors also affect employees differently depending on race, ethnicity, gender, and other socio-economic aspects. According to one respondent, their organization relied on the "traditional approach" towards benefits or the 80/20 rule – which means design primarily for the majority 80%. The rationale of the traditional model is that focusing resources on the majority needs would yield the best outcomes. However, respondents relying on the conventional approach reported that it did not serve the specific needs of groups such as employees with children, people with aging parents, and in some cultures, single employees who live with their parents and extended families. Other concerns included the growing segment of Gen Z workers and new hires at greater risk for social isolation, frontline and hourly workers who are more likely to experience financial stress, and salaried workers and caregivers who are more likely to experience burnout.

In organizations that attempted to shift away from a traditional model, a dedicated team for custom programming within Global Compensation and Benefits has been incorporated into the organization structure in the last two to three years. The custom programming team overlooked initiatives such as self-identification for employees as members of high-risk groups while ensuring privacy and confidentiality of mental health concerns. After the self-identification process, employees were automatically emailed about eligibility for mental health benefits such as extended paid time off and vendor offerings. Other initiatives included financial literacy training in onboarding programs for new hires and younger employees. In global companies, decentralized wellness programming led by HRBPs and wellness champions was introduced at the regional or business unit level; many companies switched to vendors with a strong presence in local markets and content available in multiple languages. Overall, respondents recognized that the traditional centralized benefits model offered many advantages. Still, a staggered approach to customization and localization could be a positive cost-neutral intervention – it could potentially offset the higher implementation costs through improved engagement and resource utilization.

### 3. Mitigating stigma

The third opportunity is the pervasive stigma around mental health which makes employees reluctant to use the resources available or reach out for support. One respondent noted that stigma is different from the lack of resources as it is a self-imposed barrier resulting from cultural perceptions around mental health. At the organizational level, stigma occurs when fewer resources are invested in mental health than other aspects of well-being such as physical health or financial wellness. Additionally, the extent of stigma differs by culture, country, and demographics, so a global awareness campaign that takes place once a year may not achieve the desired impact.

Among companies with a successful track record in reducing stigma, the effective components of an effective stigma–reduction strategy include the following elements:

i. <u>A focused campaign with relevant messaging and a high recall value:</u> Rather than a one-time campaign, an iterated strategy was found to be more effective when rolled out multiple times a year and targeted at various levels of the organization. The emotionally relevant messaging was the 'sticky component' of effective communication. For instance, employees could miss out on emails about available benefits, but an engaging campaign makes it more likely they will remember where to find help when needed.

ii. <u>A comprehensive communication strategy with a balance of digital and non-digital platforms:</u> In addition to emails and dedicated social media accounts, creative posters, home mailers, and booklets can be used to reach family members and frontline employees who may not always be at their computers.

iii. <u>Educating managers:</u> This element plays the single most crucial role in reducing stigma. For example, a company could have generous benefits such as paid time off or extended work-from-home, but employees may be reluctant to approach their manager to request these benefits. To create a psychologically safe workplace, managers must encourage open conversations on pressing issues or taboo topics. Discussing current events, personal challenges, and how team members cope with stress can help employees balance work-life priorities.

iv. <u>Role-modelling from the top:</u> Culture starts at the top; when leaders talk about their personal stories in town halls and team meetings, it can encourage employees to be more self-aware about their well-being needs and comfortable asking for help.

**B. Long-term challenges**

There are three long-term challenges that HR leaders should be cognizant of when developing and implementing a benefits strategy: expanding access to the mental health system through work design, increasing employee awareness of benefits by evaluating the approachability of resources, and defining and measuring the success of well-being initiatives.

*1. Expanding access to the mental health system*

Increasing employer-sponsored mental health resources does not guarantee employees access to treatment. Barriers include unsustainable work design and a shortage of mental health providers.Even before the COVID-19 pandemic, it was widely acknowledged that there is a shortage of mental health professionals, which leads to lagging appointment times or the employee seeking out-of-network care. In addition, if an employee can secure an appointment, work design can hinder one's ability to attend the appointment.

HR can mitigate barriers to access in a variety of ways, including:

i. Create quiet, private spaces at work sites for telehealth appointments
ii. Designate iPads or similar technology devices for employee health telehealth appointments
iii. Allow employees to pick work shifts and adjust schedules to attend an appointment
iv. Audit your EAP and health insurance provider to understand what access looks like from a vendor and employee perspective. Identify what the average employee wait time is for an appointment and vendor recruiting pipelines for providers
v. Identify if a portion of employees live in or are near a geographic region with limited providers; be mindful of how the shortage affects the ROI of resources, and consider alternatives
vi. If budget allows, hire providers directly for on-site access
vii. If budget allows, select an EAP vendor that offers guarantees on appointments within a specific timeframe or vendors that hire providers directly, rather than contracting for service
viii. For HR practitioners in medical occupation recruiting, consider how to encourage more individuals to pursue careers in behavioral health

*2. Increasing employee awareness of benefits and resources*

Despite HR leaders' best efforts, many employees remain unaware of their mental and physical health and well-being benefits until they want to use them. The disconnect between employer efforts and perception of those efforts results in low engagement scores, a plateau in resource utilization, and hinders the employee's ability to get care in a timely manner. Additionally, HR leaders should also be conscious of digital overload when strategizing how to reach employees.

