

# HEROForum 2021

**Bouncing Back: Boosting Mental Resilience  
and Building Organizational Immunity**

## **Conference Proceedings**



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**How the Choices We Have Influence the Choices We Make:**  
Diversity, Inclusion, and the Integration of Lifestyle  
Medicine and Population Health Promotion.

## INTRODUCTION

# HOW RESILIENT ORGANIZATIONS ARE RESHAPING THEIR HEALTH AND WELL-BEING INITIATIVES TO BOOST EMPLOYEE MENTAL HEALTH, DISMANTLE SYSTEMIC RACISM, AND REBUILD TRUST IN INSTITUTIONS

By Karen Moseley and Paul Terry

It is with pleasure and gratitude that we present these proceedings for HEROForum21 which offers select articles and stories from our national conference that best advance our learning goals related to **“Bouncing Back: Boosting Mental Resilience and Building Organizational Immunity.”** As you’ll see from the summaries of the research and practice successes described in these proceedings, HERO’s focus on resilience this year couldn’t be more relevant and timely as we have all been tested throughout 2021 about what it takes to bounce back from mental, social, and even existential struggles. HERO plans our Forums, think tanks, and webinars in pursuit of *our purpose of connecting science and practice to demonstrate the value of a health and well-being employer ecosystem*. Toward this aim, in these pages you will see how Forum21 explored how resilient organizations are reshaping their health and well-being initiatives to boost employee mental health, dismantle systemic racism, and cultivate community partnerships that will rebuild trust in institutions.

In these proceedings, you will learn about organizations with stories to share about how the pandemic has changed, and will continue to reshape, their workplace mental health services. Experts in resiliency, stress management, and positive psychology principles offer their views on best practices and future trends

in how individuals and organizations can effectively adapt after significant setbacks. With a goal of containing future contagions, these proceedings also carry forward HERO’s ongoing efforts at reckoning with systemic racism, understanding mental health disparities, and sharing research and innovations that make our profession better and better at promoting health for all.

As if HERO were being tested on our own organizational resilience, COVID-19 infection rates were a continuing concern nationwide as we approached our Forum date, and we needed to make the difficult decision to revert to a fully remote format. We were deeply disappointed at missing another opportunity to convene the health and well-being industry in person, but, of course, we could not put learning on hold. As much as the HERO team



knew it was the right thing to do for the health and well-being of our participants, we were bracing for potential chaos to ensue when we got on with the urgent work of re-organizing a learning event with hundreds of moving parts. Within hours of making our frustrating decision to cancel the in-person event we had planned in Austin, Texas, our HERO team received an outpouring of empathy and support from our faculty and from so many friends of HERO from around the nation. To be sure, building resilience starts with being open to the loving support of others, and we are tremendously grateful for all of the flexibility and understanding we received. The HERO team seized on these gifts of energy and support and made lemonade out of lemons. Delivering a fully remote conference resulted in an amazing abundance of content with over 100 speakers offering six keynotes, 20 breakout sessions, learning labs, and deep dives, and on top of that, registrants can take in another 40 learning sessions in our “On Demand” format for the six months following Forum21.

Whether live or remote, our annual HERO Forum is always attended by a festive mood and plenty of chances for participants to network and have fun

together. In 2021, we were also deeply mindful that any light we were able to shed on how to bounce back from setbacks is light that we are casting through nearly two years of very thick and troublesome clouds. We are still embroiled, for so much longer than we thought we would be, in a horrendous syndemic — when two or more concurrent or sequential epidemics synergize and each makes the other worse. A syndemic is when two or more concurrent or sequential epidemics synergize and each makes the other worse. Without a doubt, COVID-19, racial injustices, and health inequities have been feeding off of each other this past year. Vaccine hesitancy and Black Lives Matter are interrelated, and emotional resiliency depends upon reckoning with both. Social standing and mental health are interrelated and bouncing back from a syndemic depends upon reckoning with both.

Choosing a theme about bouncing back and emotional resilience is grounded in HERO’s belief that business and human resources leaders who stand alongside health and well-being professionals are ideally positioned to lead in preventing and reducing the burden of future disease for employees, families, and communities. This is why we can’t put on hold a serious





reckoning with racism, health disparities, and preparedness for the next syndemic. HERO has been investing most of our learning agenda for the past several years in social determinants of health and in social determinants of mental health. Trace the etymology of the word determinism and you learn about astronomers and physicists who studied how changing one thing precisely caused a change in another thing. As we organized this Forum, we urged our faculty to be intentional about bringing issues of race, inclusiveness, and equity to the forefront.

In the early stages of the worksite health promotion movement, the business case for investing in employee health was a one-way street where reducing individual health risks was a sensible step toward containing healthcare costs. The contemporary business case, however, is increasingly sensitive to causal pathways where work, health, and well-being each positively or negatively interact with the other. It is a realization that the nature of the work and the workplace and our standing in our communities may predict health and well-being as much as do the health practices of individuals. Research

by Laura Linnan, one of HERO's Mark Dundon Research award winners, showed there was only modest growth in the past decade in the number of companies sponsoring comprehensive approaches to worksite health promotion (from 7% in 2004 to 17% in 2017). However, of the five elements constituting a comprehensive approach, the greatest gain between 2004 and 2017 is the 93% increase in those offering a "supportive social and physical environment" (56%, up from 29%).

Bouncing back from this syndemic will take a continuing shift in our field to a reckoning with social determinants of well-being. That businesses have focused on individual choices, rather than social influences, isn't merely a philosophical leaning of the private sector. Individualism has dominated collectivism in healthcare, health research, and health promotion sectors as well. For example, of the \$36 billion approved this year to fund the National Institutes of Health, most goes to biomedicine and a paltry \$11 million will be allocated to worksite health promotion. One recent example specific to stress management programs in the workplace was a scoping review of more than ten thousand studies.

The researchers found 37 studies that met their eligibility criteria, including reported outcomes, and nearly all studies (33) were focused on individual-level strategies. Only two studies focused on an organizational level approach.

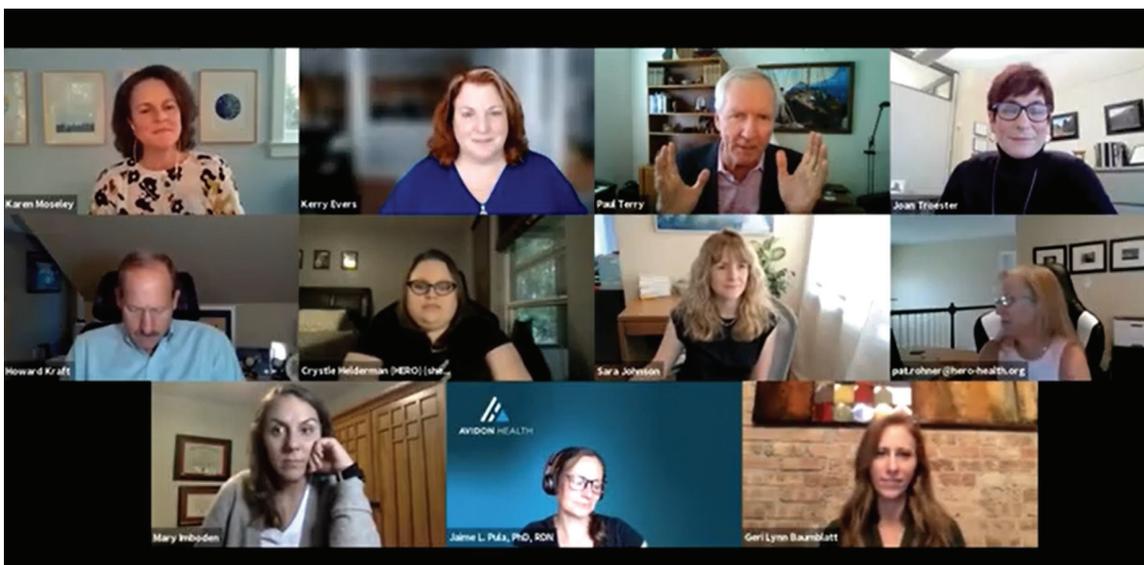
Depending on your zip code, your life expectancy can vary by as much as 25 years. What separates neighborhoods that are resilient and have low COVID death rates from other neighborhoods with low vaccination rates? Many argue that it is the magnitude of discrimination experienced there. A study of racial attitudes in Detroit, for example, found a curvilinear relationship where perceptions of discrimination varied according to how racially mixed the neighborhood was. That is, perceived discrimination was lower in predominantly white or black neighborhoods and reached the highest levels in racially mixed neighborhoods. As with understanding what impedes health, these authors note that zip code level analysis shows places

