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**FROM STIGMA & SILENCE TO SOLUTIONS:**  
ADDRESSING WORKFORCE MENTAL HEALTH  
THROUGH SYSTEMIC CHANGE





# WORK SHOULDN'T BE A RISK FACTOR: RETHINKING MENTAL HEALTH IN THE WORKPLACE

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**The 2025 HERO Forum I opened with Dr. Colleen Saringer sharing why she raised her hand to serve as the Chair of this Forum on mental health.**

## Colleen's Story

*When I was 13, I learned that when a job has high demands, with low control, it increases the odds of a suicide attempt. I also learned that if you're struggling with your mental health, it's safer to keep it a secret, especially at work, so that this information doesn't harm your career. These two lessons were a result of my father, a business owner in the construction industry, making the decision to drive himself to the hospital instead of taking his life, after his workday ended.*

Although workplaces are placing intentionality on mental health at work, many stop short at stigma reduction and suicide awareness/prevention. Both are important, however neither address the work factors within our workplaces, and within a business' control, that contribute to and/or exacerbate anxiety, depression, suicidal thoughts and suicides. These work factors, referred to as psychosocial factors, include high and low job demand, low job control, poor support, low role clarity, poor organizational change management, poor workplace relationships including interpersonal conflict, bullying, poor organizational justice, low reward and recognition, violence and aggression, traumatic events, harassment, remote or isolated work and poor environmental conditions.

Joining HERO to educate attendees on the theory and practical application of the often-

overlooked connection between work factors and their profound impact on mental health were:

- Jack Dennerlein, PhD, Dean, Sargent College of Health and Rehabilitation Sciences, Boston University
- Susan Elizabeth Peters, PhD, Associate Director, Center for Work, Health, and Well-being, Harvard T.H. Chan School of Public Health
- Dori Hutchinson, ScD, CPRP, CFRP, Executive Director/Director of Services, Center for Psychiatric Rehabilitation, Boston University Sargent College of Health and Rehabilitation Sciences

## Protecting Workers from the Harms of Work on Mental Health

Dr. Jack Dennerlein began by defining "complete mental health," which includes 1) positive mental health — the dynamic state of well-being marked by life satisfaction, purpose, resilience, and fulfilling relationships; and 2) mental illness — a health condition characterized by changes in emotion, thinking, or behavior, often causing significant distress or impairment in daily functioning. He continued by addressing three areas of opportunity to support mental health at work: protecting workers from harm, promoting healthy workplace conditions, and providing access to mental health services - with his focus on protection from harm. Employers can support employees by addressing the work factors previously listed (e.g., high and low job demands, low job control, bullying, etc.),



**Keep it a secret, especially at work, because it could ruin you."**

**~Colleen Saringer**

which data links to mental health issues, including higher rates of distress, healthcare costs and suicide. Creating supportive environments with manageable workloads, recognition, autonomy, and social support not only reduces harm, it also positively impacts the health and well-being of employees and improves organizational outcomes.

### **Improving Workplace Mental Health and Well-being: Amplifying Worker Voice and Creating Psychological Safety\***

Dr. Susan Peters' research identifies a key strategy in addressing the work factors that negatively impact the mental health of employees: amplifying the worker voice and cultivating psychological safety. When employees feel safe to express concerns without fear of retaliation, psychological safety takes root. This in turn fosters a culture where risk-taking, open dialogue, and learning from mistakes are encouraged, which results in improved employee engagement, innovation, problem-solving, mental health, and overall job satisfaction. Despite these positive outcomes, progress toward psychological safety is often hindered by barriers such as fear of speaking up, leadership resistance and ineffective communication structures, as well as misconceptions that equate it with being nice or tolerating poor performance. The reality, however, is that true psychological safety is rooted in constructive dialogue, responsible risk-taking, and a commitment to continuous improvement.

