

CRAIN'S CHICAGO BUSINESS

Roundtable on Mental Health

The pandemic has exposed and exacerbated many workplace-related stressors. To build a happier, healthier workforce, it will take investing in employees' mental well-being.



From left: Judith Allen, Clayton Ciha and Mark Ishaug

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Workplace factors like overwhelming and inflexible schedules are driving many employees to leave their jobs and sometimes their entire field. That has caused many employers to grapple with mental health challenges in the workplace. Three executives involved in workplace health spoke to Crain's Content Studio about how they're addressing these challenges in their own companies.

How prevalent are mental health issues in the workplace? What types of issues are you seeing?

Mark Ishaug: Data showed that 1 in 5 Americans experienced a mental illness pre-pandemic. New research is looking at "post-pandemic stress disorder" at the individual level. "Collective traumas" such as social injustice events, the polarization of politics and extreme weather due to climate change also impact groups and communities. Thresholds is a mental health organization, but we're certainly not immune to these compounding stressors with our own staff. Symptoms of anxiety, burnout and

depression have increased. Employees are needing to take more time off. And, unfortunately, we're losing staff just like other organizations are with the "great resignation" right now.

Clayton Ciha: Healthcare providers have seen an incredible amount of stress and resilience over the past several years. The COVID-19 pandemic, social justice issues and general uncertainty of the future have contributed to workplace strain as rarely seen before. And while healthcare has always been a high-stress industry, the initial uncertainty, fear and continuing long-term expectations brought on by the pandemic have elevated the need to assist our associates with maintaining their mental wellness. In a recent internal survey, more than half of our staff has reported increased anxiety, sadness, loss of appetite and sleep difficulties since the start of the pandemic. The mental and physical exhaustion, as well as some cynicism about our work caused by unfounded claims and resistance to health guidance, particularly the lifesaving COVID-19 vaccines, has led many healthcare professionals to question the meaning in their chosen career.

Judith Allen: Mental health issues are only deemed prevalent if employees share what they are experiencing, so what we have witnessed are usually issues that arise as a result of a triggering event or the deterioration of mood, morale and performance. Only if we are keeping close tabs on staff mental health will we recognize and acknowledge that mental health issues are at play. The fact is that most people don't want to share mental health issues at work, fearing it may impact how they're perceived by peers or supervisors.

What impact has the COVID-19 pandemic had on the need for mental wellness in the workplace?

Ishaug: It's increased the need for awareness and support. When employees are dealing with mental health issues, it impacts their work as individuals and in teams with issues around concentration, creativity, ability to regulate emotions, absenteeism, etc. This increases a company's costs with higher medical costs and health plan spending, more disability claims, and turnover. It's vitally important to support your employees' mental wellness, starting with training for supervisors and managers.

Allen: All the standard operating procedures that we once relied on for continuity or leaned on to justify our rule of order have gone out the window. Where working from home was rarely a consideration pre-pandemic, it became the de facto working method for two years once the pandemic hit. This left everyone to wonder if those lane markers were in fact real. When coupled with the lack of connection and collaboration that helped keep us accountable and working within time constraints, supervisors and managers had to scramble to recreate productivity benchmarks and struggled to balance compassion and job expectations.

Ciha: Healthcare, in particular, has been hit extremely hard by the ongoing strain of caring for patients in difficult conditions and uncertainty. Long hours, too many sick patients, co-workers out because of the virus, and the fear of taking the virus home to loved ones have all contributed to the mental strain on healthcare workers. If nothing else, this pandemic has been a hard reminder that to take care of others, we need to care for ourselves. We must focus on the good in ourselves and our work. If we don't, our patients won't recover and thrive. Organizations and businesses must focus on the mental wellness of their staff to show they truly are cared for and respected. This then flows down to how customers and patients are treated, increasing overall satisfaction.



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JUDITH ALLEN
COMMUNITIES IN SCHOOLS OF CHICAGO

What have you implemented to help improve employee mental health?

Ciha: Ascension Illinois Behavioral Health is one of the largest providers of mental wellness, therapy and addiction services in the Midwest. We turned that expertise inward at the outset of the pandemic, creating virtual peer support groups offered to all our associates, leaders and physicians. These groups were fully anonymous, allowing participants to express their grief and concerns on a non-judgmental, peer-supported basis. The sessions are still offered multiple times a week, run by trained group facilitators. In addition, we've posted multiple self-care resources to our associates intranet site for those who prefer not to participate in the virtual groups. Many of our hospitals have created meditation or mindfulness rooms, allowing for associates and physicians to take a mental break from their busy days for a quick recharge. We've encouraged leaders to round more frequently on their staff, listening and being open to working through their work difficulties with them, as well as encouraging them to take their breaks and time off.

