

# Mental Health America of WI

## **Workplace Mental Health: *Taking Wellness Programs to the Next Level***

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# History

- **Medicaid Infrastructure Grant (circa 2008)**
  - Trainings, survey, manager training modules
- **Wisconsin Partnership Program (UWSMPH)**
  - Development Grant (2011-2012): survey, key informant interviews, focus groups
  - Implementation Grant (2013-2016): Manager training, employee communications.



**Wisconsin  
Partnership Program**

UNIVERSITY OF WISCONSIN  
SCHOOL OF MEDICINE AND PUBLIC HEALTH

# Partners

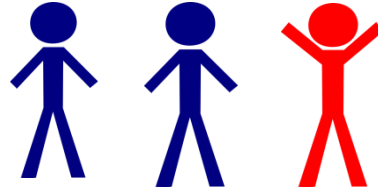
- Wisconsin United for Mental Health (WUMH)
  - Anti-stigma coalition
- The Alliance 

**THE ALLIANCE**  
Employers moving health care forward
- The Business Health Care Group 

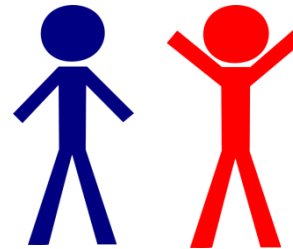
Business Health Care Group  
*Driving Meaningful Change*
- Wisconsin Initiative for Stigma Elimination

# MIG Grant Survey Findings

- Almost 2/3 of respondents believed behavioral health issues are “somewhat” or “very” prevalent in their workplace.



- Yet almost half reported that their workplace does not have a specific plan in place to address employee mental health or wellness.



# MIG Grant Survey Findings

- Roughly a third report that supervisor/managers in their workplace are ‘not at all prepared’ or ‘poorly prepared’ to effectively deal with employees who have behavioral health issues that affect their work performance.



**MIND THE GAP**

# Development Grant Findings

- Key Barriers
  - Stigma, Distrust of Management, Privacy Concerns
- To the degree manager training is provided it often does not cover mental health
- While many employers offer EAPs, there is a sense that what is provided is fairly minimal and underutilized.

# Development Grant Findings

- Employers often feel constrained by the legal issues surrounding privacy, confidentiality and potential discrimination concerns related to HIPAA and the ADA.
- Legal departments may dictate what a supervisor or manager can or cannot do.



# Development Grant Findings

People with mental illnesses don't  
get casseroles





# Key Recommendation

## Implement Manager Training

Most employers responded favorably to the supervisor/manager training but offered a variety of suggestions for improving it to make it more useful in their work settings



# Implementation Grant

- Modify and implement training
  - Built around stories of three pairs of employees/supervisors
- Employee communications
- Strong evaluation component (including employee and manager surveys)
  - most initiatives measured only change in contacts to EAP, etc.

# Employee Communications

- Landing pages for each employer
  - general resources, organization specific resources
- Employee messaging
  - Talking about MH at work;
  - Recovery and resilience;
  - Stress
- WISE Resources

<http://rogersinhealth.org/resources/resilience-and-recovery-workplace>

# Findings

- Challenge working with employers over the long term
  - Lost 7 of our 10 employers
- Found a reduction in perceived sadness, anxiety and depression and the effect of these on performance
  - Despite manager participation not being especially robust

# Findings

- Managers who did complete training showed distinct improvement on self-efficacy. Also positive changes with regard to stigma.
- At final, managers were more likely to be “extremely sure” they could identify an employee who would benefit from referral to HR/EAP and that they would refer.

# Findings

- Overall culture shift but difficult to pinpoint source.
  - May be that these are highly motivated organizations
  - Communications over an extended period of time: letters from management, surveys, videos.
- Lack of control group per se but did not see similar changes for substance abuse.

# Contact

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