HR leaders can increase awareness by focusing on approachability and evaluating the accessibility and navigational ease of benefits information in a variety of ways, including:

i. Create an easy-to-navigate benefits website. For example, employees can type in the symptoms they are experiencing or an item they are struggling with, and a list of related resources appear on the screen
ii. Have a network of mental health allies that employees can visit for questions. Consider how approachable these individuals are and how they can connect with employees in a private space

iii. Place QR codes in private areas, like restrooms and break rooms, that link to resources. Additionally, explore all cross-functional support channels: encourage managers to role model healthy habits, and bake benefits information into existing resources beyond HR communication channels

*3. Defining and measuring success*

HR leaders use various approaches to defining and measuring the success of well-being initiatives. There was no consensus among respondents for a magic metric to measure well-being or achieve a return on investment (ROI). Additionally, the definition of success, and the concept of well-being itself, is amongst a wide spectrum that is highly subjective. The broad baseline to measure is constantly changing, dependent on where a person is within the mental health spectrum. Interview respondents reported seeking two outcomes: make the business case for the company's well-being strategy, and have employees who are healthy, productive, and engaged.

Interview respondents reported using a variety of different metrics, with mixed results:

i. Health, pharmacy, EAP, disability, and leave claims data can be used to identify health and cost trends, evaluate cross-referral success between vendors, and employee access to in-network providers. Challenges include data availability is country specific, claim variables depend on whether the employee is in a private or public health system, and employee privacy concerns.

ii. Absenteeism and presenteeism can measure productivity. Challenges include that absenteeism is not always due to medical or health reasons.

iii. Utilization can measure access to EAP and well-being resources. Challenges include that this can be a lagging indicator of success: high usage can point to a systemic problem, while low usage could point to a healthy workforce or lack of employee resource awareness.

iv. Engagement can measure satisfaction among users, provide insight into employee happiness, and correlate to productivity. Challenges include that the assessment can be limited based on the employee population using the resources or participating in a survey. Also, fear of employee retribution could undermine accuracy.

v. Participation can measure resource effectiveness and provide insight into a company's culture. Challenges include that the assessment can be limited based on the employee population using the resources or participating in the survey. Also, participation does not translate to increased productivity or lower health care costs.

vi. Exit interviews and attrition can provide insight into company culture and management. Challenges include that data can be limited, and attrition can be due to various compounding factors.

HR leaders reported using some non-traditional metrics, including:

i. Risk prevention models
ii. Predictive analytics
iii. Qualitative data in the form of anecdotal stories or comment submissions
iv. Self-evaluation in a performance or professional development plan

**IV. Recommendations: The 3P Framework for a Proactive Well-being Strategy**

Looking ahead, HR leaders can utilize our framework to move beyond a benchmark, reactionary approach toward a proactive strategy with long-term systemic impact. The "3P" framework encapsulates what the future of well-being can look like; a mental health and well-being approach focused on Prevention, Personalization, and Promotion.

Each pillar of the framework includes a five-point checklist, supported by examples and action items to consider and implement.

Prevention

Prevention refers to shifting gears away from reactionary interventions towards cultural change, lifestyle management, and continued learning. This pillar helps address the three challenges discussed earlier - access, awareness, and measuring the success of outcomes. It also emphasizes a balance between employers and employees for well-being, ensuring that employers provide relevant information and resources. Still, the onus remains on employees to be self-aware of the facts that limit their success and take the initiative to support their mental health.

| Check Point | Examples |
|---|---|
| 1. Designate well-being as a priority at every level of the business | − Short- and long-term strategy and roadmaps with simple designs and easy-to-explain results<br>− Public declaration of business prioritization of well-being |
| 2. Establish clear ownership and accountability mechanisms for well-being strategy | − Incorporate well-being discussion points in performance plans and professional development plans<br>− Encourage managers to tailor wellness programming and metrics to their business unit |
| 3. Secure leadership buy-in and advocacy | − Role modeling at the executive and manager level<br>− Board-level buy-in and sponsorship |
| 4. Create sustainable workflows | − Company-wide awareness of holidays across regions/ globally<br>− Mindful of time zones and individual priorities that can impact the working day<br>− Role-modeling by taking breaks and vacation days<br>− Shift picking |
| 5. Improve access to resources for employees at all levels | − Multi-modal communication channels: digital, print, in-person<br>− Evaluate the approachability and accessibility of resources each year<br>− Mobilize peer and ally networks |