Allen: Communities In Schools (CIS) of Chicago had to take a long hard look at redefining what "productivity" and "accountability" mean. This meant empowering staff to make decisions that helped them reach their deliverables in a timely manner, while letting them decide on the pathways to achieve those goals. We re-addressed our training provided to managers and supervisors, helping them to "see something, say something" when faced with a staffer who appeared to be struggling emotionally. This meant training them in how to recognize changes in staff attitude, morale, mood, performance, and communication style — all of which can be significant markers to a pending or growing mental health issue. We also have arranged to have our clinical administrative staff available to host group conversations. We want staff to feel less isolated and be able to share in a collegial manner without it creating a sense of reprisal or fear in the workplace.

Ishaug: We created interim policies that expanded options for leaves of absence and allowed employees to "borrow ahead" up to 16 days of sick time for COVID-related illness. We provided a guide covering Thresholds employee wellness resources and implemented a more robust Employee Assistance Program (EAP), which is generating positive feedback. We increased communications with town hall meetings, emails and newsletters to provide as much detail as possible to our staff.

What do you think is the biggest obstacle in addressing the needs of mental well-being in the workplace?

Allen: The ability to recognize and acknowledge the importance of mental well-being. Our staff won't typically just walk up and tell us there is a problem, let alone ask for help. Inherently, we keep our personal feelings about work, peers, stressors, anxieties, etc. at home, and never let them surface at work. But when the line between work and life became blurred because of the pandemic, so did our perceptions of what was OK to share. In this environment, the best we can do is create a bubble of safety where staff can confidentially share what they might be experiencing.

Ciha: We have seen the biggest obstacle in getting staff the help they need is to provide them the safe space and accepting environment where admitting they need help and support is rewarded. We can put all the programs together, hold all the outreach and communicate to them, but they must choose to seek the help they need. Starting with simple messaging that it's OK not to be OK seems to be effective in getting associates to engage in their own mental wellness.

Ishaug: I think there are two obstacles. The first is hesitancy to focus on employee mental health due to stigma, lack of awareness and/or feeling like the pandemic is "over." Symptoms of trauma show up months or years after a crisis. Companies should work to improve day-to-day wellness practices and strengthen their leadership skills to support having a "trauma-informed workplace." The second obstacle is viewing mental

health as a separate issue. For example, employees' financial burdens can impact mental and physical health.



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CLAYTON CIHA, ASCENSION ALEXIAN BROTHERS BEHAVIORAL HEALTH HOSPITAL

Can you share a win your company has had with addressing mental health?

Ishaug: While it might seem like a strictly "physical health" decision, Thresholds required COVID vaccinations and the booster for all 1,200 of our people. It was a huge lift, but worth creating a safer environment for each other, our clients and our communities. The vaccination policy provides mental health value with added peace of mind. I'm also proud of the culture we've created where supervisors regularly check in with their staff. It is something that is both routine and valued. No one should go through what we have gone through alone, and I think our staff know they always have someone to talk to.

Ciha: Throughout the course of the COVID-19 pandemic, our behavioral health team has offered regular virtual peer support groups for all our associates and physicians. Recently, we heard from two of our associates who have participated in these groups since they launched more than two years ago. They reported honestly and candidly that these groups and other resources we offered kept them alive. The power of that feedback has redoubled our efforts to bring our message of mental health and healing to our associates as they face the difficult challenges they do, day in and day out. We're proud to be a faith-based organization that cares for the whole person, mind, body and spirit.

What are the short- and long-term benefits of investing in employee mental health?

Ciha: There are incredible benefits to investing in the mental health of our staff, including happier customers or patients who will be more likely to return for additional services, increased engagement with one another, a better sense of belonging and purpose and overall satisfaction on the job. There will be fewer possible disciplinary issues and friction among staff members. By investing in the whole person, mentally and physically, associates will feel they're a vital part of the organization.

Ishaug: Our staff is our number one resource, hands down. When they're happy and safe, it translates to better service for our clients and their lives to grow and prosper. It means our workforce is more likely to stay with us, even though the work is often difficult. It means Thresholds is more likely to recruit top talent in the future, reach more people who need care, and create a better, thriving place to work. Good mental health helps everybody. Research by Deloitte, the National Safety Council, the University of Chicago and others have shown that investing in preventative mental health programs at work generates an ROI of \$2 to \$4 for every dollar spent. For example, Thresholds invested in employees with gas bonuses when gas prices started to spike and a paid holiday honoring Juneteenth.

Allen: Our primary short-term benefit is safety. The nature of our work is community facing, in the education and children space, so we want to ensure that those students, school personnel and partners we interact with feel safe and productive in our interactions. We won't achieve that if our team members are upset, anxious, depressed and not operating with a clear mind and spirit towards our common end goal. Longer-term, the benefit of doing this work is better staff retention and ensuring staff know they are cared for as employees. That is always the bedrock goal.

