

An Employer's Ultimate Guide:

Employer Mental Health Survey



Introduction

The SilverCloud Health 2021 Employee Mental Health and Wellbeing Checkup asked 2,141 U.S. employees whether they meant it when they said, "I'm OK" in response to the question, "how are you?"

The findings paint a picture of an employee population that is hiding how it's truly doing, and reveal opportunity for employers to bring new solutions to a population whose performance drives their business outcomes, and whose wellbeing is the concern of any executive leading a team.

Data shows that employees are both citing employers as the cause of some of these health issues, and asking employers for help.

Employers, fortunately, are in newly empowered positions to offer exactly that help because of emerging opportunities to scale access to tailored behavioral health treatments in new ways. Helping employees access resources to cope with mental health is proven to both help people feel better, and help them do better, and in turn drive and impact better productivity.

Results Summary

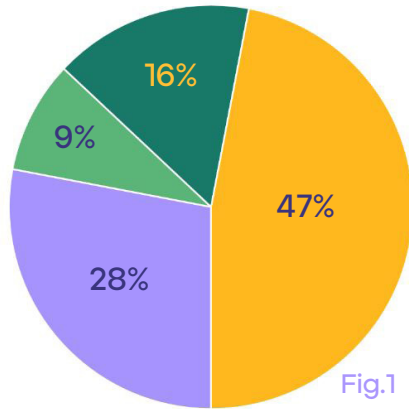
The data is clear: U.S. employees are not OK. When they say they are, 84% don't mean it every time, and 37% mean it less than half the time. (See Figure 1). Further, employees with any form of measured mental distress were 4 times as likely to hide it from others. Their stress and anxiety levels – their mental health needs, even if mild or moderate – mean they are often not fully present at work and that their productivity is sub-optimal.

What's crucial to remember here is that mental health is a continuum: We may be able to get out of bed, but it doesn't mean we're 100% fine. In fact, "languishing" became a 2021 buzz term after psychologist Adam Grant identified it in the [New York Times](#) as the "neglected middle child" between depression and wellness.

There are real business and economic implications to this collective strain. The average respondent felt fully focused at work only 66% of the day, and felt productive at work only 65% of the day.

Employees with any mental distress, as indicated by industry-standard questions to diagnose depression and anxiety, are 3.4 times as likely to have quit a job because of mental health, based on survey responses.

In the past year, when someone asked, "how are you," and you answered with "good" or "fine" or something similarly positive, how often did you mean it?

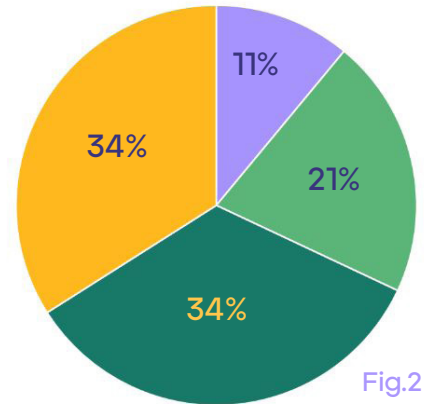


- Every Time
- I usually mean it
- Less than half the time - the other half the time, I'm struggling
- I'm usually not "good" or "fine", even if I say I am

Figure 1 Asked "how are you," 84% of employees surveyed said they don't always mean it when they say they're "good," "fine," or another positive response. Employees with any form of measured mental distress were 4 times more likely misrepresent their state of wellbeing.

Reframed on a formal clinical continuum, we found that about two-thirds of employees have clinically measurable mental health issues. And while 1 in 10 has severe issues, an alarming 55% of employees are languishing on the spectrum with mild to moderate mental health symptoms (See Figure 2).

Severity of Mental Health Symptoms



- None to Minimal
- Mild
- Moderate
- Severe

This is a crucial data point for employers: It's not just the obviously impacted whose mental health negatively affects business performance, work environment and employee job satisfaction. Lower-acuity levels of distress are more prevalent, and, because of this prevalence, can be just as costly because they affect more people.

Productivity levels drop as employees progress up the mental health acuity continuum from zero to minimal mental health symptoms up through mild, moderate and severe (See Figure 3).