where both blacks and whites have a deeper understanding of the “vicarious experience” of racial profiling, aggressive policing, or discriminatory housing. Simply put, if racism, or other socially isolating forms of discrimination, is out of sight, it’s out of mind.

Such will not be the case at HERO sponsored learning events. Our conversations about how work environments, racial inequities, and a leadership role for business in improving well-being for all is well underway and will continue next year and for years ahead.

This year. Every year. We *will* get through this. Together.

**Karen Moseley, HERO President and CEO**  
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# GENERAL SESSION





## WHEN WORK AND HOME COLLIDE: WOMEN'S PRODUCTIVITY DURING THE COVID PANDEMIC LOCKDOWN

By Tsitsi B. Masvawure, PhD, Professor of Practice, Health Studies Program, Center for Interdisciplinary Studies, College of the Holy Cross

The COVID-19 pandemic has disproportionately affected women and men. Many studies suggest that women have shouldered the bulk of the burden because of their roles as primary caregivers both within and outside the home. Studies further suggest that women make up the bulk of essential workers and therefore had more opportunities to be exposed to potential COVID-19 infection than others. In this brief article, I discuss the main findings of the mixed-methods study by Kasymova et al., which examined the impact of COVID-19 on the productivity of academics in the U.S. who mother, and I consider the implications of their findings for workplace health programming.

The study by Kasymova et al. was conducted via an online group named "Academic Mamas," which is made up of academics who identify as cis-gender women and have children aged 10 years and younger. Participants were recruited online via this group; 131 individuals completed a self-administered quantitative survey and 20 participated in in-depth interviews conducted virtually or by phone. The study was conducted between June to August 2020, and focused specifically on the impact of the COVID-19 lockdown that was introduced in many U.S. States in March of 2020.

Not surprisingly, the study found that the productivity of female academics who mother was adversely affected by the COVID-19 pandemic. Participants

in their study reported that they were spending **more time** on child caregiving (from 4.4 hours/day to 8.3 hours/day) and child schooling responsibilities (from 0.8 hours/day to 2.7 hours/day). Conversely, participants reported that they had **less time** for teaching (from 3.5 hours/day to 2.7 hours/day), research (from 2.6 hours/day to 1.6 hours/day), and manuscript preparation (from 1.4 hours/day to 1.1 hours/day). More remarkable, however, was the extent to which female academics were shouldering the bulk of child caregiving and schooling responsibilities compared to their partners. In the study, nearly half of the participants reported that they were *mostly* responsible for child caregiving and child schooling (48% and 51% respectively) and about a third (33%) and a fifth (21%) reported that they shared childcare and child schooling responsibilities *equally* with their partners. Less than 5% reported that their partners were mostly responsible for these tasks.

The qualitative study reinforced these findings and highlighted the immense physical and mental strain that female academics experienced during the lockdown. Participants noted that they were still expected to be productive despite the challenges of working from home; some lacked private rooms in their homes to conduct online classes without disruptions, and many started working evenings and weekends in order to complete key tasks. More strikingly, female academics noted that male colleagues seemed to be publishing more and to

be less burdened by childcare responsibilities.

Although the Kasymova, et al. study focused on academic institutions, its findings can be generalized to all workplaces. The study has three major implications for the workplace and for workplace health. **First**, as workplaces re-open and employees return to in-person work formats, it is important that employers do not revert to a *business-as-usual* approach and assume that COVID is now fully under control. It is not. The disruptions that COVID has caused in people's personal and professional lives will be felt many years into the future. Employers, thus, have a unique opportunity to develop innovative employee health programs that engage with the long-term mental health effects

of the pandemic. An obvious solution would be to provide childcare support to employees as this has been shown to be a major stressor. **Second**, employers must re-think the concept of employee productivity and what this means in the context of COVID-19. The pandemic has resulted in an unprecedented merging—and subsequent blurring—of work and home. As Kasymova, et al. and numerous other studies have shown, the transition to working from home did not necessarily come with the attendant benefits that are typically associated with flexi-work. Working from home has not necessarily been liberating for women. Employers must develop new metrics of employee productivity that take employee biographies, such as

their gender roles and caregiving responsibilities, into account. We have created a false dichotomy between home and work, yet we know that what happens at home has direct effects on employee productivity and success. **Third**, black and brown employees have been disproportionately affected by COVID-19, hence, race will need to be actively incorporated into any metrics of employee health and success. The COVID-19 pandemic has disrupted every facet of human life, but it has also presented us with a unique opportunity to radically transform notions of work and ensure that workplaces are more egalitarian, nurturing, and employee-friendly.

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# BREAKOUT SESSIONS

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KE From Kerry Evers to Everyone  
Hi everyone! Anyone know what so...

Ariane

## HOW COVID TRANSFORMED A WORKSITE WELLNESS PROGRAM

By Elizabeth Keida, EdD, Assistant Professor, State University of New York at Oswego;  
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In 2020, the world found out how easily a global pandemic can alter one's mental health. Whether it be attributed to fear of severe illness, social isolation, loss of a job, economic uncertainty, or childcare issues, COVID-19 has caused a significant increase in mental health-related illnesses. Specifically, from 2019 to 2020, mental health-related complications increased from ~11% to ~42% in the U.S.<sup>1</sup> These staggering numbers are crippling the U.S. economy and negatively impacting individuals' work productivity, absenteeism, and employees' healthcare costs<sup>2</sup>. Considering preventable diseases account for ~90% of the country's healthcare costs<sup>3</sup>, focusing on disease prevention instead of treatment seems like the obvious solution.

Even as vaccination rates increase and worksites welcome their employees back, a mental health crisis remains. As of March 2021, nearly half of adults reported suffering from mental distress related to the COVID pandemic. Therefore, worksite wellness programs must take a more holistic approach to employee wellness to combat the post-pandemic mental health crisis.

Although research confirms how employees exposed to worksite wellness programs experience greater positive health behaviors<sup>4</sup>, these behaviors typically only measure improvements in physical

wellness such as weight, blood pressure, cholesterol, physical activity, and diet. With the pandemic changing how people work, live, and play, preventative programs that focus on social and emotional well-being must take precedence.