*\*Due to illness, Susan Peters was unable to give her presentation. Given Jack Dennerlein's collegial relationship with Susan and knowledge of her work, Jack was able to present Susan's slides.*

### **Meanwhile...Back at the Office: My Story of Walking the Talk of Supporting Employee Mental Health**

Dr. Dori Hutchinson shared a four-decade journey in her work at Boston University's Center for Psychiatric Rehabilitation, where 70% of the employees are open about their mental health and/or substance use conditions. As the world reopened following COVID, Dori stepped into the Executive Director role of the center, where she was faced with right-sizing her employee's mental health and psychological safety. Dori's presentation took us through the four lessons she learned in this process:

1. Listening. Asking employees about the center's challenges, how these challenges impacted their mental health and what they would recommend as a solution.
2. Cultivating relationships. Daily, weekly and monthly employee rhythms with the intention to create a sense of belonging and connection. Employees who shared personal stories were honored and rewarded.
3. Harnessing the power. Professional and personal power are often present in the workplace. When used negatively, it diminishes employee engagement, coercing them to leave their jobs. Call attention to those who are abusing their power.
4. Small actions matter. The small consistent actions are important (e.g., saying 'good morning' to a co-worker).



# CRAFTING A CULTURE: MENTAL HEALTH IN ORGANIZATIONAL DESIGN

JEANNE R. EICHLER, EDD, OTR/L; AND DORI HUTCHINSON, SC.D.

A culture of mental health and well-being is a setting where mental health is considered in every aspect of the organizational experience. When mental health is regarded as foundational and built into the policies, practices, and processes of the workplace, the return on investment (ROI) is exemplary, impacting productivity, retention, health, trust, and connections among colleagues<sup>1</sup>. The act of *crafting* the culture is individualized, intentional, and responsive. Crafting an organizational culture involves every stakeholder in the organization and is initiated and supported by leadership, learning what keeps people resilient and engaged, supported in a healthy life balance, and allows a variety of choices.

Using our collective experience in leadership, consultation and education on how to promote, prevent and protect employee mental health, we identified five emerging themes that present opportunities for reflection and action at any organization:

- Mattering matters
- Principled leadership
- Navigate together
- There is no wrong door
- Choices and consequences



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## MATTERING MATTERS

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- Lead and lean in with empathy
- Life and work is messy
- One size does not fit all



It is critical for all members of organizations to know that they matter and contribute uniquely to the organization. When leaders seek to build an organization where empathy and excellence co-exist, collaboration and innovation can thrive, which supports the mental health and sense of belonging of all employees.

**Dori Hutchinson:** “I became Executive Director of my workplace as we were emerging from COVID, I had to address the fact that 70% of my staff were living with mental health challenges and many were angry,

stressed, and unhappy. My main objective during this time was to listen more than speak — to learn as much as possible about how my staff was functioning and relating to one another. This allowed me to cultivate my relationships and foster collaboration across all levels of our organization. My staff trust me and are open with me. Staff feel empowered to seek support when they are challenged. I want them to feel included and invited into what happens here — to know that what they contribute matters to the big picture.”



## PRINCIPLED LEADERSHIP

- "Keepers of organizational values"
- Communicate mental health is valued
- Model and actualize into practices and policies



**DH:** “When the rubber meets the road, what does principled leadership look like in your organization? How do people connect with one another and practice self-care? We need to trust our workers to take care of themselves, and a crafted culture gives them the tools and the support to do it. Leaders are the keepers of organizational values and set the tone for the culture of the workplace. They must communicate that every person’s mental health and well-being is valued and do this intentionally and constantly. The way to do this is to actualize the intention into practices and policies that are hard-wired into the lived experience of being a part of the organization<sup>2</sup>.”



## NAVIGATE TOGETHER

- Manage uncertainty, not people
- Promote personal responsibility for work success and satisfaction- self-determination: DO IT TOGETHER!
- Craving connection
- How is this experience FEEDING me?
- Frame mistakes as learning opportunities





**Jeanne Eichler:** “The way we use words is important. What are we telling our workforce with our terminology? What assumptions do we make? Several years ago, I started a program for ‘neurodivergent’ college and career-bound teens and young adults who were challenged when communicating with and collaborating with others. I had a large group of volunteers helping me with the program, and I initially called them ‘mentors’. A few weeks after I started the program, I met with a friend and colleague who challenged my use of the term, stating that the role of a mentor is to model aspirant behavior with the intent to imitate that behavior. He asked me to try out the term, ‘navigator’, and as soon as we did so in the program, the sense of community naturally transformed. The role of a ‘navigator’ in our program was defined as a person who navigates an experience with another person to share that experience and then talk about it together at the end, benefiting both parties.”