Range of Likely Productivity Impairment Impact from Mental Health Distress

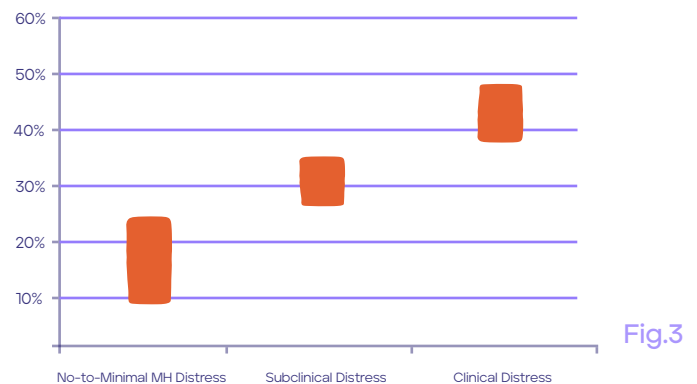


Figure 3 Research shows the probable level of impairment for someone who is mentally distressed as a percentage of an individual's time at work.

On average, people with no mental distress reported being non-productive at work up to 2 hours each day. Adding any mental distress increases that self-evaluation of non-productivity to over 3.25 hours per day. Mild distress is about 3 hours, and people with severe distress say that almost 4 hours of each of their days are unproductive.

A person who is not experiencing mental distress, therefore, is twice as productive as someone in severe distress. Employers who can nurture mental wellbeing will also be nurturing productivity.

Manager Mental Health Matters

Employers can have a tendency to believe that higher level titles are better at managing mental health. But managers were slightly more likely than employees overall to report some form of mental distress (70% vs. 65%), according to their responses to industry-standard questions asked by mental health professionals to diagnosis depression and anxiety (See Figure 4).

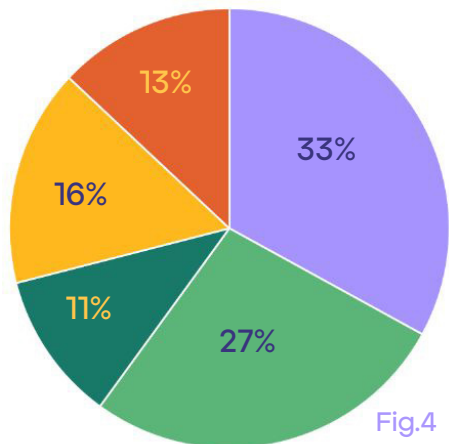


Fig.4

- Anxiety Only
- Depression Only
- Stress
- Anxiety and Depression
- No Mental Health Issues

According to the survey, managers are more likely than non-managers to:

- Have considered quitting a job because of mental health (**34% vs. 25%**).
- Have difficulty or feel unable to manage their physical health because they weren't mentally or emotionally able (**56% vs. 42%**).
- Manage a chronic medical condition (**51% vs. 42%**). Almost two-thirds of people with a chronic condition have some form of mental distress.
- Consider medical costs a barrier when seeking mental health treatment (**47% vs. 36%**).
- Be a family caregiver (**55% vs. 36%**). 70% of people who are caregivers also have some form of mental distress.
- Take a day off during Covid-19 because they weren't mentally present (**47% vs. 34%**).
- Have trouble not thinking about work during off hours (**65% vs. 42%**).
- Struggle with work-related anxiety and stress (**66% vs. 47%**).

Gallup reports that replacing an employee can cost, conservatively, 1.5 to 2 times the individual's salary. The Society for Human Resource Management suggests replacing an entry-level employee costs 50% of their salary, while the cost of replacing a technical leader is 250%^{1,2}.

Managers simply cost more to train and replace, and the opportunity cost of their reduced productivity is magnified by their influence on those they lead: People don't necessarily leave jobs. They leave managers.

¹ <https://www.gallup.com/workplace/247391/fixable-problem-costs-businesses-trillion.aspx>

² <https://learning.linkedin.com/content/dam/me/learning/en-us/pdfs/lil-workbook-calculating-cost-of-employee-attribution-and-disengagement.pdf>

Lower-Income Employees Are More Likely to Need Support

Income- and role-related survey results make all the more clear the need to provide employees at all levels the adequate care they need to address their individual mental health needs, some of which may be particular to their role and position.

While managers were slightly more likely to report any level of mental distress, people with lower salaries were more likely to report a higher level of mental health distress. (See Figure 6.) People with less than \$30,000 in annual income reported the highest levels of distress, while people with incomes over \$100,000 reported the lowest levels.

