

# Workplace Mental Health In California

A Landscape Analysis

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## Executive Summary

This landscape analysis of workplace mental health in California was developed from a review of case studies and interviews with experts. This document will inform stakeholders as they discuss the development of voluntary standards for employers to support workplace mental health in the state.

The report outlines three main areas: (1) insights into the current environment, including internal and external drivers, that are informing steps employers are taking and their areas of focus; (2) emerging trends and challenges faced by employers; and (3) recommended actions for the Mental Health Services Oversight and Accountability Commission (MHSOAC).

Some 450 million people live with a mental health condition globally, accounting for 14 percent of the global burden of disease<sup>i</sup> and costing the global economy double the combined cost of cardiovascular disease and diabetes.<sup>ii</sup> Though treatments are available for many mental health conditions, the majority of people do not seek help in managing them.<sup>iii</sup> In California, an estimated 6.5 million adults are living with a mental health condition, and people at lower income levels are disproportionately affected. Over the past years, mental health has become more salient in the minds of employers than ever before, with 72 percent of U.S. workers wanting their employers to advocate for mental health and well-being in the workplace. There is also increasing evidence that promoting workplace mental health is not just good for workers, but also good for the bottom line. According to the World Health Organization, every dollar spent on improving treatment for common mental disorders generates a return of four dollars in improved health and productivity.<sup>iv</sup>

Many employers perceive California to be a leader in employer-led mental health services, leveraging state guidelines that strengthen employee access to mental health care and reduce the stigma associated with it. Employers who were interviewed voiced a goal of deploying a holistic approach to wellness (including mental health) to create environments where people can support themselves so they can perform their best at work. Employers are implementing mental health awareness trainings or awareness campaigns focused on mental health, and some are even making the training mandatory for employees. This is often accompanied by the engagement of managers, since leaders who receive training are more likely to share information and be more supportive of mental health needs. In addition, support networks among peers are a tool increasingly supported by employers to supplement access to mental health care providers, and that can help to normalize help-seeking. Employers shared a common view that language around mental health challenges must be carefully considered from the outset and is a critical part of the development of policies related to workplace mental health.

Looking ahead at emerging trends and challenges for workplace mental health, the impact of COVID-19 and measures taken to slow the spread of the virus must be considered, including lasting changes as a result of the pandemic related to continued remote working, altered workplace environments and new strategies for employee interactions. The global mental health movement is driving forward progress in many areas, though advances may be uneven across geographies. Remote care and digital mental health platforms offer great promise to employers, and their use has been swiftly adopted in the current environment. As younger employees enter the workforce, they have brought more openness and increased expectations for employers to support mental health, although at times these preferences are framed as other benefits. However, in multi-cultural environments, employers report continued issues with stigma, particularly along socioeconomic lines. For some advocates, stigma is better characterized as discrimination because of the barrier it creates for people to enter the workforce or perform to their full potential in their jobs.

Employers are invested in addressing the challenges to accessing care that employees are experiencing and will continue to experience despite increased employer support for mental health. Additionally, employers are seeking more effective ways to measure and analyze the impact of support and services, including through treatment outcomes, to better understand the needs of employees.

Employers in California are interested in partnering with the state on defining the attributes of a workplace that supports mental health in order to set standards and demonstrate best practices, and to share these findings with diverse audiences in ways that support their implementation across work settings. There is a significant opportunity for building up the body of research on workplace mental health interventions deployed in the state to inform employer decision-making. Advocates in workplace mental health would like to see state-level policies

reflect research-based insights into effective strategies for mental health support. Employers also see an opportunity for the state to drive forward higher reimbursement rates for mental health professionals to promote better access, alongside metrics gauging the effectiveness of mental health care delivery. Finally, the state is a critical stakeholder in curbing discrimination against people with mental health conditions through both education and regulation.

With these insights, this report will guide a discussion among key stakeholders to develop a set of voluntary standards for employers in California to implement in their workplaces.

# Introduction

## Project Background and Purpose

The Mental Health Services Act is the legal framework for mental health in the state and directs the development of strategies to reduce stigma and unemployment for Californians diagnosed with a mental illness or seeking mental health services. Subsequent legislation, Senate Bill 1113 (Chapter 354, Statutes of 2018), directed the California Mental Health Services Oversight and Accountability Commission (MHSOAC) – from here on out to be referred to as “the Commission” – to create voluntary standards for employers that would promote mental health and wellness in the workplace.