### ***Discover Wellness: Find a Healthier You***

is a worksite health promotion program designed for State University of New York at Oswego employees to improve overall health and reduce risk of chronic disease. The mission of our program is to create an inclusive, holistic wellness culture that provides employees with frequent opportunities to strengthen all aspects of their well-being. This past year, our wellness initiatives took a front seat in the fight against COVID-related mental distress by greatly emphasizing social, emotional, and physical well-being. Specifically, we transitioned to a virtual modality by offering live sessions online for 7 weeks. The program sought to measure the impact of a virtual curriculum that utilized a TEACH-DO-REFLECT model to improve employee behaviors related to social, emotional, and physical well-being.

Our wellness program was created in response to an employee needs assessment and was initially implemented in person. This 7-week cohort model focused on stress reduction, healthy eating, increasing physical activity, and improving

sleep quality through three key elements: TEACH-DO-REFLECT. A pretest-posttest quasi-experimental design was used to assess the self-efficacy and health behaviors of the employees. A program announcement was emailed to 1500 employees at the institution, and fourteen employees were accepted into this first cohort. All fourteen participants completed the program (100% completion rate). Out of the fourteen completers, ten completed both the pre- and post- surveys. Those ten participants were used for the data analysis. The Monday (“DO”) sessions had an attendance rate of 79%. Out of the seven “optional” Friday coaching sessions (“REFLECT”), the attendance rate was 66%

**TEACH:**

Every Monday, participants listen to a mini-lecture on the importance of a topic: How this topic can help improve personal wellness and combat social and emotional distress brought about by the pandemic (TEACH) (see Figure 1). The TEACH gives a rationale for the

importance of the topic and leads into the activity (DO).

**DO:**

Participants engage in a hands-on activity (DO) that is directly related to the content from TEACH (see Figure 1). Each activity is approximately 45 minutes in length and encourages group interaction on a virtual platform. In general, participants learn simple behavior changes that can have a lasting effect on their mental, physical, and social well-being. Participants are encouraged to continue performing the learned behaviors Tuesday through Thursday (DO) (see Figure 1).

**REFLECT:**

Every Friday, participants meet as a group with a certified wellness coach to discuss their behavior change progress with their peers (REFLECT) (see Figure 1). A specific emphasis is placed on positive psychology and SMART (specific, measurable, attainable, realistic, timely) goal setting. The group sessions create accountability which help the participants stay

motivated to attempt the new behavior. REFLECT became even more critical during COVID as it was a way to build camaraderie with other employees. This time allows the participants to socialize with others, which results in improving their social well-being and decreasing social isolation resulting from the pandemic. Although the coaching sessions were optional, the attendance rate was 66%.

The TEACH-DO-REFLECT model proved significant during COVID-19. Not only were participants able to learn about behaviors that would enhance their mental well-being, but they were given an opportunity to enhance their social well-being by meeting with like-minded peers virtually every week. Participants displayed a significant improvement in social, emotional, and physical well-being, with improved scores in their stress, sleep, nutrition, and physical activity surveys. Table 1 displays the pre-post differences in each area measured. As a result of the intervention, there was a significant improvement ( $p < .001$ )

**FIGURE 1: Discover Wellness Model**

Pre-Survey		Intervention			Post-Survey
Data collection	Monday	Tuesday-Thursday	Friday	Data collection	
	10 minutes: Mini-Lecture (TEACH)	Implement behavior change techniques (DO)	60 minutes: Group Wellness Coaching (REFLECT)		
	45 minutes: Activity (DO)				

in all four areas measured (sleep, physical activity, stress, nutrition).

This wellness initiative is unique in that it does not just focus on the why, but the how, when creating a healthy behavior change. Teaching simple, manageable behaviors within a group setting that allows for constant practice and reflection is essential for a successful worksite wellness program.

**TABLE 1: Changes in variables from pre- to post- intervention.**

	Pre-Test		Post-Test		df	t
	M(N)	SD	M(N)	SD		
Stress	14.384 (13)	2.328	16.181 (11)	1.887	23	-31.602*
Physical Activity	24.384 (13)	3.123	27.500 (11)	3.503	22	-34.380*
Sleep	12.307 (13)	3.591	13.636 (11)	2.149	23	-18.405*
Nutrition	26.750 (13)	5.801	34.600 (11)	4.221	21	-22.121*

\*p < .001

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**Overview**  
*Importance of Behavioral Health*

According to the CDC, suicide rates have increased 33% in the past 20 years, and affects all ages:

- Individuals 10 – 34 years old: suicide is the 2<sup>nd</sup> leading cause of death
- Individuals 34 – 54 years old: suicide is the 5<sup>th</sup> leading cause of death

On average, there is **1 death** by suicide every **11 minutes** — an average of 130 deaths per day

**40 million** people have anxiety disorders, the most prevalent mental condition

Nearly **60%** of adults with mental illness **did not receive mental health services** in the previous year

**17 million** adults experienced at least one depressive episode in 2019. **Depression ranks #1** among the most common causes of disability.

The CDC reports that over the 12-month period from June 2019 to July 2020, **opioid-related deaths** experienced a near **30% increase** from the prior 12 months.

The **construction industry** has the **2nd highest suicide rate** among all industries (45.3 deaths per 100,000 workers)

**12 Million** Had Thoughts Of Suicide → **3.5 Million** Made A Suicide Plan → **1.4 Million** Attempted Suicide

"Construction occupations had the highest Proportional Mortality Rate PMR for drug overdose deaths and for both heroin-related and prescription opioid-related overdose deaths."  
—Occupational Patterns in Unintentional and Undetermined Drug-Involved and Opioid-Involved Overdose Deaths—United States, 2007–2012 CDC, August 24, 2018

**\$6 Trillion** is the projected annual global cost of mental health disorders in 2030 — **more than the combined cost of diabetes and cancer.**

Sources: Time Special Edition 9/11/20 citing Anxiety and Depression Association of America; National Institute of Mental Health; World Economic Forum; National Alliance on Mental Illness; www.cdc.gov/suicide/facts

Joanna Balogh-Reynolds

## HOW TO HELP EMPLOYEES RECHARGE: ASSESSMENT OF DRIVERS OF RESILIENCE

By Kerry Evers, PhD, Co-President and CEO, Pro-Change Behavior Systems, Inc.

### Can Individual Resilience be Improved?

With the theme of the 2021 HERO Forum being “Bouncing Back,” attendees have heard a lot about resilience. But what exactly is it, and is it possible to assist someone in becoming more resilient? Resilience can be understood as an individual’s capacity to adapt positively and cope effectively in the face of adversity<sup>1,2</sup>. Resilience, however, should not be regarded as a trait that some people possess and others do not. Rather, it includes an active process that can be promoted by the development of protective factors such as behaviors, actions, and thoughts<sup>3,4</sup>. The identification of these essential drivers of resilience is critical not only for the development of valid assessments to measure resilience but also to provide tailoring within the behavior change programs, a best practice for effective interventions.

### Development of the Resilience Evaluation Measure (REM-9)

Through reviews of existing literature and discussions with experts, an initial list of potential drivers of resilience was created that included concepts such as having a purpose, time with family and friends, feeling accepted, being grateful, being mindful, and feeling powerless and lonely. Assessment items related to each of the identified concepts were written and a draft assessment was fielded to a nationwide sample in the fall of 2020.

The sample of 611 adults (mean age = 47 years; 57% Female; 66% employed; 70% White, non-Hispanic) completed a 181-item assessment of drivers of resilience. The assessment included the Cantril scale which asks respondents to rate their current and future lives, with individuals being categorized into thriving (36%), struggling (55%), or suffering (9%) based on responses<sup>5,6</sup>. It is important to note that this measure has been used in a variety of research studies and programs, and before 2020, we have typically reported a much higher rate of individuals thriving (60-70%) and a lower rate suffering (1-2%).