That inverse relationship of cost to access to mental health support is a crucial point for employers: Many psychologists do not take private insurance, even when employers provide coverage, meaning that a lower-salaried employee who had to pay out of pocket would statistically have both more mental distress and less financial recourse to address it.

Employers can level this playing field of access with digital mental health platforms that eliminate the out-of-pocket expenses traditionally required for employees to access in-person psychological support.

MH Prevalence Severity by Income

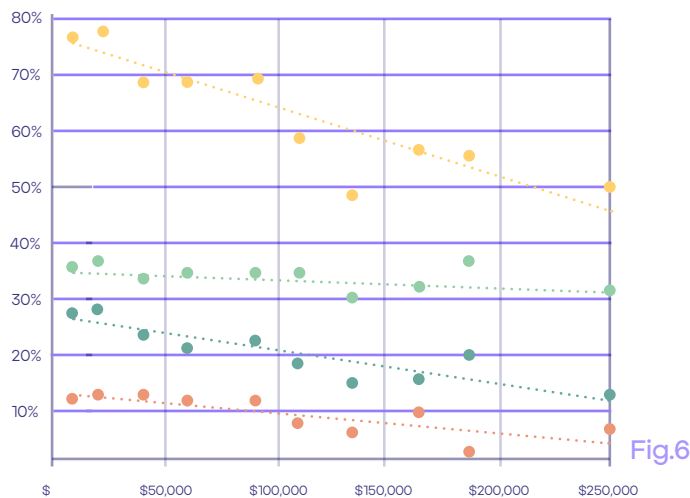


Fig.6

What Employees Want... In Their Own Words

We asked what one thing employees wished their employer would do to help them cope with negative feelings and other mental health needs while at work. The 1,306 open-ended responses that called for a specific action tended to fall within the following identified categories: (See Figure 7).

| Percent of Responses Calling for Action | Theme | Examples of Words Mentioned |
|---|------------------------------------|---|
| 37% | Physical or Mental Space from Work | Vacation, Break, Time Off, PTO, Hours, Week, Days |
| 32% | Mental Health Support | Counsel, Mental, Stress, Depression, Relax, Anxiety, Psych, Support, Therapy, Ask, Help |
| 19% | Appreciation | Care, Listen, Appreciate, Empathy, Understand, Acknowledge |
| 11% | Communication | Listen, Talk, Explain, Check, Communicate |
| 10% | Benefits | Insurance, Benefits, Coach, Gym, Incentive, Class, Train, Food, EAP, Gift, Plan, Perk |
| 9% | Staffing | Hire, Staff |
| 7% | Flexibility | Flex, Home, Balance, Week, Tele, Allow |
| 7% | Financial Compensation | Pay, Raises, Money |

Fig.7

Figure 7 Of 1,306 responses calling for action, most fell in these categories. Percentages do not tally to 100 because some responses related to multiple categories.

Responses related to "Time Off" included calls for both physical or mental space during work hours, and outside of them.

- "I wish we had a room to go and relax on break."
- "Allow time during work hours to take a mental health break."
- "Provide 'time-out' rooms, and lenient break/leave policies to allow time to get away."
- "More break time to be used for exercise or being outside."
- "Not feeling bad for taking time off."
- "Paid mental health days."
- "Explicitly give permission to use "sick days" for mental health."

Second only to physical and mental space from work were employees' calls for actual mental health services to help them cope, including access to counselors, insurance coverage of mental health resources, and formal structures that support better wellbeing.

- "Help to provide meditation lessons and other mental health exercises."
- "Offer more comprehensive mental health insurance."
- "Provide an EAP program for employee to help deal with these kind of issues."
- "Stress relieving activities or breaks."
- "Completely cover medical health expenses, as well as giving us the time to take for mental health."
- "Have a mental health professional on staff or available via telehealth 24/7/365."
- "Have a peer support group."

Outside of the 1,306 who suggested an action, 24 individuals stated no action was needed because their employer was already addressing mental health needs well.

However, 5 times that many -132- responded "unsure" or "don't know." Many employees don't seem to even realize the range of possibilities for employer-offered support in managing individual mental health. Employers have an open opportunity to position themselves as a mental health resource. While 46% of survey respondents have either quit or considered quitting a job due to mental health needs, an employee who saw their employer as a portal to access treatment options may be more likely to turn **to** the employer when they were in need, rather than turning **away**.