The Workplace Mental Health Project aims to improve awareness of and attention to mental wellness by employers and employees in the competitive employment sector as a strategy to reduce stigma and discrimination, prevent the progression of mental health challenges, and improve the early recognition and appropriate treatment of mental health needs. Two core components of this project are (1) to develop a shared understanding of the challenges of and opportunities for improving behavioral health in the workplace and (2) to develop and promulgate a set of voluntary standards.

To support robust stakeholder engagement in the development of workplace mental health standards, the Commission worked in partnership with One Mind at Work, a global workplace mental health nonprofit organization based in California, to produce this landscape analysis. Our aim was to summarize current trends and needs of employers and employees for mental health in the workplace, including differences and commonalities in access to mental health services, organizational culture change, mental health literacy and stigma reduction efforts.

## How Will the Landscape Analysis Be Used?

The analysis will be a foundational document as we convene stakeholders to discuss workplace mental health in California and to share best practices that will inform the development of voluntary standards.

## Why Focus on Workplace Mental Health?

Most adults spend one-third of their time at work.<sup>v</sup> The workplace and its leaders have a tremendous opportunity to improve quality of life for all people and play a critical role in driving mental health solutions. Employers also benefit from activities that support positive mental health, as studies have shown that for every dollar an employer invests in improving employee mental health, there is a return of four dollars in increased health and productivity.<sup>iv</sup>

We recognize that employers today are encountering an entirely new environment – particularly with regard to employee mental health – as the impacts of the COVID-19 pandemic are felt by communities around the globe. Even though measures like social distancing and self-isolation are only temporary, the effects of these and other pressures may trigger or exacerbate mental health challenges such as post-traumatic stress, anxiety or depression. This evolving situation may be raising important questions and shifting priorities within your organization, and we would like to use this discussion to explore current activities as well as plans for the future.

## Research Methodology

Both primary and secondary research was conducted through literature review, interviews with employers, and Natural Language Processing (NLP) data analytics. Additionally, since 2017, One Mind at Work has developed a variety of insights and recommendations related to workplace mental health in its CHRO Insights Series that were included in this analysis. Building off this material, structured interviews were conducted with a broadly representative array of California employers, in terms of employer size, industry, geography, and sector, so as to better understand their views on workplace mental health, priority areas of focus, and the role the state of California can play in promoting workplace mental health best practices among employers. In addition to employer interviews, we spoke with policy experts, first responders, and healthcare and education professionals to gain an understanding of the mental health landscape in California, including current trends and case studies that cover organizational culture, access to services, mental health literacy and stigma reduction efforts.

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## Current Landscape

### The Global Mental Health Crisis

Around 450 million people currently live with a mental health condition globally, placing mental disorders among the leading causes of ill-health and disability worldwide.<sup>vi</sup> Roughly 14 percent of the global cost of disease is related to mental health conditions – including depression, substance abuse disorders, and other mental illnesses, a figure which is likely an underestimation.<sup>vii</sup> Mental health conditions cost the global economy roughly double the combined cost of cardiovascular disease and diabetes.<sup>viii</sup> The financial cost of poor mental health to employers is most easily illustrated through the sickness absence of employees,<sup>ix</sup> and such absenteeism costs employers \$2,650 per salaried employee per year due to lost productivity.<sup>x</sup> Treatments exist for many mental health conditions, but the majority of people with a diagnosed mental health condition never seek help from a mental health care professional.<sup>xi</sup>

However, mental health is not just the absence of a mental health condition, but a “state of mental well-being” as defined by the World Health Organization.<sup>xii</sup> Multiple social, psychological, and biological factors influence individual mental health, and poor mental health is associated with “rapid social change, stressful work conditions, gender discrimination, social exclusion, unhealthy lifestyle, physical ill-health and human rights violations,”<sup>xiii</sup> as well as certain psychological and personality factors and genetic pre-dispositions.

### California-Specific Figures and Statistics

Nearly 1 in 6 California adults experience a mental illness of some kind (roughly 6.5 million adults). One in 24 have a serious mental illness that makes it difficult to carry out major life activities, and 1 in 13 children has an emotional disturbance that limits participation in daily activities.<sup>xiv</sup> In California, the prevalence of serious mental illness varies by income, with both children and adults at lower income levels experiencing much higher rates of mental illness.<sup>xv</sup>

Those with diagnosable mental illnesses represent only a fraction of the working-age adults experiencing mental health challenges related to stress, anxiety and depression. However, roughly two-thirds of adults with a mental health condition in California have not received treatment.<sup>xvi</sup> Compared to the U.S., California has a lower rate of suicide, though the rate varies by gender, age, race/ethnicity, and geographic region.<sup>xvii</sup>