Can you talk about a few ways that leaders can identify when their employees need help for mental health concerns?

Ishaug: There are definitely signs when someone's mental health is starting to suffer. It's the classic signs — changes in physical appearance, behavior and performance. They might be more pessimistic. They may call out sick more. At Thresholds, we are very fortunate to have a culture that promotes co-workers looking out for each other. We've offered training on mental health, such as Mental Health for Leaders. Blue Cross Blue Shield of Illinois just rolled out a virtual, self-directed program called "Learn to Live," which addresses problems like depression, anxiety, and insomnia. And we're looking forward to offering those programs and more to our staff as well.

Allen: Leaders can identify when their employees need help by engaging with them and getting to know them. If you don't have a relationship or interaction history with someone, it's hard to tell when behaviors or attitudes shift from "normal" or baseline behavior to something more serious. It's hard for us in leadership to not be dismissive or to not lean on our own biases about staff, based on history, productivity, rumor or other

biases. So training on how to separate from all that is helpful. CIS of Chicago is a certified Mental Health First Aid training site. This six-hour, nationally recognized training (from the National Office of Behavioral Health) has a tailored curriculum for both youth and adults, which helps attendees recognize, acknowledge and address mental health issues including signs and symptoms, approach, who to call. We have found this to be extremely helpful for leadership and direct staff support to know how to use compassionate and professional methods to triage a situation before it becomes a crisis.



“IT’S IMPORTANT TO PROTECT YOUR COMPANY AND YOUR PEOPLE WITH WHATEVER RESOURCES YOU CAN MUSTER, TO KEEP YOUR EMPLOYEES MENTALLY WELL.”

MARK ISHAUG
THRESHOLDS

How do you create a company culture where talking about mental health becomes more comfortable?

Allen: We find that external resources help in setting the table to talk about this, but in a way that is intentional, strategic and sustainable. It can't be viewed as a one-and-done. That means train leadership then train staff in two separate groups. We do this because there needs to be buy-in from managers and supervisors. All of this takes time, and we're talking about years of stigma and lack of compassion around mental health issues. This would be a significant change in how we engage human resources, our insurance coverage and personal-time-off allowances (such as mental health days) and language that we use around each other.

Ishaug: There are many ways: offering stress-relief techniques, creating a mental health toolkit, training managers. You also have to listen. Thresholds conducts two engagement surveys every year as well as focus groups and listening sessions. And finally, talking about mental health starts at the top. You have to lead with love and be real. This pandemic has hurt us all in some way, shape or form, and it's good to share

what you're going through. This is an opportunity for company leaders to establish, or bolster, a culture of care and compassion.

How has the recent focus on diversity, equity and inclusion shaped the mental health resources you offer employees?

Ishaug: Validating our staff's experiences and places in the world improves morale. Our staff, just like our clients, come from varied backgrounds and experiences.

Thresholds offers resources that validate individual experiences and consider other things they are impacted by, such as microaggressions, implicit bias and racism. We have long-standing training on cultural humility which starts during new staff orientation, as well as a cross functional Cultural Humility Committee and "sharing space" discussions for employees. We also hired a Chief of Community Engagement and Equity to build partnerships that promote equity and racial justice in our communities. We must continue to focus on inclusion, ensure pay equity and opportunities for advancement and fight mental health stigma in the workplace.

Ciha: In surveying our associates, leaders and physicians, we found to be true what we practice every day — there's no one-size-fits-all solution to mental wellness support needed in the workplace. Culture, race, religion, age and gender and countless other determinants all affect the types of resources people seek out and the types of resources they're most likely to utilize. Though it was clear we're all in this pandemic together, we found individuals are in different circumstances when it comes to important life stressors such as health, financial stability and family support, and the strategies found comforting were different, too.

How can organizations or companies with limited resources be creative in addressing the mental health needs of their staff?

Allen: Connect with other organizations or companies and pool resources together. There are also effective, low-cost strategies companies can pursue. For example, being trained in Mental Health First Aid costs only \$30 per employee for a two-year certificate. Many organizations also have a wellness committee made up of staff members who survey employees and discuss what works best for them.

Ciha: The answer may seem simple, but in busy day-to-day life, it's often forgotten — listen, listen, listen. Associates often will tell you what they need, though not necessarily in the most direct way. Let them know it's OK to not feel OK and be ready to offer resources internally and externally to help. As a leader, take an interest in your associates' lives outside the workplace. Ask them about their families, their activities

and interests. Provide opportunities for connection among your staff. Involve associates in the decisions that affect their work and environment. Allow them to try new things. Allow for breaks and time off with no shame attached. And encourage them to use the resources they have, including employee assistance programs, their physician or faith leader. Often, associates want to be engaged with their organization, work and team, but personal issues or experience gets in the way of them asking. Be ready to open that door for them.