

----- White Paper -----

# Employee Wellness

## Mental Health and Workplace Chaplaincy

**"Building Employee Resilience"**

A Collaboration of Contributors



**Assimilation and Constructs**

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## Overview

The reader will be exposed to the supporting statistical data of the increasing mental health crisis in the US workplace among employees.

**Direct, negative results of this epidemic characterized by isolation, depression, and suicidal tendencies affecting the performance metrics of companies will be highlighted** as employees are the primary drivers of innovation, creativity, customer service, and all of the major product or service deliverables.



Current employee support mechanisms will be previewed with their attributes and deficiencies noted. **The construct of front-line chaplaincy will be introduced as a proven—but not yet saturated—solution if interjected properly into today's workplace flow and processes.** The assimilation of chaplain care into the workplace environment along with methods and best practices will be discussed. Resultant stories will be galvanized by **demonstrable ROI** as supporting evidence as to why this strategic initiative, if adopted by companies and supported by company leadership, will be a **measurable, tangible,** and **primary catalyst** for **mitigating declining mental health in today's employee population.**



## Current State of Employee Mental Health

Besides the COVID-19 pandemic, deteriorating **mental health** is another increasing epidemic of massive proportions

The Centers for Disease Control and Prevention (CDC) reports that in June 2020, adults 18 and older reported:

-  **40.9%**  
mental/behavioral health issues
-  **30.9%**  
anxiety or depression
-  **26.3%**  
trauma and stress
-  **13.3%**  
started/increased substance abuse
-  **10.7%**  
considered suicide

**Loneliness, depression, anxiety, panic, worry, and stress are devastating our nation.**

The suicide ideation numbers reported were **double** from the previous summer.

Suicidal ideation was more prevalent among males than females.

The **youngest respondents** (ages 18-24) reported the highest percentage of adverse mental or behavioral health symptoms (74.9%).



## Mental Health - Loneliness, Depression, Anxiety

“During my years caring for patients, the most common pathology I saw was not heart disease or diabetes; it was loneliness.”

Dr Vivek H Murthy  
19th Surgeon General of the US



According to Dr. Murthy, loneliness and weak social connections have the same effect on health as **smoking fifteen cigarettes a day.**

**Depression** and **anxiety** are also common. According to **Society for Human Resource Management (SHRM)** research, between 22 and 35 percent of US employees experienced symptoms of **depression** as they live through COVID. Work-related concerns have left more than 40 percent of employees feeling **hopeless, burned out, or exhausted** as they grapple with their altered lives.

# Mental Health - Anxiety, PTSD



**Shahidrah Cowgill**, licensed professional counselor-supervisor and EMDR therapist, states, "70 percent of adults in the US report exposure to one lifetime traumatic event.

Approximately, 3.5 percent of US adults are currently living with **PTSD**. The American Psychiatric Association predicts one in 11 will be diagnosed with PTSD in their lifetimes."

In response to elevated stress levels caused by COVID, some states have initiated helplines like Indiana's Family and Social Services Administration. "**Anxiety** regarding **financial stress, grief** and **loss** over **bereavement** and the loss of normal routines along with the **unknowns** regarding the pandemic is 'overwhelming,'" the agency said.

There has already been an upswing in numbers of referrals to counselors being given by physicians.

**Employees are NOT receiving the help they need.** More than 1/3 of the 1,000 people surveyed by SHRM said they hadn't done anything to cope with their negative feelings. Only 7% had contacted a mental health professional.

*"If this whole COVID thing continues, there will be a tsunami of anxiety and depression in the following months."*

Prominent Dallas primary care physician

.....

**If loneliness, depression, anxiety, PTSD, panic, or victim mentality are being experienced by today's workforce, how does it affect business?**

"It was imperative to build a helpline that could literally be a lifeline to many."

Indiana Family and Social Services Administration



"Human beings are hardwired to need to be around other human beings."

Dr. Stephen Marmer, Psychiatrist

Confidential Discussions on **Anxiety and Fear** between Marketplace Chaplains and employees through mid-2020 have already surpassed all of 2019 numbers:





## Workplace Implications of Mental Health Issues

### Poor mental health significantly impacts business outcomes

Chronic **loneliness** and **stress** affect employees by decreasing:

- engagement
- productivity
- creativity
- brain function
- decision making
- reasoning
- retention

Even CEOs report feeling lonely. It is lonely at the top. Harvard Business Review's research showed that half of CEOs report feelings of loneliness and isolation with 61 percent of that group believing it hinders their performance.

"At work, loneliness reduces task performance, limits creativity, and impairs other aspects of executive function such as reasoning and decision making."

**Dr. Vivek H. Murthy**  
19th Surgeon General of the US





According to the National Institute of Mental Health, the leading cause of **absenteeism** in the United States is **depression**.