### The Business Case for Promoting Workplace Mental Health

According to the World Health Organization, every dollar spent on improving treatment for common mental disorders generates a return of four dollars in improved health and productivity.<sup>xviii</sup> Research suggests that Employee Assistance Programs provided by employers improve employee mental health across a spectrum of disorders and reduce employee absentee rates.<sup>xix</sup> Some 72 percent of U.S. workers want to see their employers advocate for mental health and well-being in the workplace, though only 14 percent of employers report senior leaders discussing the importance of mental health openly.<sup>xx</sup>

### The Current Role of the State of California

Employers perceive California to be a leader in employer-led mental health services. Under the Mental Health Services Act, the Commission is to develop guidelines that will help companies strengthen access to mental health care for their employees and reduce the stigma associated with it.<sup>xxi</sup> This includes protections for people with substance abuse issues to help them voluntarily seek treatment to facilitate their return to work. California law also protects employees based on perceived disability under the General Prohibitions Against Discrimination on the Basis of Disability. Even if an employee does not disclose to their employer that they have a mental health disability the employee may claim discrimination on the basis of a perceived disability.<sup>xxii</sup> The Governor appointed a “Mental Health Czar” in 2019 to help improve mental health coordination of efforts across the state. The role is to “inform the state’s work as California builds the mental health system of tomorrow, serving people whether they are living in the community, on the streets, or if they are in jails, schools or shelters.”

California leverages tax systems and local strategies to direct funding for mental health services. Proposition 63 (the Mental Health Services Act) in recent years has provided \$2.5 billion in tax dollars annually for county mental



health services, including programs targeting the most at-risk, such as people who are homeless, as well as incarcerated populations and children. This Act imposes a 1 percent income tax on personal income in excess of \$1 million.<sup>xxiv</sup> However, among the 58 different county-level care delivery systems in California, experts report limited coordination and support for people with mental health challenges. Employers are a critical access point to mental health support to prevent mental health needs from becoming severe and disabling, and to build resilience.

## Employer Insights and Case Studies

A synthesis of our interviews with California employers, policy experts and healthcare and education professionals elevated six areas that present the greatest opportunities to positively impact workplace mental health:

### 1. Holistic Approach to Health, Both Physical and Emotional

Increasingly employers are making commitments to care for employees, even when not required by law (such as providing an Employee Assistance Program or EAP) out of recognition that mentally healthy employees are more productive employees. For some, this includes a comprehensive view incorporating “spiritual health [which is broadly defined,] mental health and physical health.” Employers voiced a goal of reducing stigma and creating environments where people can support themselves so they can perform their best at work. This was particularly prioritized in high-stakes employment environments, including a proactive and preventative approach to mental health in fields where absenteeism or presenteeism are not acceptable options.

Employers are also reacting to external phenomena, such as the widely reported suicides of Anthony Bourdain and Kate Spade, prompting several business leaders to speak out regarding suicide and mental health to their workforces. Some organizations have trained supervisors worldwide to ensure that all managers understand mental health basics.

Employers are considering ways that they can involve and prioritize families, with leadership communicating that people should strike a balance of time away from work. In one example, an employer participating in a study on resilience expanded the study to include spouses after seeing promising benefits to employees.

### 2. Reducing Stigma Through Training

Employers across California are implementing trainings and awareness campaigns focused on mental health, including insights on the experience of living with a mental illness, and some are making this training mandatory for all employees.<sup>xxv</sup> Examples include virtual discussions and streamed webinars to disseminate educational information on different mental health issues.<sup>xxvi</sup> One program focused on training employees to interact with external audiences such as clients and customers, which “created a perception of value connected to the training and gave participants a perception of comfort in participation.” In addition, employers highlighted the importance of culturally relevant education because employees may hold different expectations and stigmas depending on their background.

Employers stated that trainings to reduce stress and build resilience can be an important element to their mental health programs. One even noting that resilience is the leading determinant of success in their field, but it cannot be the expectation of the organization that these methods would be sufficient for all employees. Similarly, mental health apps available for employers can be a useful tool but may also offer insufficient or ineffective support for mental health challenges and should be integrated into a more comprehensive strategy.