Nearly 20% of responses suggested employers could help just by being more human and acknowledging that it's ok to not always be ok – a compelling finding as stigma about discussing individual mental health needs evolves and acceptance of the need for change slowly enters workplaces.

- "Treat their employees like human beings and actually offer services instead of assuming people know how to access them."
- "Show more appreciation and offer help."
- "Ask how we are doing and mean it."
- "Acknowledge the need for some recovery time between the stress of constant deadlines."
- "Provide support and guidance/ encouragement and more than directing them to EAP."
- "Be...,
 - aware that lots of staff members are dealing with these issues."
 - more flexible and understanding. Not all departments experience stress in the same way or fashion."
 - more empathetic."
 - more compassionate."
 - aware without negative feedback."
 - mindful we are people instead of workers.
 - more open about mental issues.

Implications

Employers are the cause of much employee stress, according to the survey. About 9% of respondents said they don't have a go-to coping mechanism to feel better when they're outside of work.

That number doubles to 18% when people were asked if they had a coping mechanism while at work. Nearly twice as many people said it's easier to cope with emotions and mental health outside work vs at work (64% vs. 36%)

Importantly, employers also have the potential to be a direct provider of a workable solution.

Clinical research studies have proven that deploying mental health programs, including internet-based Cognitive Behavioral Therapy (iCBT), can help individuals reduce their levels of anxiety or depression, and better manage stress. In short, people can get better, with help. And moving individuals down the mental health acuity continuum also improves the cost of taking care of their physical health, as well as their work productivity.

Employers can also take the advice of employees themselves, and create space at work for employees to have mental breaks. Many have coping mechanisms already, but fewer are able to use those coping mechanisms in the workplace. (See Figures 8,9.)

In general, how do you help yourself feel better when you are feeling anxious or depressed, or otherwise not yourself?

| Answer Choices | Responses |
|---|----------------|
| Escaping reality (i.e: reading a book, watching a movie, video games) | 54.1% 1,158 |
| Physical Activity | 50.4% 1,080 |
| Meeting up with or talking to friends, colleagues or family | 44.9% 962 |
| Sleeping it away | 37.3% 799 |
| Disconnecting from others and being alone | 34.1% 731 |
| Focusing on my work | 21.2% 454 |
| Taking time for intentional thinking (i.e: meditating, journaling) | 21.2% 454 |
| Drinking Alcohol | 14.7% 315 |
| In general, I don't have a go-to coping mechanism for feeling better | 9.9% 211 |
| Talking with a mental health professional (live video or in person) | 8.4% 180 |
| Using a digital mental health tool or platform | 4.2% 90 |

Total Respondents: 2,141

Fig.8

Figure 8 Respondents checked all answers that applied to them.

When you are at work, how do you help yourself feel better when you are feeling anxious or depressed, or otherwise not yourself?

| Answer Choices | Responses |
|---|---------------|
| Focusing on my work | 49.3% 1057 |
| Meeting up with or talking to friends, colleagues or family | 30.2% 647 |
| Physical Activity | 27.7% 594 |
| Disconnecting from others and being alone | 22.8% 487 |
| At work, I don't have a go-to coping mechanism for feeling better | 18.3% 392 |
| Escaping reality (i.e: reading a book, watching a movie, video games) | 15.6% 333 |
| Taking time for intentional thinking (i.e: meditating, journaling) | 14.3% 305 |
| Using a digital mental health tool or platform | 4.8% 103 |
| Talking with a mental health professional (live video or in person) | 4.5% 96 |

Total Respondents: 2,141

Fig.9

Figure 9 Respondents checked all answers that applied to them.

Internet Cognitive Behavioral Therapy: Lowering Barriers to Improve Treatment Access

A 2018 survey cosponsored by the National Council for Behavioral Health reported that 42% of respondents cited cost and poor insurance coverage as key barriers to accessing mental healthcare.

That's a big enough gap in itself, and it's worse than it seems: Unfortunately, providing insurance coverage of in-person therapy is not the same thing as providing access to therapy because synchronous in-person mental healthcare cannot be scaled. The U.S. simply does not have enough trained therapists. (And, because of ongoing stigma, work and family schedules and other barriers to entry, an employee guided to seek mental healthcare may never make the outreach needed to pair up with a therapist anyway.)