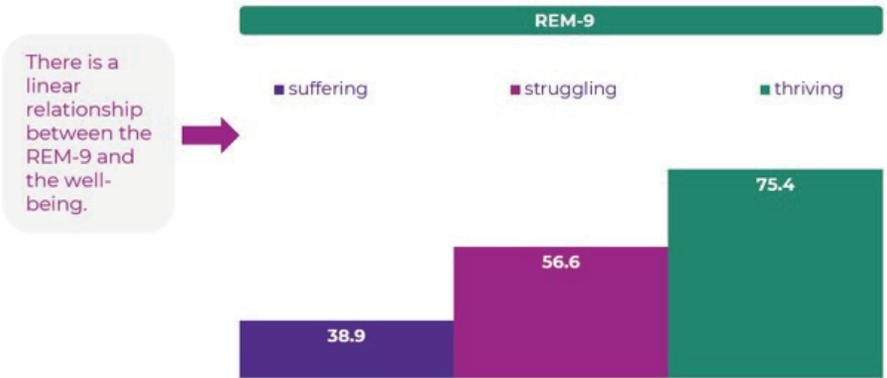
Principal component analyses (PCA) and confirmatory factor analyses (CFA) were conducted to develop the most parsimonious assessment, meaning the simplest measurement model that uses the minimum number of items to explain the most variance in resilience<sup>7</sup>. The CFA confirmed a nine-item measure of resilience (focused on mindset, meaning and connection) indicating an excellent fit to the data ( $X^2(27) = 116.78$ , CFI = .94, GFI = .92, RMSEA = .10). Factor loadings ranged from .57 to .86 and the Cronbach’s alpha was .90. Scoring for the Resilience Evaluation Measure (REM-9) was based on the Percent of Maximum Possible (POMP) Score. This approach transforms the raw score into a metric from 0 to 100

and is interpreted as percentages of the possible maximum score. Scores were categorized into low, moderate, or high resilience based on means and standard deviations.

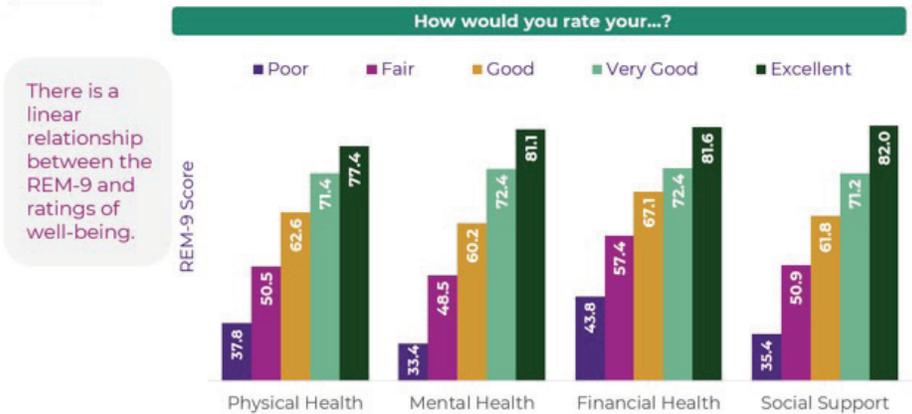
The REM-9 was further analyzed for patterns and relationships with demographic characteristics and previously established measures. While no significant differences were found for gender across the REM, there were significant differences in both employment status and race. White, non-Hispanic individuals tended to have lower scores on the REM compared to those from other races and ethnicities. In addition, employed individuals tended to have higher resilience compared to those not employed. A significant linear relationship was found between the REM-9 and well-being as measured by the Cantril ladder scale and ratings of physical, mental, and financial health as well as social support.

A high correlation ( $r=.74$ ) was found between the REM-9 and the 10 item Connor Davidson Scale<sup>8</sup>, which is a well-established measure of resilience. In addition, a significant linear relationship was found between the REM-9 and 1) the PHQ-2<sup>9</sup> which measures the degree to which an individual has experienced depressed mood over the past two weeks, 2) the WBA-P, a measure of job performance loss due to well-being related barriers (range 0-100 with higher scores indicating more loss)<sup>10</sup>.

## resilience: well-being categories



## resilience: well-being



## resilience model



**Mindset** → **Reset**

**Meaning** → **Rethink**

**Support** → **Reconnect**

Based upon the REM-9, individuals with high resilience are:

- 65% less likely to experience productivity loss
- 79% less likely to be depressed
- 2x more likely to be satisfied with their career
- 3x more likely to be thriving

- 4x more likely to be in excellent health
- 6x more likely to have excellent financial security

The development of the REM-9 provides an important addition to the resilience field as a validated assessment of drivers of resilience (mindset, meaning, support).

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## ALIGNING BUSINESS AND PUBLIC HEALTH FOR MORE PROSPEROUS COMMUNITIES

By Ron Goetzl, PhD, Senior Scientist and Director of the Institute for Health and Productivity Studies (IHPS), Johns Hopkins Bloomberg School of Public Health; Stephen Massey, MIA, Co-founder, Meteorite; Sohini Stone, MD, MBA, Medical Director, Global Employee Health, Google; Emily Yu, MBA, Managing Director, Partnerships, de Beaumont Foundation

The pandemic has crystallized the inextricable link between America's community health and economic well-being – and made us painfully aware that our public health infrastructure is at a dangerous tipping point. Decades of underinvestment and inadequate support for public health across sectors has left our nation struggling to address COVID-19. Without healthy and safe places to live, work, and play, there simply can be no pathway to economic or social prosperity. But even before the pandemic, employee health, safety, and well-being were bottom line concerns for businesses. Poor worker health and illness-related absences cost U.S. employers an estimated \$575 billion and 1.5 billion days of lost productivity in 2019.<sup>1</sup>

While many businesses create programs and policies to improve the health of workers, they fail to address the broader community health conditions where workers live, work, and play. Upwards of 70 percent of an individual's health status is driven by the social and environmental factors that surround them. As the nation recovers from the pandemic, community health, not just employee health, should be a strategic consideration for every employer. This starts with supporting families of employees and extends to the local communities in which we operate.

We offer seven ways businesses can align with public health for bold action

and innovation to address employee and community health needs.<sup>2</sup>

- 1) “Put out the fire” of COVID-19 by following the advice of credible experts.
  - Empower a Chief Medical Officer or Chief Public Health Officer to prioritize public health and safety when designing employee vaccination policies and workplace safety protocols.
  - Ensure that trusted public health recommendations are reflected in employee newsletters, on-site signage, town hall meetings, and advertising.
- 2) Improve the health and well-being of employees.
  - Apply available tools and resources for advancing workplace health, safety, and well-being.
  - Champion critical public health policies such as promoting earned sick leave to create a more resilient workforce.
  - Promote longer-term strategies (e.g., paid parental leave, access to vaccinations, flexible work schedules, livable wages).
- 3) Promote healthy communities.
  - Consider how your organization can address the root causes of poor health and inequities in your communities, such as access to affordable housing, good quality air and water, universal pre-kindergarten, and healthy food procurement.
- 4) Become a “force multiplier” by leveraging your expertise to collaborate with and support local and state public health departments.