### 3. Top-Down Approaches and Management Buy-In (Executive Team to Front-Line Supervisors)

Leadership engagement is a critical element of mental health support for many employers – leaders engage in setting the commitment, amplifying messages, and demonstrating an example of attention to mental health in the workplace. Additionally, leaders who receive training share more information about mental health and mental health resources, are more supportive of employees’ mental health issues, and actively encourage employees to use available resources.<sup>xxvii</sup>

Employers shared that without support from the top levels of the organization, there will be no meaningful change toward a more mentally healthy workplace. For this reason, leadership support for new initiatives and expanding programs was essential throughout the development phase as well as during implementation. Employers highlighted that they were able to gain buy-in from multiple departments and personalize tailor the concepts for

different organizational functions. They focused on accommodating competing priorities and gaining commitment from across departments so leadership would be supportive. One employer noted an issue with one part of management approving activities but others would not, so the project leads would continuously need to gain buy in from all levels. This meant being very flexible and receptive to the needs of various parts of the organization. Another noted a need to facilitate communication across management on workplace mental health issues, building on a growing interest to align efforts.

Some employers described creating different sets of communication tools, one aimed at leaders and one aimed at the general workforce, discussing support for mental health to reach these core audiences more effectively. Another employer described reorganizing the management team for a mental health initiative in order to better align the organizational leadership in recognition that it would help the effort have greater impact across the employee community.

Some employers said that even without a formal mental health mandate, there is a will among organization leaders to provide high quality, comprehensive coverage to employees and families. Training deployed by employers at the management level explored ways to provide support, including giving examples of tools for various audiences. Additionally, employers noted that it was important to allow time to fully implement new programs and practices, as to not “overwhelm” employees with training and to see effective adoption. Some employers noted a major barrier was the recognition that there were employees with mental health challenges who were not seeking help. In these instances, leaders of the organization were active in the development of a multi-faceted communication efforts to raise awareness about available support and services.

#### 4. Professional and Peer Support

Employers have invested time and energy investigating and attempting to address the barriers related to seeking support, including around the various types of support that employees are willing to engage. Often, employers are deploying a combination of professional mental health support services and peer support networks to meet these needs. Some employers are targeting workforce sections – for instance medical residents and nurses – but also allowing people to self-assess by offering “drop-in” or informal appointments to learn about available support tools and resources. Some employers noted that confidentiality in external employee assistance programs boosts participation; and for employers with an internal network of mental health care providers, employees were connected with a therapist external to the organization to preserve anonymity.

In fields that experience high levels of trauma, employers noted that a high number of employees resist professional services, instead confiding in colleagues or peers who “get it.” In particular, these employees seem to be comfortable addressing these traumatic experiences with colleagues who have also experienced them. In some instances, employers have attempted to bridge the gap between peer support and professional mental health services by encouraging peer support specialists to disclose their usage of an EAP as a way to destigmatize help-seeking. Sharing resources in the context of a personal experience helps to demonstrate their value.

Several employers noted that peer-to-peer support was critical in their field because administrators and program directors are closely engaged in workplace mental health. This included a focus on substance abuse disorder, an area of mental health that can be highly stigmatized. Peer networks are a tool for employers in rural communities as well, where there are fewer mental health care providers available, resulting in long wait times to be seen. In these cases, training of managers and other senior staff was used to provide initial mental health support and counseling and elevate more acute cases to clinicians.

#### 5. Access to Services

According to the Society for Human Resource Management, 78 percent of companies in the U.S. offer an Employee Assistance Program (EAP) with mental health resources.<sup>xxviii</sup> Many California companies surveyed have adopted an integrated EAP that provides a consolidated portal with tools, including short-term counseling and advice to improve employee mental well-being. Also utilized were specific online trainings on managing grief and suicide awareness.

In some instances, employees helped organizations to discover that provided insurance coverage on mental health was uneven or inadequate, leading the leadership to investigate the percentage of mental health care

professionals in the network and the number offering telehealth or virtual options. One company shared their finding that 90 percent of physical health care providers were in-network while that was the case for only 20 percent of the mental health care providers, leading the organization to push for more in-network options as well as virtual support meetings and telehealth services for mental health. Employers also noted a strong desire for more data driven treatment approaches and care options for mental health, including routine exams and direct access to mental health therapists.

#### 6. Communication Strategies and Mental Health Information Dissemination

Employers shared a common view that language around mental health challenges must be carefully considered from the outset and is a critical part of the development of policies related to workplace mental health. Employers recommend using words like “wellbeing” and “mental health” rather than references to specific conditions or terms that imply a deficiency. Language should be welcoming and friendly, with some employers recommending moving away from clinical or even mental health terms and reorienting to community-based language understanding in everyday interactions. Many employers are striving to communicate with their workforces in ways that resonate with those specific audiences and using examples that relate to those employees and their situations. Employers also sought continual feedback regarding making materials relevant to employee groups, including how to best tailor information to support its integration into employee activities.