The American Psychological Association estimates that for everyone who needs support to have it, we'd need to add 25,080 more psychologists by 2030, above the baseline estimated need of 107,410 – and those estimates were made in 2018. **More than half of U.S. counties don't have a single psychologist or psychiatrist.**³

Employees need accessible solutions that work, for themselves and for dependents of all ages, and employers need them at scale. That's where telemental health has come in, and in a big way.

SilverCloud Health's digital mental health platform offers on-demand, self-guided therapy that can be done from home – or from a break room, car passenger seat, dining table or any other place where a person can carve a few minutes of privacy for themselves.

When employees first log in, a series of questions guides them to which of the 30+ modules offered might be most helpful to their needs – whether that be coping with anxiety or depression, trouble sleeping, resilience in the face of Covid-19, or managing the mental health aspects of a chronic condition like diabetes. Programs for adolescents and children are also available to support employees' young dependents, thus supporting caregivers who may be distracted at work by the fact someone is in need at home.

The digital-only programs are proven as effective as in-person therapy in reducing symptoms of anxiety and depression in mild to moderate cases. For more complex cases, coaches review users' platform engagement, and are available to escalate care and recommend an in-person engagement.

SilverCloud Health's Internet-delivered Cognitive Behavioral Therapy (iCBT)⁴ :

- 1) **Works.** ICBT via SilverCloud can help people get over a diagnosis of mild to moderate anxiety and/or depression (see Figure 5).
- 2) **Shows results quickly.** Measurable clinical improvement was seen as little as 8 weeks of therapy.
- 3) **Pays for itself.** An 8-week iCBT program was cost-effective when amortized over just a year.
- 4) **Lasts.** Many people who learn cognitive behavior skills during SilverCloud iCBT treatment continue using those skills after therapy ends⁵. With traditional face-to-face therapy, 50% of individuals typically experience a relapse within a year. SilverCloud has proven continued maintenance up to 12 months post-treatment.

Diagnostic Status Change in ICBT Group N =(179)

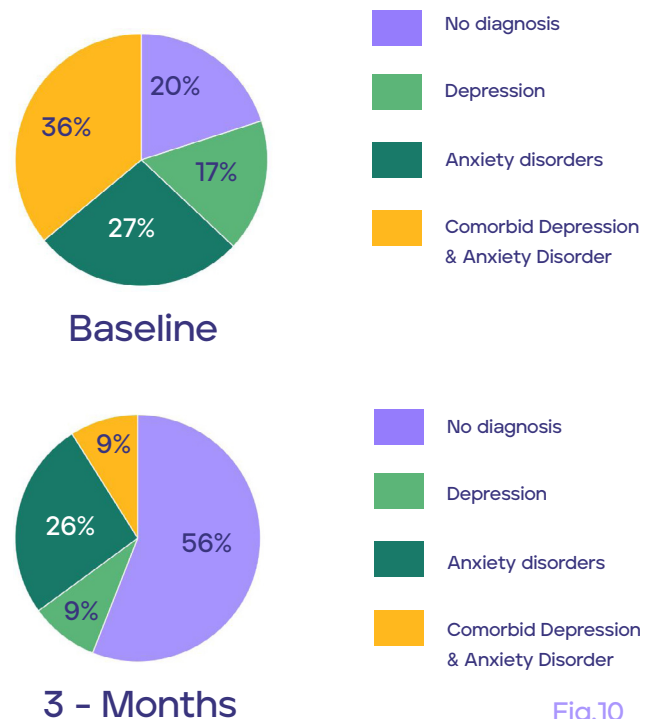


Fig.10

Figure 10 Before iCBT, 80% of people in the trial had a diagnosis of depression and/or anxiety. That number dropped to 44% after 3 months of iCBT.

³ [https://www.ajpmonline.org/article/S0749-3797\(18\)30005-9/fulltext](https://www.ajpmonline.org/article/S0749-3797(18)30005-9/fulltext)

⁴ According to findings from a large clinical trial published in Nature Digital Medicine in June 2020

⁵ According to findings published in Clinical Psychology & Psychotherapy in May 2021

Providers of SilverCloud have experienced up to a 17x return on investment compared to the cost of face-to-face therapy—which can be well over \$1,000 for a single course of treatment. Productivity recovered in the workplace and the long-term wellbeing and physical health benefits proven to come with improved mental health are on top of those comparative cost benefits.



Over 70% of users report a decrease in symptoms of anxiety and depression.