- Attend one another's meetings to increase information sharing and leverage resources from a wider public health network.
  - Expand natural disaster preparedness plans to include immediate health crises (e.g., COVID-19) as well as longer-term public health concerns.
- 5) Actively facilitate public-private partnerships in the community.
- Advocate for a Chief Public Health Strategy liaison between business and public health.
  - Convene round tables and think tanks sponsored by the business community.
- 6) Advocate for development of accountability dashboards that track and monitor progress towards achieving key economic and public health outcomes.
- Local chambers of commerce and public health agencies can reference these dashboards as monitoring tools for community initiatives.
- 7) Advocate for rebuilding and expansion of a national public health workforce supported by a

**Spotlight on Childhood Vaccinations:** For more than a year, families across the U.S. have been expected to help children manage a number of difficult challenges, including remote learning, while also balancing work and numerous other responsibilities. Those unable to do so lost their jobs or had to make the difficult decision to stop working to care for their family. Widespread vaccination is needed to protect the health of children, safely reopen schools, and help employees get back to work. Organizations can take action to support working parents and legal guardians by:

- Offering paid time off or flexible schedules for parents to attend vaccine appointments and care for children recovering from side effects
- Improving access to vaccines by offering transportation, language support, or child care
- Hosting on-site vaccine clinics for workers and their families

**Check out the Health Action Alliance's free toolkit on childhood vaccinations:**  
[www.healthaction.org/childhood-vaccinations/resources](http://www.healthaction.org/childhood-vaccinations/resources).

modern information technology infrastructure.

Business leaders have extraordinary influence to bring about change at the local level. No matter where your organization is starting from, the above recommendations can help advance your efforts to improve employee health, safety, and well-being with a spillover effect on customer satisfaction. By working across sectors, businesses can help build partnerships and

prioritize investments that improve community health, inside and outside the workplace. They can also enable their employees to care for those around them. Over the long run, a healthier community creates a stronger economic engine to enhance residents' health, well-being, and prosperity.

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## FACILITATING MENTAL HEALTH, WELL-BEING, AND RESILIENCE THROUGH TOTAL WORKER HEALTH®

By Anjali Rameshbabu, PhD, Oregon Healthy Workforce Center, Oregon Institute of Occupational Health Sciences, Oregon Health & Sciences University

Picture yourself as a hospital front-line worker at the ER during COVID. Your unit has reached its capacity with the surge in cases, and you've pulled a 24-hour shift triaging cases. Do you feel up to making the hour-long drive back home? Are you mentally checking off errands to run on the way home and plan for some rest? Are you ready to think about your next shift?

Now, let's say you're a supervisor of a team that's working remotely. There's a project deadline coming up at the end of the month. A couple of your employees have just informed you that daycare for their children has fallen through for the next couple of weeks and they can't keep their regular work hours. A new employee has been hired and needs onboarding. What does all this mean for your own stress level and work-life balance? In turn, how does this affect your interactions with your team?

During our lifetime, we may be employees, parents, spouses, and caregivers, and even as we play these distinct roles, these collective experiences impact us as one person. We've having to deal with a lot lately and the impact is showing. Work, where we spend much of our waking hours during the week, has a direct impact on our well-being. Thus, organizational approaches designed to address the whole person, at work and at home, are not only helpful, they are essential.

*Total Worker Health*® is an evidence-based approach that jointly addresses safe work

and employee well-being by prioritizing healthy work design and organizational culture.

Oregon Healthy Workforce Center (OHWC) is a *Total Worker Health* Center of Excellence funded by the National Institute for Occupational Safety and Health (NIOSH). We conduct intervention research to promote worker safety, health, and well-being through organizational change, and engage in robust information-sharing through outreach, education, and translation of science to practice.

Since we began in 2011, OHWC's research has led to toolkits for construction, utilities, home care, parks and recreation, trucking, and call center industries with resources for adult and young workers and strategies for supervisors to become supportive leaders. We also co-founded the Oregon *Total Worker Health* Alliance, a unique research-regulatory-workers compensation partnership, which has led to the *Total Worker Health* Curriculum, reaching nearly 700 practitioners.

OHWC's session at HERO 2021 focused on building resilience through the *Total Worker Health* approach. After all, as a community feeling the compounded effects of the pandemic, societal unrest, and climate change, ensuring physically and psychologically safe workplaces and positive work experiences are integral to employee well-being and resilience.

**Visit YourWorkpath for our *Total Worker Health* resources.**

These include evidence-based comprehensive toolkits, easy-to-use tools, and educational materials. OHWC's comprehensive multi-component toolkits have resulted from our research and are backed by "gold standard" evidence, such as that produced from a randomized controlled trial. All of our *Total Worker Health* toolkits are focused on organization-led approaches for employee well-being.



**SHIP:** Designed to increase supportive supervisory practices for leaders.



**Be Super!** Focused on educating leaders in the construction industry on effective supervision and safety practices, and engaging employees in healthy living.



**COMPASS:** Designed to facilitate peer support for safety and health among home care workers who typically work alone.



**PUSH:** Prepares young workers for on-the-job safety and health; designed for employees working in parks and recreation.



**Active Workplace Program:** Reduces excessive sitting time among desk workers through organization-focused strategies and supervisor support.



**Tech4Rest** (soon to come): Designed to improve sleep among team truck drivers through enhanced truck environments and behavioral education for sleep hygiene.

**Click here to access components of these toolkits:** <https://www.yourworkpath.com/downloads>



**For more information:**

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## MIND MATTERS: CHANGING WORKFORCE PERSPECTIVES ON MENTAL HEALTH

By Sarah Monley, MPH, Senior Consultant, Benefits, Cardinal Health; Charna Martini, Manager, Well-being, Cardinal Health

### Introduction

In 2019, Cardinal Health made long-term strategic plans to address three priority health conditions within the employee population: musculoskeletal disorder, obesity, and mental health. These conditions were increasing in cost and in prevalence since 2017. Using an integrated analytics approach connecting productivity, health, and risk data at a de-identified, person-centric level, the company understood the interrelationship of these three conditions and realized the need for solutions that would integrate mind and body. Not just for the benefit of employees and their families, but for the company as well.

### Methods

#### Building a global initiative

Mind Matters is the name for the Cardinal Health global mental health initiative. The first goal of Mind Matters is to provide resources. It is an immediate action to support employees in need. The second goal of Mind Matters is to foster a new open and supportive culture of mental health. This is a long-term commitment for the organization.

### Results

#### What worked

The first goal of Mind Matters was to ensure access to benefit resources

to support employees' psychological, emotional, and social well-being.

The company offered several opportunities to encourage mindfulness and meditation throughout 2020, but the most utilized by employees around the globe was Headspace. Headspace is a mindfulness meditation application employees can download to their smartphones at no cost. Employee subscriptions to this service increased 150 percent, from 1187 to 1780, throughout 2020. Employees commented on Headspace more than any other benefit in the internal social platform, and Headspace offered meditation educational webinars to the employee population throughout the year to drive engagement.

The second goal of Mind Matters was to build an open and supportive mental health culture throughout the organization. Cultural efforts require a long-term investment of time and communications, but three initiatives that began in 2020 were quickly impactful based on employee feedback and participation rates:

#### • Leader-requested team dialogue

Leaders were inspired by internal communications including video podcasts and emails to invite the corporate benefits department and onsite EAP consultant to host team meetings about mental health.

- **Psychological health:** how we think
- **Emotional health:** how we feel
- **Social health:** how we act



- **Employee education and Mental Health First Aid certification**

In addition to leader uncertainty, employees themselves did not always know how to navigate peer conversations on the topic of mental health. Mental Health First Aid (MHFA) certification courses were so popular throughout 2020, the company expanded free certification class offerings from two times per month with 20 participants per class to three times per month with 30 participants per class. To date the company has certified more than 500 employees.

- **Small group conversations**

Unique from large group webinars or group training sessions, these intimate 8 – 10 person video calls gave employees an opportunity to gather and discuss personal experiences with mental health or mental health caregiving for a loved one.