People crave connection by nature. When empowered to grow and develop in their own way as they need to when working to accomplish a goal, they can utilize the right balance of self-determination and organizational norms, promoting autonomous motivation, high quality performance, and wellness<sup>3</sup>. Organizations can only truly control the environments that they create for their workforce. By managing uncertainty and allowing the workforce to navigate through a carefully crafted culture, the diverse needs of the workforce can be met by allowing the people to create the experiences. Mistakes become learning opportunities, making the environment safe for people to bring their best and most natural selves to work.



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## THERE IS NO WRONG DOOR

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- Culture of access
- Assess and appreciate differences, skill, and supports (EVERYONE!)
- Crafting culture and environment- dynamic- people will build what they need when tools are available



**JE:** “Think of the last big thing you did that required your attention and engagement to make an important deadline. What was your environment like? Did you need to clear the space? Add or subtract music or sound? Use special lighting? Close the door? Go for a walk or workout beforehand? Does your chair move or does it sit still?<sup>4</sup> Everyone is different, and our bodies naturally seek the sensory input that we need to get the job done. Having the freedom to choose what we need gives us agency, empowering us to self-evaluate and take responsibility for our own performance. For example, a survey of 7500+ college students at a large state university implied that individuals with certain types of interests did best when sitting in the right chair for them relative to the movement (or non-movement) characteristics of the chair.

Additionally, when students were given the choice of seating in their study or learning environment, they only used what they needed<sup>5</sup>. Imagine if new employees were given the opportunity to select what they needed in their workspace rather than having to use a standard setup. Simple items at their disposal could make all the difference in overall productivity: noise-canceling earmuffs, working space options, lighting, dress code, scheduled meetings/disruptions, social environment, self-regulation spaces and strategies recognize that optimal access to the workspace is far more than physical.”

**DH:** “The cost of providing options to workers who may struggle with mental health challenges, including simple strategic tools, is not expensive. The benefits of productivity, retention, and workplace culture/ environment far surpass the average \$500 cost of providing choices and resources as people need them.”



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## CHOICES AND CONSEQUENCES

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- ASSUMPTIONS of participation
- What do they not know what to do?
- Clear communication and expectations
- Impact on burnout
- PRODUCTIVE struggling- important growth edge



Researcher and author Carol Dweck brings attention to the consequences (positive and negative) of feedback strategies on individuals across the lifespan<sup>6</sup>. If we start with the assumption that the right hire is capable of performing the task they were hired to do, then we can look at failures and challenges as part of the process — as she refers to it “NOT YET.” This shift in our own mindset expressed through feedback could make the difference between a “fixed” response of non-growth/non-change in performance and a “growth” response of improvement and refinement over time. The struggle of a person with a growth mindset is productive and beneficial.

**JE:** “In my experience working with hundreds of individuals over many years, I’ve learned that people who encounter difficulty most often have some aspect of the task that they are not developmentally ready for or do not know how to do. Doing a deep dive into this can help workers realize their potential by identifying and filling in gaps in performance. COVID took our current young adult population out of the social environments where they typically learn how to self-regulate their emotions in a public forum, collaborate on complex tasks, make ethical decisions regarding others, and navigate complicated social environments. Consider this when observing challenges encountered, especially during the first years after entering the workforce. Provide clear communication of expectations and ask if they might like a

demonstration of the task. Increasing numbers of young adults are bypassing college and entering the workforce and, unlike university settings that provide “adulthood” education in many forms, there is no “employee success” office for young adults transitioning into the workplace who do not yet understand the etiquette and practices of adults in an established workforce. Providing tools unique to this population of workers may reduce their sense of burnout and increase overall retention and connection to the organization, who, as we discussed earlier, are letting them know that they matter.”