Absenteeism costs US companies billions of dollars each year in lost productivity, wages, poor quality of goods/services and excess management time.

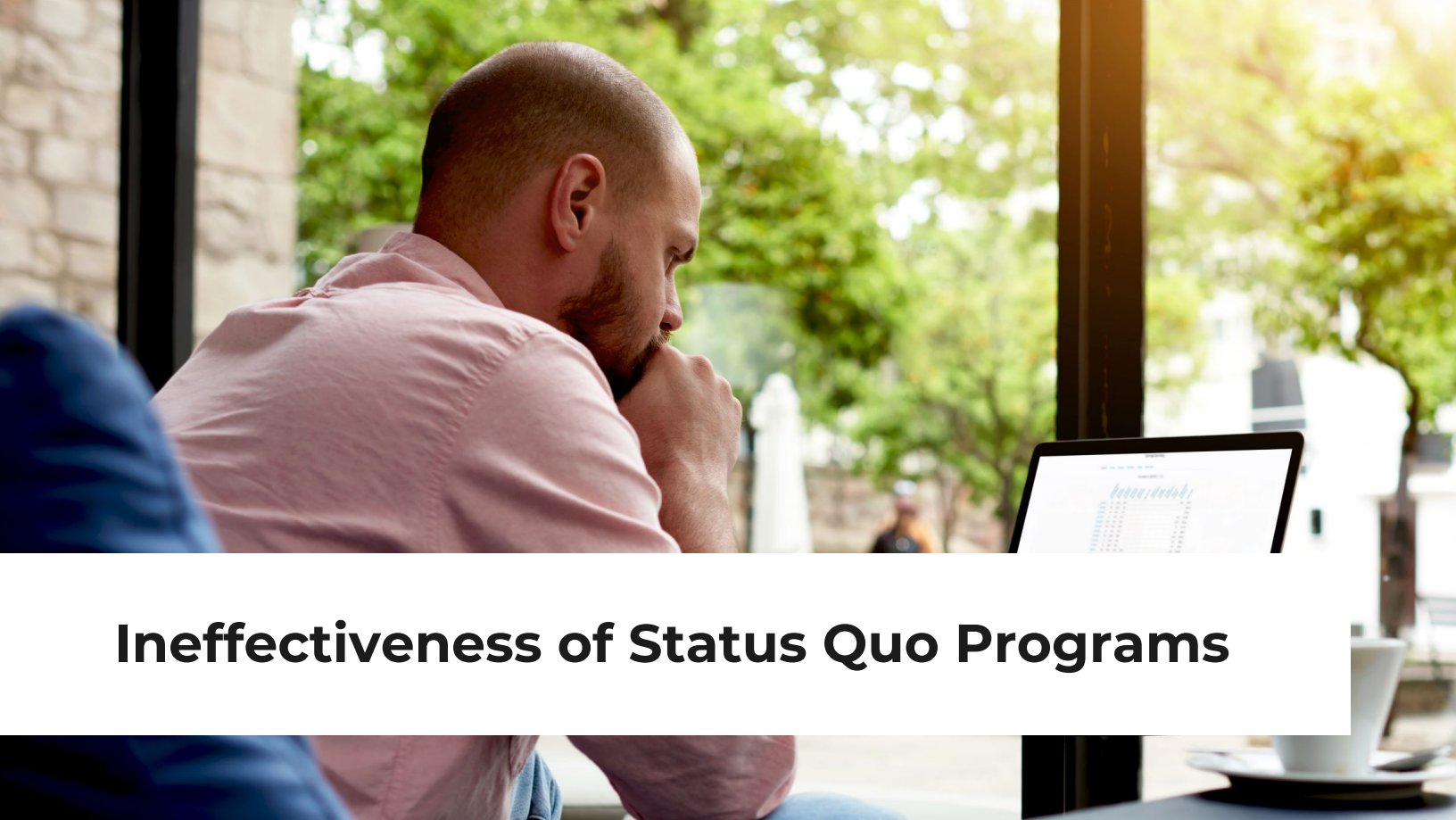
**Productivity losses from absenteeism cost employers \$225.8 billion or \$1,685 per employee per year. (CDC)**

**"Absenteeism** refers to the habitual non-presence of an employee at his or her job. Habitual non-presence extends beyond what is deemed to be within an acceptable realm of days away from the office for legitimate causes such as scheduled vacations, occasional illness, and family emergencies."

**Will Kenton, "Absenteeism"**  
Investopedia

**Additional Losses:**

- Turnover
- Presenteeism
- Theft



# Ineffectiveness of Status Quo Programs

## Employee assistance programs (EAPs)

Employee assistance programs (EAPs) offered by large and small companies alike show **utilization** rates as **less than 7%**.