Employers have deployed training modules that focus on providing managers with the skills needed to create a “resilient work environment where all employees feel comfortable discussing their mental health needs, thereby reducing stigma.” Others have taken a multi-faceted approach that includes communications, training, interactive meetings and storytelling capturing how individuals in the organization have been personally affected by mental illness.

#### The Impact of COVID-19

The COVID-19 pandemic has lasting impacts on all aspects of society, and the unprecedented public health crisis is having a significant effect on mental and emotional wellbeing. Employers are preparing for lasting changes as a result of the pandemic, including continued remote working, altered workplace environments and new strategies for employee interactions. There has been an increase in the availability of virtual solutions for mental health and changes in employer prioritization and perspectives around mental health that are likely to have lasting impact as well.

Some organizations have been able to transition to an entirely virtual operating model as the environment required, with some employers reporting that increased video conferencing and concern around the effects of quarantining have brought colleagues together.

However, so-called “warm lines” and hotline utilization for mental health support has increased over 800 percent, and there has been an increase in suicide rates. Mental health conditions have been characterized as the “second curve” of the pandemic (the first curve being the incidence of people with COVID-19) driven by stress and anxiety related to the current environment, possible barriers to accessing medications and mental health care providers, or even the loss of insurance and income (see Figure 1). Several studies demonstrate a correlation between a rise in unemployment and an uptick in mental health issues.<sup>xxx</sup> including in people with no history of mental illness.<sup>xxx</sup> Collective grief, prolonged physical distancing and associated social isolation as a result of the pandemic has the potential to trigger widespread mental health challenges. A recent study conducted a cost driver analysis, using national insurance claims data and found that 60 percent of overall medical expenditures are driven by the 23 percent of members who have mental or substance use disorders. An increase in new behavioral health cases will lead to a substantial increase in medical costs for insurers and employers.<sup>xxxi</sup>

Employers shared that contingency planning and the rapid creation of response teams have helped to navigate challenges related to COVID-19. However, despite having emergency plans in place, leaders did not feel fully prepared in their response. Organizations are now testing means of support for employee mental health in remote

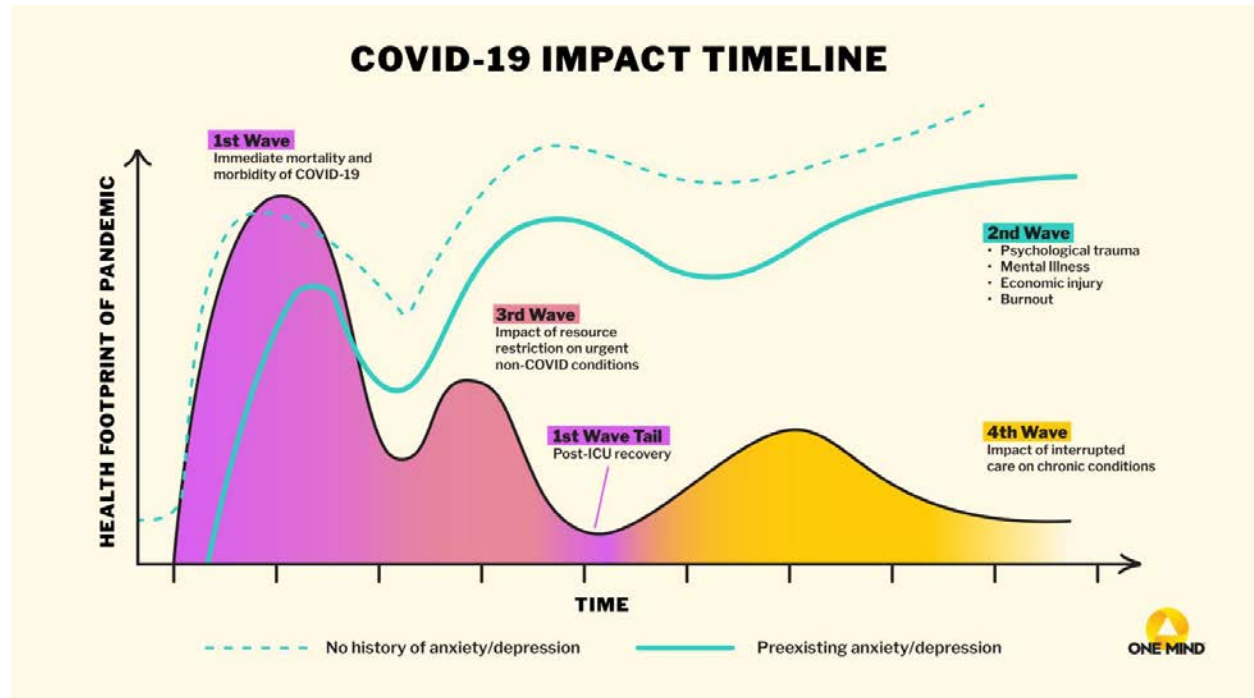


Figure 1. A graphic illustrating the “second curve” of the COVID-19 pandemic, which is characterized by longer-term psychological trauma, mental illness and economic injury that is to follow the immediate impacts of the pandemic.