## **Discussion**

### **Reviewing data**

In comparing 2019 to 2020 data, the company identified an increase

in the per employee per month spending on medical and behavioral health. The company experienced an increase in spend in depression care through the primary medical carrier and an increase in spend on neuro-developmental disorders.

While disability incidence for mental and behavioral health conditions increased, duration decreased. Similarly, the anxiety, depression, and panic category flow-through rate from short-term disability to long-term disability decreased from 2019 to 2020. Although behavioral health short-term disability claims increased for this timeframe, the percentage of anxiety, panic, and depression claims decreased by two percent.

As employee experiences shift and program activity is evaluated, Cardinal Health will determine ways to expand and improve offerings to serve the employee population. This will be particularly important when it comes to the social well-being dimension of mental health.

## **Conclusion**

When Cardinal Health launched Mind Matters, a global mental health initiative, the company immediately identified what employees would have to know, feel, and do to establish a new culture. Companies beginning a new well-being initiative can apply this approach to compare current state against programming goals for any new initiative.

### **What will happen to Mind Matters in the future?**

Mind Matters launched just months prior to the COVID-19 outbreak. The company recognizes the influence managers have on employee morale and, ultimately, on retention.

<https://www.mentalhealthfirstaid.org/become-an-instructor/certification-process/>

## PURPOSE & PERFORMANCE PROGRAM FOR AMERICA'S FIREFIGHTERS

By Rebecca Kelly, PhD, RDN, FAND, CEO & Founder, Element Health, Inc.;  
David Wurtzel Executive Director, The First Twenty

### Background

Firefighters face a unique set of psychological and physiological challenges every day. These challenges impact many aspects of their lives, including job performance, safety, and overall quality of life - at work and at home. While wearing upwards of 60 to 100 lbs of protective equipment, these workers need to move, think, and act in a time critical fashion to save lives and property. Due to the adverse effects of the heat and weight, they face physiological problems that include heart attacks being the #1 cause of line of duty deaths and over exertion and muscle strain being the biggest cause of injuries. From a psychological perspective, due to the repetitive traumatic nature of their job, they face Post Traumatic Stress Disorder (PTSD) rates that are five times the national average. The lethal combination of the psychological and physiological issues creates problems around situational awareness, making it the leading factor in fireground injuries.

### Approach & Program

The foundational mission of the First Twenty (TF20), a non profit organization based in Narberth, PA, is to improve the health, safety, and performance of firefighters, first responders, and other groups who serve on the front lines of communities. Due to their job demands, TF20 considers these employees "Time Critical Athletes™." The intention of this focus is to bring the whole person to every moment, whenever that moment may

be. TF20 health, well-being, and safety programs empower employees to build long-term habits that encompass their physical and mental resilience, nutrition and physical performance, stress reduction, and situational awareness. Programs range from 16 weeks to a full year.

Rooted in the Social-Ecological model, TF20 provides men and women with proven and feasible strategies to manage their unique workplace challenges with a focus on tools and resources for individuals and teams within the settings of their workplaces and communities. Ultimately, these initiatives lead to establishing a healthier workplace and community culture, supported by programs and policies. These program elements can be translated to every employee and workplace. Traditional health and well-being programs have focused on improved health while addressing the physical elements of nutrition and physical activity, tobacco cessation, and other physical health risk factors. The identification and expansion of health and well-being programs that address the whole person, inclusive of integrated mental and emotional health, is key. This is true during current times of uncertainty as individuals find themselves living and working during the coronavirus pandemic with heightened social justice challenges impacting the lives of all employees.

### History Of Performance

TF20 programs were designed for and

utilized by a diverse population to include firefighters and first responders, spanning various age groups, genders, race affiliation, and educational levels. The comprehensive health and well-being program has served over 38,000 participants nationwide including fire and police departments throughout the country including the cities of Baltimore, Detroit, and Philadelphia. TF20 programs have also been utilized by government agencies such as the U.S. Air Force Fire Emergency Services and the U.S. Forest Service. The arc of The First Twenty mission has led to ongoing iterations and clinical trials funded through FEMA and the NIH. The results of the program is a demonstration of improved health, specifically physical health measures related to improved nutritional habits, weight loss, and improved fitness and performance measures. Current clinical trials are underway addressing the stress tolerance and resilience elements in these populations.

### **Delivery**

TF20 provides a mobile wellness platform that provides education, tools, resources, cues for action, and tracking related to the core program elements of physical and mental resilience, nutrition and physical performance, stress reduction, and situational awareness. TF20'S holistic programming has been delivered through a mobile app, community specific emails, lifestyle blog, social media, and workshops. The mobile-delivery content can be in the hands of first responders whenever and wherever it is convenient for them to participate. The mobile delivery also allows tracking and monitoring progress for participants. The program has also been combined with performance coaches to provide additional motivation and support, while also leveraging the workplace community for creating high performance environments.

### **Engagement**

Through ongoing tools, resources, teams, environment enhancements,

and facilitators or coaches, TF20 creates engagement among their participants. Reinforcing tools include relevant weekly content delivered via email, social media, and a lifestyle blog that engages audiences and keeps them motivated to stay focused on purpose and performance.

### **Future Direction**

The last 15 years of TF20's programming experiences have culminated in an enhanced focus. Based on research and protocols developed in association with the Department of Defense, US Army, US Marines, and US Forest Service, "The Road to Resilience" (R2R) program was launched. R2R uses a formalized process which emphasizes a daily practice of mindfulness, intention, and action to better address the mental performance of the Time Critical Athletes™. This is the future direction for TF20 and their programming.

## LISTENING DURING COVID-19 TO INFORM ORGANIZATIONAL WELL-BEING INITIATIVES

By Stephanie Carroll, MBA, SVP People and Culture, AbleTo Inc.; Heidi Greenberger, PhD, VP Clinical Research, AbleTo Inc.

As an organization that provides behavioral health care, we have undergone rapid growth to meet the increased need for remotely delivered services during COVID-19. During this time, and always, the well-being of our diverse national workforce is a priority. We are honored to have the opportunity to share our pandemic response strategy with the Health Enhancement Research Organization (HERO) community.

It is likely that no one reading this needs to be reminded how the nation and its workplaces changed in March 2020. During that time of uncertainty, we asked ourselves “how do we support our teams through this?” The answer emerged loud and clear – PEOPLE FIRST. People first is one of our company’s core values. Take care of those in need above all else. From that point forward, pandemic related organizational decisions have been made based on our people, and we have modified business plans and policies to fit into that. Our resulting pandemic response strategy can be described through five synergistic employee centered concepts.

### Listen First

One of the first steps we took within a week of pandemic-related office closures was to design and deploy employee pulse surveys. We used the literature and government resources to guide contents, leveraging what was known about the impact of pandemics on health and well-being, and to ensure that we were identifying subpopulations with

### Pandemic Response Strategy



special needs. We included capability to segment responses, recognizing that emerging challenges could be differential by sociodemographics, job function, geography, and other factors. We always include an opportunity for the employee to share feedback, ideas, and needs in their own words. Primary needs identified as early as the first surveys included: 1) caregiving challenges, 2) changes in lifestyle habits, 3) requests for credible information about COVID-19, 4) help with accessing remote health benefits during shutdowns, 5) ways to stay connected while socially distancing. Other modalities we have used for active listening during COVID-19 include manager-led and companywide forums.

