



# The Mental Health of the London Workforce

Mental health provision by employers

#### **Summary**

The Policy Institute at King's was commissioned by the Northbank, Victoria and Victoria Westminster Business Improvement Districts (BIDs) to analyse how the mental health of London's workforce can be better supported in the workplace. This briefing note summarises the project's key findings, with further detail available in two separate reports reviewing the evidence on workplace interventions<sup>1</sup> and setting out insights from interviews with local businesses.<sup>2</sup>

#### **Research methods**

This study had two main elements. First, the research team conducted a rapid assessment of the best available evidence around work-based mental health interventions and initiatives. This review focused on identifying effective interventions and initiatives, as well as the settings in which they are effective.

Second, we conducted two rounds of interviews with representatives from organisations based in the three BIDs in May 2020 and February 2021. We sought to understand the nature of the most pressing mental health challenges faced by their employees; how these organisations supported their wellbeing; the impact of the pandemic on mental health; and their recommendations for other organisations that are considering developing a mental health programme for their own employees. Although the study commenced prior to the emergence of Covid-19, it was subsequently adapted to also explore experiences during the pandemic and the many changes that this brought to workplaces and working practices.

#### The mental health of the London workforce in context

Every year, one in five of London's 5.6 million working age adults experience symptoms of a mental health condition such as anxiety or depression.<sup>3</sup> This has major economic consequences: nationally, the total costs of mental ill health amount to more than 4

1 in 5

adults in London

experience symptoms

of a mental health

condition each year

per cent of GDP, largely due to lower employment rates and productivity, and greater spending on social security programmes.<sup>4</sup> A 2018 report by the Greater London Authority found that lost output in London associated with poor mental health costs between £6.86bn and £7.55bn every year.<sup>5</sup>

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Mental ill health has profound social impacts and reflects existing health and social inequalities which have been further exacerbated Beyond these economic considerations, mental ill health has profound social impacts and reflects existing health and social inequalities which have been further exacerbated by the Covid-19 pandemic.<sup>6</sup> Emerging evidence on the impact of the pandemic and first lockdown has found that the mental health of the UK population declined at the onset of the pandemic. Poorer mental health outcomes, including increased stress, anxiety and depression, have been associated with: being younger; being female; being in a recognised Covid-19 risk group;<sup>7</sup> living in areas affected by lockdown; struggling financially; having a pre-existing mental health condition; or Covid-19 infection.<sup>8</sup>

The pandemic has refocused attention on mental health and this study, which was conducted over the first year of the pandemic's course, also aims to provide insight into the experience of London workers and how their organisations supported their wellbeing during this time.

#### Key findings from the study

## Available evidence on the effectiveness of workplace mental health interventions is sparse and not systematic

We identified a range of research studies looking at the impact of workplace mental health and wellbeing interventions. However, the overall evidence base for the effectiveness of these interventions is not strong.

The huge range of interventions and outcomes that the studies measure makes it difficult to reach robust conclusions as to the effectiveness of interventions and in what circumstances they are effective. There is also a lack of evidence from which to draw conclusions on the optimum duration, intensity or delivery mode of interventions, and on how interventions can be combined to increase effectiveness.

## However, some individual and organisational workplace mental health interventions show promise

Physical activity, such as yoga, walking and aerobic and strength training, have been found to improve wellbeing in the workplace, and are associated with reduced symptoms of depression and anxiety in participants, at least in the short-term.

Contemplative interventions, such as mindfulness practice, were associated with significant improvements in psychological distress, anxiety, wellbeing and sleep.

There is also some evidence of positive effects for resilience training, which aims to adjust how a person responds to potentially stressful situations, on mental health and subjective wellbeing outcomes (most commonly depression, anxiety, stress and negative affect/mood).

Organisational-level interventions around job control, reduced workload and job redesign (in which job characteristics are changed to improve job quality, such as increasing support, task variety or skill use) have also been found to have a positive effect on employee wellbeing. There is much less evidence on individual-level interventions than organisational-level interventions.

However, few studies look at the longer-term effects of interventions and where they do, they tend to find that any positive effects diminish over time. Factors that can potentially impact on the effectiveness of interventions include the mode of delivery, duration of intervention, the use of interventions in combination and the characteristics of the target group.

## Interviews revealed a range of factors contributing to mental distress in central London businesses

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Managing workloads was by far the most reported source of work-related mental distress for staff in these organisations Managing workloads was by far the most reported source of work-related mental distress for staff in these organisations, with commuting stresses including the expense and unreliability of public transport also widely reported. Personal mental health concerns included financial pressures, and for younger staff, lower paid, less secure roles and living in shared housing.

Younger staff were generally thought to be more comfortable discussing mental health at work and have stronger expectations of employers to support their wellbeing.

The impact of poor mental health on organisations included lower staff morale, low productivity and staff absences through long-term sick leave.

## Most organisations provide some mental health support, but the nature and uptake of this varies

Almost all organisations have incorporated mental health support into their operational processes, including wellbeing check-ins and formalised guidance on supporting employee wellbeing. External mental health support providers, such as Employee Assistance Programmes were also widely used by organisations, although the take-up rate by employees is unclear.

Peer-led mental health support, such as Mental Health First Aid training, was also a popular resource. These interventions were reported by interviewees to increase employee engagement in and help normalise conversations about mental health at work.

Almost all organisations had processes in place to escalate support for employees experiencing poor mental health, including signposting to medical or specialist support and developing a plan to support their mental health at an organisational level.

## The Covid-19 pandemic presented new challenges for employers and employees – but also opportunities

Experiences of employees during the first lockdown were mixed. Health anxieties, feelings of loneliness and maintaining a healthy work/life balance were commonly

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Interviewees noted that many found working from home, having more flexibility in working hours and avoiding a daily commute beneficial to their mental health. reported. More positively, interviewees noted that many found working from home, having more flexibility in working hours and avoiding a daily commute beneficial to their mental health.

During the third lockdown, those without adequate workspace, particularly younger staff, those living alone and those with caring responsibilities, experienced strains on their mental health.

Other positive developments identified by interviewees by the time of the third lockdown included more open discussions of wellbeing at work and increased mental health support provision by organisations.

#### **Recommendations for organisations**

Interviewees were asked what advice they would give to other organisations looking to better support the mental health of their staff. Responses consistently emphasised the value of a model that is designed bottom-up, taking into account the needs and preferences of all staff, but led from the top, with strong leadership and commitment to a supportive working culture.

Interviewees recommended that organisations planning to develop a mental health support programme tailor it to their unique workforce rather than simply import programmes from other companies.

Organisational leadership has a profound influence on instilling a supportive, open culture around mental health. Ensuring that wellbeing practices are meaningfully embedded in organisational activities and policies requires a commitment from team leaders.

Meaningful engagement and consultation with employees about their mental health and how the organisation can effectively support them was strongly advised to ensure that the mental health offer reflects and responds to staff needs.

#### **Concluding thoughts**

There is increasing awareness of the value of better workplace support for mental health, both for individuals and for organisations, and this need has only been highlighted further during the Covid-19 pandemic. Organisations that participated in this study demonstrated a commitment to promoting wellbeing for their employees, building and refining their mental health offer with engagement from all levels of the organisation.

However, we found that while there are many different kinds of workplace interventions available and promising evidence for a number of them, the lack of high-quality evaluation studies means it isn't possible to treat the evidence identified in the literature review as conclusive.

This underlines the need for more high-quality research in this area, and employers have a vital role to play in this. By working with researchers to trial and evaluate workplace mental health support programmes, the opportunity exists to ensure that these programmes deliver benefits to employees and businesses.

#### **References**

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