environments, including partnerships with mental health care providers outside of their communities (including other states) to meet demand. The Business Group on Health conducted a survey in April 2020, outlining mental health trends of large employers, and finding that over nine in ten respondents (93 percent) are encouraging employees to utilize EAPs during the pandemic and over two-thirds of respondents (68 percent) are actively encouraging employees to use telemedicine during the COVID-19 crisis.<sup>xxxii</sup>

## Emerging Trends and Challenges

Trends over the last 6 months demonstrate diverse employer mental health conversations. Top trends in California workplace mental health include: Access to mental health services, Workplace Culture, Mental Health Treatment, Company Mental Health Strategies, and Organizational Culture Change. A Conversational Analysis was conducted to evaluate the state of mental health in California workplaces using a Natural Language Processing (NLP) tool that reads millions of documents including news, surveys, social media, and forums. The analysis (see Figure 2) shows topical clusters of over 2114 stories from the last two months of 2019 and the first four months of 2020.

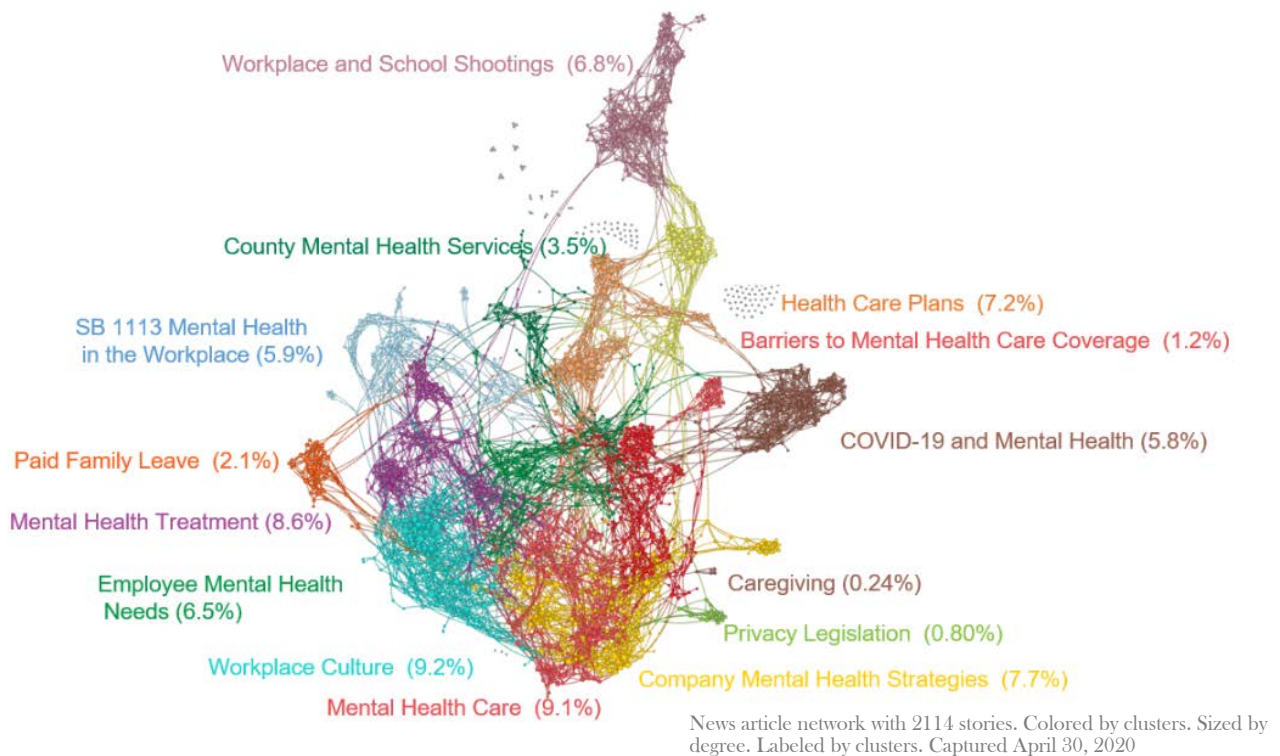


Figure 2. Results of a Natural Language Processing (NLP) analysis graphically displaying 2114 mental health-related stories into distinct topical clusters. The analyzed stories were published between November 2019 and April 2020.