In closing, the way we regard others in our organizations matters. It involves using empathy, holding standards of excellence at the same time, collaborative supervision and feedback styles, choices in setting up the environment and consideration of workflow tools and strategies, and assumption of capacity. Crafting a culture for success and retention imbeds mental health into every fabric of the organization, invites all to participate in the process and implementation, and is ever present and evident.

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# CONNECTING SCIENCE & PRACTICE: A HERO ROADMAP FOR EMPLOYERS NAVIGATING WORKFORCE MENTAL HEALTH

PHILIP SWAYZE, MS, VP POPULATION HEALTH & WORKFORCE WELLBEING, HUB INTERNATIONAL IN NEW ENGLAND; CO-CHAIR, HERO WORKFORCE MENTAL HEALTH & WELL-BEING COMMITTEE

The following article synthesizes key insights from the breakout featuring two HERO research initiatives, including the 2024 HERO publication by committee co-chair and lead co-author Philip Swayze titled, “**Workforce Mental Health & Well-Being Resources: A Navigation Guide.**”

The navigation guide outlines five primary areas through which employers can support mental health: behavioral health benefits, employee assistance programs (EAPs), digital mental health solutions, informational resources, and mental health training.

## Integrating Behavioral Health Benefits

Behavioral health benefits remain a cornerstone of employer-sponsored mental health support, encompassing treatment of conditions listed in standardized diagnostic frameworks, like those in the DSM and ICD. High-quality behavioral health coverage is defined by access to a full continuum of care, including outpatient and inpatient services, and integration with primary medical care.

A well-structured behavioral health strategy must enable outcome tracking at the individual and population levels and remove structural barriers such as session limits and excessive pre-authorization requirements. An indication of increasing access and demand, Swayze shared 2024 data from one New England based carrier indicating a 5% increase in behavioral health claimants (\$3.8M) with a 12-14% increase across all categories of covered lives.

## EAPs as a Gateway to Early Intervention

Employee assistance programs (EAPs) provide confidential, short-term support to employees

experiencing personal or work-related issues. Evolving far beyond their original focus on substance misuse, modern EAPs cover a wide range of challenges—from family caregiving to financial stress—and can serve as an early intervention point before clinical thresholds are met.

Key quality indicators include 24/7 telehealth options, multilingual communication, appointment scheduling within ~2 days, and transitions to behavioral health care when higher-intensity services are required. From a scientific perspective, EAPs that collect data on client demographics, satisfaction, and outcomes can better tailor services and demonstrate impact. Integration into broader health and wellness strategies, especially at leadership and management levels, enhances organizational relevance and reach.

## The Rise of Digital Mental Health Solutions

Digital mental health, or mobile health, represents an increasingly important dimension of workforce mental health strategy. These tools range from FDA-regulated digital therapeutics to unregulated wellness applications, often offered as either employer-sponsored (B2B) or consumer-facing (B2C) products. Despite the promise of increased accessibility, evidence for effectiveness varies widely.

Effective digital solutions typically incorporate interactive, evidence-based curricula—such as internet-delivered cognitive behavioral therapy (iCBT)—and offer data privacy protections,

intuitive user interfaces, and tools for mood and behavior tracking. For scientifically informed adoption, employers should look for evidence of sustained engagement, measurable health outcomes, and integration with clinical support pathways. Conversely, red flags include apps with exaggerated claims, inadequate data privacy, or out-of-date content.

### **Informational Resources: Knowledge as Prevention**

Mental health literacy plays a foundational role in prevention and stigma reduction. Informational resources—such as websites, handouts, videos, and toolkits—can be low-cost yet powerful tools for increasing awareness and guiding help-seeking behavior. However, the value of such resources is contingent on their credibility, scientific accuracy, accessibility, and cultural relevance.

Employers must critically evaluate the source, intent, and scientific grounding of the materials provided to employees. Bias, pseudoscience, or commercial interest may undermine credibility.