While EAPs are potentially a great service, usage is low due to:

- Stigma associated with seeking help for mental health issues
- Confidentiality concerns
- Inadequate explanation of the service to employees

EAPs are also **reactive** rather than **proactive**. Employees who could have staved off larger issues may have tumbled into a downward spiral by the time they get around to reaching out for help.

EAPs are **reactive** rather than **proactive**.

# Professional therapy counselors

Professional therapy counselors can be effective. However, this regimen **needs about six sessions** for trust to be developed with a new patient. It takes a big commitment of time and resources to pursue counseling.

Therapy is most effective when the person is engaged and committed to working through the process and doing the homework suggested. Not everyone can afford weeks and weeks of one-on-one therapy, either financially or as a time investment.

The largest obstacle for this resource is employees' reluctance to even contact a therapist to begin seeking help.

## Barriers to pursuing care:

- I don't trust mental health professionals
- I don't know where to get help
- I don't have adequate transportation
- Mental health care costs too much money
- It would be too embarrassing
- Co-workers might have less confidence in me
- My leadership might treat me differently
- My leaders would blame me for the problem
- I would be seen as weak

**Chaplain Peter Devenish-Meares**  
**Australian Army**





## Creative employee benefits

Many employers are trying to help employees by offering wellness programs, yoga, flexible schedules, mediation instruction, financial planning, lawyers, scholarships, telemedicine, cognitive behavioral therapy, party and vacation planning.

Just as companies utilize a plethora of employee benefits to attract and retain top talent, so should a truly holistic approach be taken for improved mental health. There is not a one-size-fits-all magic bullet for the mental health problem.

As good physical health requires attention to diet, sleep, and exercise, good mental health needs a multi-faceted approach as well.



# Proven Solution: Workplace Chaplaincy

## Chaplains are involved in many areas of life

### Chaplains traditionally have served:

- Hospitals
- Police/Fire Stations
- Sports Teams
- US Congress
- US Military
- Prisons
- Universities
- Nursing Homes

Besides these institutions, a record number of companies—large and small, public and private—are turning to the **tried and true approach of chaplains to provide care for their own employees.**

Some companies have had chaplains for a substantial length of time:

- R.J. Reynolds since 1949
- UAW since mid-1980s
- Tyson Foods since 2000

**Workplace chaplaincy is growing as company leaders realize their employees need care they cannot provide.**



Employee usage rates of chaplains are typically above 50%.

**“Employers should consider chaplaincy and utilizing chaplains for their versatility, effectiveness, and ability to offer a range of support including spiritual guidance.”**

Shahidrah Cowgill, licensed professional counselor-supervisor and EMDR therapist



Upon hearing about **Chaplain Care Teams**, a prominent Dallas primary care physician declared that there is a **great need** for this type of service. She has seen an **uptick in referrals to mental health counselors**.

“When COVID first started, it was viewed as a ‘staycation’ for many. Eating ice cream, being home. Now it’s taken a toll on physical and mental health. There has been no accountability to doctors. Patients are afraid to come into their doctor’s office. Diabetes is up. Anxiety and depression are setting in with people.”

Workplace chaplaincy and EAPs do not require an either-or decision. In fact, chaplains have bolstered a company’s EAP usage by understanding the particular EAP a company has and referring employees to it when they discover someone needing professional help beyond the scope of the chaplain’s expertise.



## Work-Life Balance Stories



"Several employees are **overwhelmed with their workload**. They do not see any relief in the future. I am praying for strength and encouragement for them. They greatly appreciated my time with them as they were able to vent their frustration. Also, they felt encouraged knowing that I'm praying for them during this difficult time."



"This young lady was at work and was trying to have a good face before the people up front. However, inside, she was just struggling. We were out in the open and people were moving all around us. For just a moment, we were far enough away so others couldn't hear. She shared with me her current struggle. We were able to discuss her marriage and she was able to confide in me about her **husband's bipolar issues**. He refuses to get help and he just consumes her time when she's trying to get her work done. He's texting and calling and she's on the verge of tears. It was a unique moment because this woman always puts on a smile when she sees me. But, this time, she was transparent and shared with me her husband's struggle and how it affects her. Today I was able to pray for her and her husband and encourage her before I left."



## Help with Anxiety Stories



"An employee shared the news that his wife will have their baby any moment now. He is excited because this is his first child, but **he is also very nervous** because of the situation about coronavirus and how the hospital will handle this. He said, 'Chaplain, could you pray for us, especially for the baby?' I said, 'Yes!'"



"An employee texted me asking if we could meet outside of work to talk. We met today and she was very grateful that I could take this time to see her and listen to the **concerns that were laying heavy on her heart.** Through the entire visit and conversation, she was in tears. I listened to her, and then encouraged her with some appropriate verses. I prayed for her at the end of our visit and shared some digital resources with her to read. She texted me later saying she was already feeling better and thanked me for listening to her."