### Create an Interdisciplinary Pandemic Response Committee

We gathered our medical, legal, human resources, and policy experts to review and make collaborative recommendations based on government guidelines, with the goal of providing as much support as possible. The committee met frequently during the first year of the pandemic and

still meets routinely today to review emerging evidence, policies, and workforce needs. We also formed employee-led subcommittees to ensure that the employee voice continued to be heard. For example, a remote working subcommittee was cultivated to curate resources to address conditions experienced as a result of working remotely. Focus areas have included: the dynamic home/work environment, ergonomics, staying connected while socially distanced, how to disconnect from work, financial well-being, and emerging needs and subgroups.

### **Maintain Frequent Transparent Communication**

Building and launching our employee intranet was one of our first high-impact action steps. In a remote work environment, this provided a way to direct employees to one place with dedicated updates and a single source of truth. We maintained our tradition of monthly organization-wide town hall meetings by making them virtual for all. These meetings include updates on strategic business priorities, benefits, and policies as well as Q&A with senior leadership where questions and comments can be confidentially submitted or raised live. Communication was also fostered through good old-fashioned snail mail, where we aimed to stay connected through sending well-being messages and care packages to each employee's front door. Leaders have been encouraged to maintain routine check-ins. Moreover, in response to employee requests,

our chief medical officer provides organization-wide updates related to the state of the pandemic, hosts live informational sessions, and has maintained an open [virtual] door for questions and concerns.

### **Disseminate High Quality Mental and Physical Health and Well-being Benefits**

When considering mental and physical health benefits, we focus not just on the quality of benefits themselves, but how to ensure that individuals are able to access them in a timely manner. For example, we started to offer mental health benefits with no cost options to all employees, even those not on our medical plan, to eliminate cost as a barrier. We also offer different types of behavioral health services including telebehavioral therapy with licensed therapists (so that transportation, time constraints, and stigma may be lessened as barriers), internet based cognitive behavioral therapy programs (for those who prefer self-guided support), and resilience tools. With a variety of program types through health plans, EAP, and our own in-house offerings, the hope is that individual preference is incorporated into the behavioral health experience, which in turn may promote improved adherence. We have learned through our surveys that regular reminders about how to access benefits are needed and appreciated, so we remind routinely. In addition to traditional benefits, we have rolled out step challenges, summer flex hours, mental health days, and more with a focus on equity to ensure

all business units/job types can participate.

### **Foster Cohesion and Inclusion**

We have deployed several initiatives to foster cohesion and inclusion including virtual networking, time with our CEO, fireside chats with senior leadership, and support groups. We have promoted togetherness through community events and volunteerism as well, for example, participation in virtual walk-a-thons where participants share pictures to build the sense of community even when we were not physically together. Employee resource groups (ERGs) play a huge role. We equipped our employees with a framework for how to create an ERG, and they were truly formed by our employees. Our ERGs not only meet regularly, but they bring in expert speakers and host virtual events for education, training, and fun. Our senior leaders sponsor ERGs and share their own journeys.

As the pandemic evolves, we continue to listen, leverage our experts, and learn from our shared experiences. We are focused on new challenges including physical and psychological safety associated with return to the workplace, optimizing the hybrid work experience, and the lasting effects of the pandemic on performance and well-being. One solution does not fit all, and we aim to remain evidence-based and agile as we navigate. Take care of people first and the rest will follow.

## THE “NEW NORMAL” OF EMPLOYEE WELL-BEING: APPLYING LESSONS LEARNED IN A POST-PANDEMIC WORLD

By Lauren Remspecher, MPH, CHES, Senior Director, Member Engagement and Communications, St. Louis Area Business Health Coalition; Annie Fitzgerald, CHES, Well-being and Member Services Coordinator, St. Louis Area Business Health Coalition

On March 11, 2020, the World Health Organization declared novel coronavirus disease 2019 (COVID-19) to be a global pandemic. As organizations adapted to challenges faced by essential, remote, and displaced workforces, one factor became clear: Protection of employee safety and health is critical. Leveraging business case research and virtual interviews, the St. Louis Area Business Health Coalition summarized the combined experiences of 70 employers into nine best practices for addressing employee well-being in a post-pandemic world.

1. **Build the Dream Team:** As organizations worked to organize their response to an infectious disease nightmare, employers found that task forces with representatives from varying departments and all levels of leadership were most suited to mobilize company-wide support for pandemic protocols.
2. **It Takes a Village:** The strain of COVID-19 made it evident that strong partnerships are vitally important to holistically address employee needs. Employers found success in tapping into the expertise and tools from their health plan, pharmacy benefit manager, well-being vendors, and local public health and health care ecosystem.
3. **No Wiffle-Waffling:** Amidst the era of information overload, employers are concerned about adding to the noise when communicating with their employees. However, during the pandemic, 63% of workers looked to their employer as a source for accurate information.<sup>1</sup> In these times of uncertainty, employers identified five strategies to avoid confusion, or “wiffle-waffling,” and build trust among employees: clear messaging, concise and accessible resources, consistent cadence of communication, content relevant to the audience, and routine check-ins.
4. **Health is Wealth:** Disruptions in employment and limited access to hospital services left many employees to gamble their health, with 41% of U.S. adults delaying medical care.<sup>2</sup> Recognizing the negative implications of deferred screenings and treatment, employers focused on “doing the right thing” by continuing benefit coverage for furloughed employees, forgiving medical premiums, and eliminating cost-sharing for virtual care visits.
5. **A Matter of Choice:** Research has shown giving employees flexibility positively impacts employee engagement and job satisfaction.<sup>3</sup> While the pandemic necessitated a shift in work design and structure, employers will continue to find value in listening to employee preferences surrounding flexible work arrangements.
6. **It’s a Family Affair:** Nearly eight in ten working caregivers report the pandemic increased their level of stress.<sup>4</sup> Accommodation is key in supporting employee work-life integration, with many organizations adjusting leave policies, providing caregiving referral services or stipends, and perhaps most

importantly, offering flexibility and empathy surrounding employee work preferences and performance.

#### 7. **You've Got a Friend in Me:**

One-third of employees report that they feel less connected to their peers at work than before the pandemic.<sup>5</sup> To overcome this isolation, employers have facilitated virtual town halls, socially distanced meet ups, and employee resource or affinity groups as opportunities for employees to openly discuss common struggles and receive reassurance.

#### 8. **The Power of Positivity:**

Acknowledging the mental health pandemic exacerbated

by COVID-19, employers have turned to the fields of positive psychology and resilience for inspiration. World-renowned psychologist, Dr. Martin Seligman, speaks to five elements of resilience with his PERMA™ theory of well-being (Positive emotion, Engagement, Relationships, Meaning, and Accomplishments), which employers can leverage to help employees thrive in times of hardship.

9. **Truly Human Leadership:** It's no secret that the behavior of managers and executives has a tremendous effect on the well-being of employees.<sup>6</sup> So how can leaders do more good for their employees? Robert Chapman,

CEO of Barry-Wehmiller, demonstrates that by meeting the four needs of followers (trust, compassion, stability, and hope), leaders are more likely to catalyze resilience and performance.

Faced with challenges of a global pandemic, employers have deployed innovative strategies to address new threats to employee physical, mental, social, and financial well-being. While a one-size-fits-all approach does not exist, employee health and safety must continue to be a priority, both in recovering from the current crisis and preparing for the next.

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## HELPING EMPLOYEES MANAGE STRESS & ANXIETY IN A CHANGING WORLD

By Joe Burton, Founder and CEO, Whil, A Rethink Division

Developing a company culture of mental and emotional well-being is crucial to success in today's workplace. Even after the pandemic ends, the world will remain in a constant state of change and uncertainty. Employers who equip their workforce with techniques that can help them better manage their emotions in today's fast-paced, distraction-heavy world will reap rewards in productivity, retention and overall resilience.