### **Evidence-Based Mental Health Training**

Training programs targeting mental health awareness and stigma reduction can transform workplace culture. High-quality training is grounded in science, tailored to specific audiences (e.g., line workers vs. executives), and evaluated for impact on knowledge, attitudes, and behaviors. Goals often include increasing mental health literacy, encouraging use of available resources, and fostering supportive behaviors among peers and leaders.

Scientifically robust training avoids a one-size-fits-all approach and includes mechanisms to assess knowledge retention, attitude shifts, and behavioral change. A common pitfall is training that overemphasizes clinical diagnosis or places undue responsibility on employees to identify or manage colleagues' mental health challenges. Instead, training should empower employees to seek

help and support one another through evidence-informed approaches.

### **Conclusion**

As employer responsibilities evolve to encompass holistic health, mental well-being has emerged as a critical area of investment. The HERO guide provides an actionable framework rooted in current evidence and emerging best practices. For the scientific and professional benefits community, the task now is to rigorously evaluate the implementation of these strategies, ensuring they align with scientific standards and contribute meaningfully to improved health outcomes, productivity, and equity in the workplace. Effective workforce mental health strategies must be comprehensive, culturally competent, outcome-oriented, and informed by science—not just sentiment.





# BEYOND AWARENESS: LEVERAGING WORKFORCE MENTAL HEALTH ASSESSMENTS FOR SYSTEMIC CHANGE

KERRY E. EVERS, PHD, CO-PRESIDENT AND CEO, PROCHANGE BEHAVIOR SOLUTIONS; CHAIR, HERO EDUCATION COMMITTEE

In today's complex work environments, organizations must move beyond awareness campaigns and adopt data-driven strategies to support mental health. Mental health assessments are foundational tools that enable organizations to shift from reactive wellness initiatives to proactive, systemic approaches.<sup>1,2</sup> These tools offer critical insights into employee needs, inform resource allocation, personalize interventions, and help create psychologically safe and supportive cultures.

A recent comprehensive review supported by the Health Enhancement Research Organization (HERO) identified 104 mental health assessments, with 66 assessments meeting strict inclusion criteria for workplace utility: assess a relevant mental health domain, be validated in adult populations, function independently of a vendor platform, and be available in English.<sup>3</sup> This rigorous methodology ensured that only high-quality, practical assessments were included.

The tools were categorized by focus such as general mental health, burnout, resilience, stress, loneliness, and psychological safety. Each construct was defined and mapped to appropriate tools:

- **General Mental Health** was defined as a state in which an individual realizes their own abilities, can cope with life stressors, work productively, and contribute to their community.<sup>3</sup> Assessments included the Mental Health Continuum (Short<sup>4</sup> and Long<sup>5</sup> Forms), Mental Health Quotient (MHQ)<sup>6</sup>, and the NIOSH Worker Well-Being Questionnaire<sup>7</sup>.
- **Burnout**, defined as a syndrome of exhaustion, depersonalization, and reduced efficacy from

chronic workplace stress<sup>3</sup>, was assessed using tools like the Maslach Burnout Inventory<sup>8</sup>, Burnout Assessment Tool<sup>9</sup>, and the Copenhagen Burnout Inventory<sup>10</sup>.

- **Resilience**, the ability to thrive in changing environments<sup>3</sup>, was measured with tools such as the Brief Resilience Scale<sup>11</sup> and the Connor-Davidson Resilience Scale<sup>12</sup>.
- **Stress** was measured using validated tools like the Perceived Stress Scale<sup>13</sup> and the Occupational Stress Index<sup>14</sup>.
- **Loneliness** was conceptualized as the perceived lack of meaningful relationships and social isolation<sup>3</sup>. Assessments included the UCLA Loneliness Scale<sup>15</sup> and the Loneliness in the Workplace Scale<sup>16</sup>.
- **Psychological Safety** was captured through tools such as the Copenhagen Psychosocial Questionnaire<sup>17</sup> and the Psychosocial Safety Climate Scale<sup>18</sup>.

With so many options available, selecting the right assessment requires clarity and intentionality. Organizations should begin by defining what they aim to measure and ensuring alignment between their goals and the assessment's design. Additional criteria include population fit, cultural and linguistic accessibility, efficiency, and timing—both in administration and in communicating results<sup>3</sup>.