## Personalization

Personalization refers to an overhaul of the existing benefits model to address individual needs. This pillar helps address two opportunities discussed earlier – the growing number of innovative vendors and unique employee needs and situations.

| Check Point | Examples |
|---|---|
| 1. Recognize that well-being is not a one-size-fits-all approach | − Employees' needs vary by age, geographic location, experience, racial, ethnic, and socio-economic identity<br>− Well-being is a spectrum, ranging from stress and lifestyle management to diagnosis and medical intervention<br>− Offer cross-referrals between programs and vendors, mitigating the impact of comorbidities on behavioral health<br>− Offer diverse wellness programming topics offered in collaboration with ERGs, such as fertility or pediatric health |
| 2. Remove barriers to resource access for those seeking treatment or continuing treatment | − A clear assessment of which employee populations are struggling with access<br>− Allow confidential self-identification as a "member of a high-risk group" and follow-up with automatic eligibility for mental health benefits |
| 3. Tailor global well-being benefits for cultural and local relevance | − Decentralized programming led by regional HRBPs, ERGs, and volunteer networks<br>− Collaborate with local vendors tuned in to regional and cultural needs<br>− Eliminate United States-centric resources that are translated for global offices; these approaches do not resonate with employees globally<br>− Ask employees in different regions what their needs are through focus groups or surveys to avoid wasting time or resources |
| 4. Create a cross-functional and collaborative effort to promote well-being, not just relegated to HR | − Managers have the autonomy to create or adapt programming to their business unit needs<br>− Well-being leaders can collaborate with HRBP's, L&D, D&I, and communications teams to enhance grassroots initiatives by meeting quarterly |

| Check Point | Examples |
|---|---|
| 5. Promote psychological safety in the workplace | − Provide opportunities for open and honest conversations on difficult topics by collaborating with ERG groups in different markets and geographies<br>− Bolster support systems for life challenges by highlighting and crowdsourcing personal experiences on topics such as parenting in the pandemic, caring for both children and seniors, socializing in a remote work environment, and other topics<br>− Dedicate coverage of one new issue with expert speakers each month on topics such as anxiety, resilience, depression, or interpersonal conflict |

Promotion

Promotion refers to innovation in communication and education to ensure that employees at all levels are actively engaged in building a culture of mental health.  Advertising well-being resources helps mitigate stigma and address the remaining barriers between employees and the mental health resources available to them.

| Check Point | Examples |
|---|---|
| 1. Implement a stigma-reducing campaign at multiple levels | − Iterated and focused campaigns that have both universal and targeted components<br>− Managers receive training for one-on-one conversations with team members about mental health resources and coping strategies |
| 2. Develop a comprehensive, multi-modal communication strategy | − Digital, print, and in-person resources and multiple contact points; supplement online communication with home mailers<br>− Integrated one-stop well-being website with chatbots to provide easy access to family members and dependents on insurance plans; remove firewalls in certain sections to ensure universal access<br>− Dedicated social media channels and email handles managed directly by Benefits or well-being leaders; supplement with push notifications and corporate emails containing links<br>− Plant-level employee awareness of resources through QR codes in private spaces<br>− Mental health experts for specific guidance on popular topics such as parenting, nutrition, pediatric health, sleep hygiene, relationships, etc.<br>− An extensive network of motivated volunteers or wellness champions outside of HR |

| | |
|---|---|
| 3. Engaging content that reflects employees' evolving needs | − Identify the most relevant issues through frequent pulse surveys and provide specific and up-to-date information<br>− Share vendor resources in a co-branding fashion using the company email handle<br>− Post engaging and original content in multiple languages and different formats, such as short articles, podcasts, and videos |
| 4. Empower mid-level managers through training and support systems | − Provide a continuous stream of easily digestible information such as bite-sized podcasts, talking points on current events, and short webinars on an easily accessible training platform<br>− Short, online trainings for managers to respond to employees who bring their concerns directly to them<br>− Managers could lead mental health pledges in town halls or team meetings<br>− Plug-in or reminders for well-being resources that managers found relevant or useful in team meetings |
| 5. Sustain momentum through creative incentives and rewards | − Rewards and recognition are essential to sustain motivation among mental health volunteers. Provide a platform where employees can share stories about colleagues or managers who supported them during a crisis<br>− To keep volunteers engaged, make the signing up process easy and keep trainings short and informal.<br>− Small gestures are overlooked, but they hold value for employees. Popular ideas include "mental health ally" badges or email signatures such as "mental health champion"<br>− Wellness stipends offer autonomy to spend on physical, mental, or financial well-being needs, such as a student loan payment, audiobook subscription, or yoga membership<br>− Introduce internal business unit challenges beyond the traditional "10,000 steps per day" challenge. Some examples include a daily five-minute meditation challenge for two weeks or competitions for sharing innovative and healthy recipes<br>− Celebrity endorsements are a quick and easy way to gain visibility for well-being resources |

**V. Further Reading**

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