### Take stock of the problem

The end of the pandemic will not mean a return to "business as usual." The nature of work is changing. With the shift to more project-based roles at many companies, employees no longer have one "job." Many have 10 or 12 projects to manage over the course of a year. This constant change is a source of stress.

Whil, a Rethink division, has researched the effects of career-specific micro-stressors that contribute to burnout. For example, sales staff who hear "no" all day long are prone to stress as this leads to worry about commission-based pay. Healthcare workers can feel overwhelmed by the flood of emotions they experience as they care for patients.

On top of what is going on at work, every employee carries the hidden stressors that come from their home lives and their roles as parents and caregivers. These can include anxiety, grief, loneliness, or worry over things like healthcare or home schooling.

These stressors have a direct impact on companies' performance. Studies have shown that highly stressed employees use 130% more sick days,<sup>1</sup> are 60% less productive, and account for 46% more in medical claims on average than employees with a lower level of stress.<sup>2</sup>

### Learning that fits today's habits

Old models of self-improvement through 30- or 60-day programs do not match the way employees learn and consume information today. Many of today's programs are designed to teach employees tips and techniques that they can learn in 1, 3, or 5 minutes and immediately put to use in their daily lives.

Much of this rests on helping individuals take control of the cycle of thoughts, feelings, actions, and results (TFAR). All of us are either in a negative or a positive cycle of thought at any given point in time.

**130%**

More sick days for highly stressed employees

**60%**

More in lost productivity for highly stressed employees

**46%**

More in medical claims on average for highly stressed employees

Our thoughts impact our feelings, which impact our actions, which drive results. Statistics show that too many employees are getting caught in a negative cycle, where they are not in control of their thoughts or feelings but are actually controlled by them.

One example of how to take control of this cycle is a two-minute exercise in attention training. To do this, simply sit comfortably and take five normal breaths. As thoughts intrude, give them a one-word description, such as “family” or “job,” and dismiss them. Next, take five very deep breaths, holding for a few seconds after you inhale. Notice the sensation of breathing, and maintain complete focus on your breath.

With this two-minute exercise, you begin to train yourself to focus attention on something as simple as breath, building capacity for focus in

all areas of life. You learn to notice distractions, to give them a label and set them aside. And the simple act of deep breathing fights stress physiologically by bringing extra oxygen to the entire body.

A good practice is to encourage employees to take at least one break like this per day. Regular attention training can help build these skills over the course of time.

### **Habits matter**

We get better at the things we practice most. Unfortunately, too many of us are practicing distraction by mindlessly picking up our mobile devices hundreds of times throughout the day. Building the habit of being comfortable sitting with our own thoughts opens us up to greater focus, greater productivity, and better emotional well-being.

A 2016 study<sup>3</sup> found that the human attention span had shrunk to about eight to 12 seconds—about as much as a goldfish. This a direct result of our increased dependence on mobile devices creating distraction and a constant access to information we no longer commit to memory.

The majority of people aren't willing to take five to 10 minutes a day to focus on well-being, but we are at a juncture in the world where it is critical that we do this. We must create a culture within our companies to take better care of our employees.

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## HOW DOES THE BANISH BURNOUT PROGRAM WORK?

By Janice Litvin, Wellness Speaker and Author

All twelve-step meetings end with the following prayer: *“God, give me the strength to accept the things I cannot change, the courage to change the things I can, and the wisdom to know the difference.”*

Quite often when we overreact to stress, it is because we are frustrated with our lack of control.

Stress and burnout are more rampant than ever since the onslaught of the Corona Virus. But even before that, stress was already becoming an issue with 66% of Americans approaching burnout according to Gallup.

Those who fare best are the ones who accept the things that are not within their control. This means learning how to modulate our emotions so as not to overreact at every turn.

The easiest way to change our reactions is to first build awareness and then second, learn how to change our reactions, from the inside out.

Are you the kind of person who expends a lot of energy tearing her hair out every time something stressful happens?

I was that negative, complaining person who found something negative at every job. I grew up in a home where love was present but so were intense critical expectations. When a child is criticized

repeatedly, they develop what is known as limiting beliefs, according to Dr. Elayne Savage, Practicing Psychotherapist and author of *Don't Take It Personally! The Art of Dealing with Rejection*. Limiting beliefs come from internalized reactions to constant criticism. For example:

*You made all A's last semester. Why aren't you making all A's this semester?  
That term paper is not perfect. Start over.*

*That dress does not work for you.*

When a child receives these criticisms repeatedly, they believe them, then they internalize them and unconsciously convert them into internal messages, such as:

*I'm not smart enough.*

*I'm not pretty enough.*

*I'm not good enough.*

Those messages are carried forward into adulthood and undermine every endeavor until they are rooted out.

The best way I know to build awareness and begin to get your reactions to stress under control is to STOP and AUDIT.

### **STOP and AUDIT.**

Let's start with S-T-O-P.

One of the easiest ways to make immediate changes to your behavior is to remember to S-T-O-P, which stands for:

Stop  
Take a breath  
Observe  
Proceed

STOP is a very powerful method for immediate behavior change. Once you identify that you want to change your behavior, this approach works.

Here is how it works.

*STOP*, as the name suggests, gets you to sit up and notice what you are thinking, feeling, and doing.

*Take a Breath*, again as the name suggests, is about taking a very deep breath, which activates the parasympathetic nervous system to help you calm down.

*Observe* gets you to notice what you are thinking and/or how you are behaving. If you are stuck in overreaction, then that is where you can course-correct and move the reaction from the Amygdala, the fear center of the brain, to the pre-frontal cortex, the executive functioning part.

*Proceed* is where you make a decision about how you will behave in the moment.

STOP is the best way I have found to interrupt negative thoughts and turn your mood around from negative to positive.

## STRESS AUDIT

The second part of this tool is the **Stress Audit**, whose purpose is to uncover and focus on possible pent-up feelings in reaction to something that has happened, a stressor or incident of some sort. It could stem from something small, such as being on hold too long for technical support, or something big, like a major disagreement or disappointment at work.

It is important to note that pushing down and ignoring feelings leads to emotional outbursts later. So the value of the Stress Audit is to give your feelings a place to release.

The Stress Audit is fairly easy to complete. You simply ask yourself, “How am I feeling right now in this moment?” as soon as you can after a stressful incident. Here is how it works. Ask yourself the following questions:

**What happened?** [Disagreement at work.](#)

**How did I feel physically?** [Tight jaw, neck, or shoulders, knots in the stomach, headache, elevated heart rate, or shallow breathing?](#)

**How do I feel emotionally?** [Anger, frustration, resentment, or sadness, etc.](#)

**What did I say?** [Argued, complained, etc.](#)

**How upset did I get and how long did I stay there?** [I was so upset I couldn't think straight or do my work.](#)

The key to managing stress and banishing burnout is to change your behavior. And the first step to any behavior change is building awareness. You cannot make any change without it. STOP and the Stress Audit are tools to help you build the awareness you need in order to recognize your intense responses to stress and then to adopt healthier coping strategies.

Janice Litvin is a workplace wellness speaker and author of *Banish Burnout Toolkit*. If you would like a free pdf copy, go to <https://www.JaniceLitvin.com/Resources>.

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**STRESS AUDIT**

**Stressor – what happened?**

**Reactions**

- Physical reactions
- Emotional reactions
- Verbal reaction
- Exacerbating behavior
- Addictive Behaviors



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