## Advancement of the Global Mental Health Movement

Recently, celebrities and public officials have publicized the struggle of mental illness and made great strides in normalizing the discussions around depression, anxiety and suicidality, among other conditions. Advocacy organizations like Mental Health America have disseminated messaging that has also elevated public understanding of mental health. Globally, initiatives are advocating for improved delivery of mental health services and interventions, particularly in low- and middle-income countries. The movement has gained momentum but also highlighted the persistent issues that remain, including stigma, lack of access to support and services, and the continued disparities between countries.

Employers noted a sense of progress in people willing to connect as human beings rather than coworkers/employees, and in people leading their own mental health advocacy through being open about their own experiences and needs.

## Increasing Acceptance for Remote and Virtual Care Options

As a result of the current environment, employers have seen a dramatic increase in the number of people working from home and are strategizing ways to keep them from feeling isolated and ensure they are still engaging as part of the team. The movement to working from home has accelerated a shift that was already taking place to embrace remote care and telemedicine, options which advocates also state are more convenient for users and delivered less expensively. Remote care is also often a preference for employees who are reluctant to interact with mental health support in the workplace, and employers report building evidence that digital tools can have a beneficial effect, with usage that is on par or greater than more traditional EAP services.

Key challenges remain, however, for digital and remote care, including the difficulty in maintaining individual engagement with app-based support. Employers also questioned the standards for evaluation used for digital platforms and telehealth, calling for sufficient data to demonstrate that the less expensive virtual services still had positive outcomes for users.

Employers were adamant that remote work is changing how they operate for the foreseeable future. They discussed that they are creating new strategies for recognizing mental health issues remotely and providing appropriate support from a manager perspective, as well as trying to identify successful approaches and planning to make appropriate adjustments in the future. From an employer perspective, there was a strong desire to accommodate people who will take advantage of both in-person and remote options, both in their work settings and in accessing mental health.

## Shifting Demographics in the Workforce and the Impacts on Culture and Services

Many of the younger employees joining the workforce have brought more open attitudes regarding mental health and different expectations for workplaces. Employers are striving to recruit and retain these workers, with one noting that in the same way they would encourage alumni to recruit from their university, they encourage recruitment from mental health groups as a way to continue to expand representation of people living with mental health conditions. Another employer shared that younger workers are interested in organizations that provide proximal indicators of a positive culture or work-life balance, e.g. generous benefits, support for new parents, and other resources.

A critical contributor for some employers to the development of effective programs and policies was an accessibility network of people with visible and nonvisible disabilities, while others have engaged specialized consultants or legal experts to ensure robust compliance. However, in some multicultural environments, employers may have a greater need for stigma-reduction activities to overcome cultural barriers. Employers were optimistic that remote care and digital tools would continue to reduce the stigma of mental health challenges in these populations, but that socioeconomic disparities would linger.

Mental health advocates have called for mental health to be considered alongside physical health in terms of accommodation (not unlike compliance with the Americans with Disabilities Act) and with the goal of ending discrimination. Employers are responding positively to the message that people living with mental illness can thrive in their jobs and are capable of great achievement with the right support.

## Continued Reduction in Stigma, but Discrimination Still Persists

Stigma surrounding mental health conditions prevents many employees from accessing available mental health benefits and resources,<sup>xxxiii</sup> and employers in California view reducing negative perceptions associated with help-seeking as a core priority. An emerging theme in California was the replacement of references to “stigma,” using instead the word “discrimination” to highlight the barriers to workforce participation for people with visible signs and symptoms of mental illness. Advocates related these obstacles to those faced by people with physical disabilities.

Employers raised concerns that attempts to address stigma could be ineffective if they set unrealistic expectations about the ability to self-manage mental health challenges, like grief or depression. In some fields, employers are also encountering “compassion fatigue” which can make an empathetic response to colleagues experiencing a mental health challenge more difficult. Efforts to combat these perceptions included multi-pronged strategies for awareness and support.



## Persistent Inequality in Access to Care

Even in countries with an advanced response to mental health, there are inadequate numbers of mental health care providers, and this remains true in California. There are not enough mental health professionals, particularly in non-urban settings, to provide a consistent level of support to every person with a mental health challenge or condition. One of the challenges employers in California experience is that mental health insurance networks are often not able to meet the demands of the population served.

Reimbursement rates for providers in insurance networks remains a core issue, forcing many employees to seek help outside of the network at high personal cost or to not pursue care. Increasingly, employers are considering virtual care tools, including digital platforms, to fill the gap. Some EAPs have long-standing virtual options but had low utilization until the recently when the environment has forced users to explore this option.