One core principle in tool selection is parsimony: using the simplest effective method to achieve the desired insights<sup>19</sup>. Short, focused assessments tend to improve engagement, reduce fatigue, and build trust. However, organizations should be cautious

about extracting single items from validated scales. This practice may undermine the scientific validity of the tool and could lead to misleading results.

Effective implementation is equally important. Assessments should be integrated into a broader well-being strategy that includes:

- Clear and transparent communication about purpose and use
- Assurance of confidentiality and data privacy
- Timely and actionable feedback to both employees and leadership
- Use of findings to inform organizational policies, support services, and culture-building efforts

Common implementation pitfalls include lack of leadership engagement, poor communication, failure to follow up with action, and over-reliance on individual-level solutions at the expense of

systemic change. Additionally, ignoring equity considerations or cultural responsiveness can erode trust and undermine effectiveness.

When done right, mental health assessments empower organizations to prevent harm, promote positive mental states, and respond effectively to challenges. They support the development of referral pathways, allow tracking of progress over time, and demonstrate organizational commitment to employee well-being.

Ultimately, workforce mental health assessments are not just measurement tools, they are strategic assets. By leveraging them thoughtfully and integrating them into holistic well-being initiatives, organizations can create inclusive, resilient, and high-performing work environments grounded in psychological safety and human-centered leadership.

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# CLOSING SESSION



## CAN YOU HEAR ME NOW? THE IMPORTANCE OF EMPLOYEE FEEDBACK

BY COLLEEN SARINGER, PHD  
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The closing session centered around the importance of the employee voice, defined as *the ability of employees to express their views, opinions, concerns and suggestions, and for these efforts to influence decisions at work*. Colleen convened a diverse multi-generational panel representing four generations of employees: Baby Boomer, Generation X, Millennial and Generation Z.

Research supports the value of integrating the employee voice in the workplace:

- The Former U.S. Surgeon General's 2022 Framework for Workplace Mental Health & Well-being puts the employee voice at the center, and stresses that a healthy organization requires an environment where employees can speak openly without fear of retaliation or job loss.
- Organizations that embrace the employee voice see measurable benefits, for example, productivity and communication improvements, reductions in absenteeism, acceleration of organizational performance, conflict resolution, and the ability for management to identify and address weaknesses in organizational structures. For the employee, when they're invited to engage and influence outcomes, well-being and morale improve.
- Organizations that disregard and/or do not integrate the employee voice make misguided assumptions about employee priorities which

can foster a sense of exclusion, reduce engagement, and erode trust. Other employee impacts include increased stress, anxiety, and loneliness, all factors that contribute to diminished well-being and productivity.

### The Employee Voice

1. What has been your experience in having your voice asked for and/or heard in the workplace?
2. Is it important to you that your voice is heard? If yes, why? If no, why not?
3. Was there a personal impact on you when your voice was asked for/heard vs. when it was disregarded/not asked for?

### Mental Health and Work

1. Our environments and personal experiences shape us. With that in mind, what were you taught about mental health from your home/family, community or schooling when it came to the workplace?
2. What do you believe is the role of your employer (and/or an employer) when it comes to mental health and work?
3. Have you ever shared a mental health concern with a colleague or leader? If yes, what was that experience like? If no, why didn't or haven't you shared?

### Workplace Culture & Leadership Support

1. How would you describe the support (or lack



lieve is the role of your employer (and/or an employer) when it comes to mental health and work?

3. Have you ever shared a mental health concern with a colleague or leader? If yes, what was that experience like? If no, why didn't or haven't you shared?

- **Leadership.** Leaders set the tone and establish the “mental health” norm. If leaders act (e.g., take a mental health leave of absence), employees feel as though they can, too.
- **Value in being heard.** When the voice is heard, engagement ensues, trust is fostered, and organizational commitment is strengthened.

- **Apprehension remains.** Although mental health and stigma reduction campaigns are the norm, apprehension remains on speaking up and/or disclosing personal and professional mental health challenges.

These common themes are a reminder that age and tenure might separate us, but being met with respect and dignity is what connects us.