56% of users
with a clinical diagnosis of depression or anxiety were diagnosis-free at 3 months.

More than half
of users showed clinically reliable improvement, meaning their scores for two common mental health screenings, PHQ9 and GAD7, were 6 and 4 points lower respectively than their original scores after completing a SilverCloud program.

Among employers who deployed SilverCloud in the year ending March 2021, 75% of employees improved their depression, and 62% of users moving to a lower acuity level overall (See Figure 11).

In reducing their acuity level, an average employee could gain:



12% productivity/medical-cost improvements by moving down from the Mild/Moderate population



19-21% productivity/medical-cost improvements by moving down from Moderate-Severe/Severe population

17x
return on investment.*

*compared to the cost of face-to-face therapy

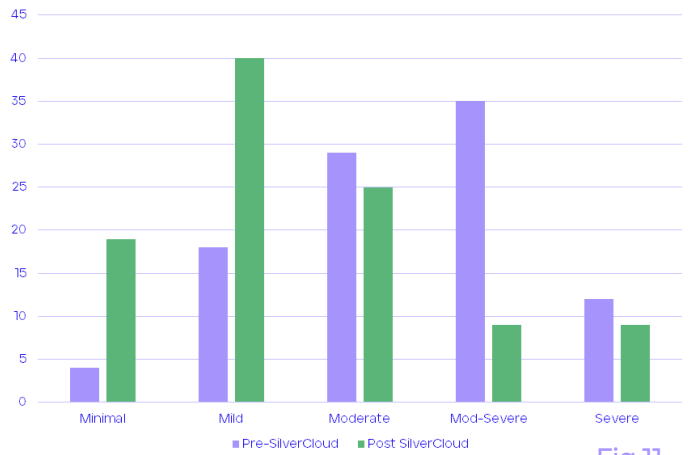


Fig.11

Figure 11 SilverCloud Helps Employees Move Themselves Down the Mental Health Acuity Spectrum

14%

Increase in Productivity

15%

Decrease in Medical Cost

Ready to invest in the mental health of your organization?

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Employers who seek to support employee mental health needs and thus improve at-work performance – and help more people mean it when they say “I’m OK” – can deploy iCBT programming quickly, and employees can expect to experience better mental health and wellbeing within just weeks of joining a program, based on scientific analysis of the therapy programs’ impacts.

SilverCloud can be deployed within a health insurance plan. It can also be deployed through wellness programs, open sign-up, and employee assistance programs (EAP) – thus eliminating any need to wait for open enrollment to inaugurate the new benefit and also ensuring the entire population can access the platform, whether part-time or full-time and regardless of whether the employee and their dependents are insured through the company or another health plan.

Conclusion

Mental unwellness has grown expensive. It's time to invest in fixing it. Data proves that mental health costs companies in both employee productivity and retention – and in the simple fact that human beings are suffering. And these new findings – that employees are not “ok,” even those who say they are – suggest the costs of mental health in the workplace may be severely underestimated.

Methodology

SilverCloud Health surveyed 2,141 employed individuals in the United States in July 2021. Respondents ranged in age from 18 to over 60 and all self-identified as being employed either full- or part-time. Census-balancing was applied to ensure representative distribution among geography, age and gender. The margin of error was +/- 2.16%.

Employers have it in their power to provide access to proven, low-cost, restorative therapies. Providing digital mental health resources can reinvigorate the life-force of their organizations, wherever each individual employee is on the continuum of mental health symptoms and needs.

Additional Resources

Custom data cuts from the SilverCloud 2021 Employee Mental Health and Wellbeing Checkup are available on request, as are tailored analyses of the cost-savings potential of SilverCloud Health iCBT modules based on your employee population.

SilverCloud Health is the world's leading digital mental health company, enabling employers, providers and health plans to deliver clinically validated on-demand programs that improves outcomes, increases access and scale while reducing costs. The company's multi-awardwinning digital mental health platform is a result of over 18 years of clinical research with leading academic institutions.

Today, SilverCloud is trusted by 100s of employers, covering 10s of millions of

employee lives to meet their mental health needs. Leading clinical and research experts have continually validated the effectiveness of the platform through full randomized control trials and real world data. The platform continues to lead the industry with its effectiveness, engagement and range of clinical programs that encompass the full spectrum of mental health needs.

For more information or to request an analysis, visit

www.silvercloudhealth.com/employers

Ready to invest in the mental health of your organization?

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