In order to offset needs in the most urgent cases, employers are deploying more resources in settings impacted by crisis – whether directly related to the business (e.g. bank tellers victimized in a robbery) or connected by proximity (e.g. an office located in a city attacked by terrorists.) These critical incident responses target employees for additional mental health support based on their role, location or other factor instead of individual need.

The shortage of professional service providers is a significant factor in lack of access alongside cost barriers. Increases in the number of unemployed people, and therefore people without employer-provided insurance, are likely to further negatively affect access.

## Challenge of Measuring Outcomes and Strategies for Success

Organizations have been moving away from utilization of available services as the primary measure for mental health support, instead combining this information with user satisfaction data, including leveraging social media for online feedback opportunities. Others have engaged third party assessors to apply outcome measures in order to understand the impact of available programs and services. Employers predict that this same level of scrutiny will be applied to telehealth and remote care moving forward. Many employers discussed the benefit of implementing mental health programs and best practices, but they continue to need better data to analyze the impact of specific interventions. This lack of quantitative, company-specific evidence can limit employers' efforts in mental health.<sup>xxxiv</sup>

Employers observed that in settings with higher rates of trauma for employees, the impact of mental health support may be obscured, but is still critically important. Professionals at the front lines of crisis response, for example physicians and nurses in the current environment, will continue to work with sick patients and will continue to be retriggered time after time causing their mental health to suffer even while they are engaging with available support.

## Recommendations from Employers for the State of California

### State-Level Guidance on Mentally Healthy Workplace

Employers in California are looking for state-level guidance that would define the attributes of a workplace that supports mental health, shaped by experts and informed by a diverse consortium of stakeholders to set standards and best practices. Further, employers were interested in partnering to raise awareness through the development of toolkits (preferably by occupation), conferences, virtual events, and the production of research outlining best practices for various sectors and workplace settings.

### Quantifying Costs Related to Workplace Mental Health

Employers report having difficulty collecting and analyzing mental health cost data.<sup>xxxv</sup> Further, employers noted few studies specific to employer mental health policies in California. Existing research is largely outdated, and there is a significant opportunity for large-scale research on workplace mental health interventions deployed in the state to inform employer decision-making.

## State Mandates for Paid Leave and Other Benefits

Advocates in workplace mental health would like to see state-level policies reflect the research that is available, including for the management of mental health challenges like grief or for people recovering from trauma, which call for allowing for more paid leave or other specific interventions. Leaders see state and federal legislation and regulation as a key mechanism for bringing about needed change. <sup>xxxvi</sup>

## Promote Higher Reimbursement Rates for Mental Health Professionals

Employers also see an opportunity for the state to drive forward higher reimbursement rates for mental health professionals to promote better insurance coverage networks. The state has a key role in convening employers calling for increased reimbursement rates as well as the implementation of metrics gauging the effectiveness of mental health care delivery.

## Curbing Discrimination

Finally, the state is a critical stakeholder in curbing discrimination against people with mental health conditions through both education and regulation.

## A Strategic Framework

The Commission may consider developing a multi-tiered framework that outlines strategies and supportive services that employers should offer for employees with varying levels of need. For example, there are strategies that are important to offer for all employees that support mental wellbeing and build resiliency. These can be integrated into existing wellness programs. Additionally, organizations should offer additional services and support for employees with emerging mental health needs, time-limited needs, or who are in recovery. Examples of these may include Employee Resources Groups or EAP's. Finally, when employees need acute care, are in crisis, or at high risk, employers should be ready to respond with an array of service options, accommodations, and crisis plans.



## About MHSOAC and One Mind at Work

### Mental Health Services Oversight and Accountability Commission (MHSOAC)

The Mental Health Services Oversight and Accountability Commission is responsible for overseeing the implementation of the Mental Health Services Act (MHSA) in California, which includes holding public mental health systems accountable; providing oversight for eliminating disparities; promoting wellness, recovery and resiliency; and ensuring positive outcomes for individuals living with serious mental illness and their families. In collaboration with clients, their family members, and underserved communities, The Commission ensures Californians understand mental health is essential to overall health.

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### One Mind at Work

One Mind at Work is a non-profit focused on the development and implementation of a gold standard for workplace mental health and well-being. One Mind at Work believes that a committed group of business leaders can transform the way we view and approach mental health, brain fitness and well-being in the workplace, how healthcare is purchased and provided under the new paradigm, and how we can gain equity, collaboration and parity between physical and mental health.

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