MIND THE WORKPLACE



2021



ACKNOWLEDGMENTS

Mental Health America (MHA) - founded in 1909 - is the nation's leading community-based nonprofit dedicated to addressing the needs of those living with mental illness and to promoting the overall mental health of all. Our work is driven by our commitment to promote mental health as a critical part of overall wellness, including prevention services for all; early identification and intervention for those at risk; integrated care, services, and supports for those who need it; with recovery as the goal.

MHA recognizes the psychological impact that workplaces can have on employees. Millions of employees spend a large part of their day, and lifetime, at work, increasing the effect that workplaces have on employees' mental health and well-being. MHA's workplace initiatives are part of an ongoing commitment to uncover workplace disparities, promote meaningful change in organizational practices, and develop resources to address the mental health needs of employees.

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This report was researched, written, and prepared by Taylor Adams, Madeline Reinert, Danielle Fritze, and Theresa Nguyen.

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MESSAGE FROM PAUL GIONFRIDDO, PRESIDENT & CEO, MENTAL HEALTH AMERICA

The American workplace was unprepared for the COVID-19 pandemic and the effect it would have on workers. That is a key take-home point from this year's *Mind the Workplace* report.

In 2020, workers were more stressed than ever. They were more worried about their physical health and mental health. They were more anxious about their financial well-being. They were more concerned that their employers and supervisors were unsympathetic to the stresses they felt.

More than half were also actively looking for another job – during times when unemployment was high and job creation was slowing. And when workers feel trapped in their jobs, the blow to productivity is severe.

But there is hope, because so much of what is contributing to employee stress can be addressed in the following ways. Employers can make employee mental health a priority. They can encourage people to talk about it. They can build supports for both in-person, hybrid, and fully remote workforces.

These supports are not hard to identify. Adequate health insurance that includes mental health benefits, formal and informal workplace mental health programs open to all, information, and resources about managing stress and maintaining mental health, and a workplace culture that values and rewards openness about mental health are just a few supports that work.

Workplace mental health is key to a lasting economic recovery. We hope that this report guides leaders to the steps they can take to make mental health a universal goal. And perhaps it will lead to more employers being recognized for their efforts by being awarded Mental Health America's <u>Bell Seal for Workplace Mental Health</u>.



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Paul Gionfriddo President and CEO Mental Health America

MESSAGE FROM ANDREW FAAS, FOUNDER, FAAS FOUNDATION

The Faas Foundation is pleased to be partnered with Mental Health America in helping reduce stress in the workplace and in the production of the third annual *Mind the Workplace* report.

The 2020 report is a very disturbing condemnation on how organizations have responded to COVID-19. The report highlights how much the stress could have been reduced by a better employer/employee relationship.

A huge consequence identified in the report is the over 56 percent of people who are actively looking for a new position, up from 40 percent in our last report. This compares to a recent study conducted by Ceridian that indicated 64 percent of North American workers are looking for a new job.¹

The most important component of the employer/employee relationship is the role of the immediate supervisor. To foster better relationships and reduce stress, I highly recommend that employers make emotional intelligence a core competency for everyone in management.



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Andrew Faas Founder Faas Foundation

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EXECUTIVE SUMMARY

The Coronavirus Disease 2019 (COVID-19) has had a debilitating impact on the nation and its people's physical, mental, and financial health. This is especially true for employees and workplaces across company size and industry. The unemployment rate increased to 14.7 percent in April 2020 and has yet to return to its 3.5 percent pre-pandemic rate.² MHA's third annual Work Health Survey, available between February and September 2020, provides an opportunity to better understand the mental health challenges employees were experiencing during the pandemic.

The Work Health Survey measured the perceptions of over 5,000 employees across 17 industries in the United States. Survey questions measured financial insecurity, burnout, supervisor support, workplace stress, and mental illness. The survey explored the relationship between workplace and supervisor support, and its impact on burnout and employee mental health outcomes as work environments adapted to pandemic-related changes.

FINANCIAL INSECURITY

- Employees who report earning an annual income of less than \$60,000 are concerned about their financial situations. Fifty-eight percent of respondents reported that they worry about not having enough money to pay for their living expenses, with 1 in 5 employees strongly agreeing with this statement. Over 65 percent of Work Health Survey respondents were employees with an annual individual income of less than \$60,000.
- Nearly 2 in 3 employees cannot save for an emergency. Over 60 percent of respondents reported that they are not paid enough to save for an emergency, with nearly 29 percent strongly agreeing with this statement. The threshold in which people felt comfortable to save for an emergency was an individual income of at least \$80,000 per year. Nearly 80 percent of Work Health Survey respondents reported earning an individual income level of less than \$80,000 per year.
- About 1 in 3 employees cannot afford their healthcare costs. Nearly 34 percent of respondents reported that
 they were unable to afford their health care costs. Employees who reported earning less than \$20,000 per year,
 which represented 18 percent of respondents, were more likely to report being unable to afford their own or their
 family's health care costs than employees who reported higher incomes.

EMPLOYEE BURNOUT

- **Most employees are experiencing the early signs of burnout.** Nearly 83 percent of respondents felt emotionally drained from their work, with over 40 percent stating they strongly agreed with this statement.
- Employees who are experiencing exhaustion, an early sign of burnout, report that workplace stress was affecting their mental health. Of employees who strongly agreed that they feel emotionally drained by their work, 99 percent agreed (somewhat agreed to strongly agreed), and 71 percent strongly agreed that their workplace stress affects their mental health.
- Nearly 1 in 4 employees experienced the more severe signs of burnout, including reduced professional efficacy and cynicism towards coworkers and their jobs. Over 23 percent of employees reported that they don't care what happens to their colleagues or clients.

SUPERVISOR SUPPORT

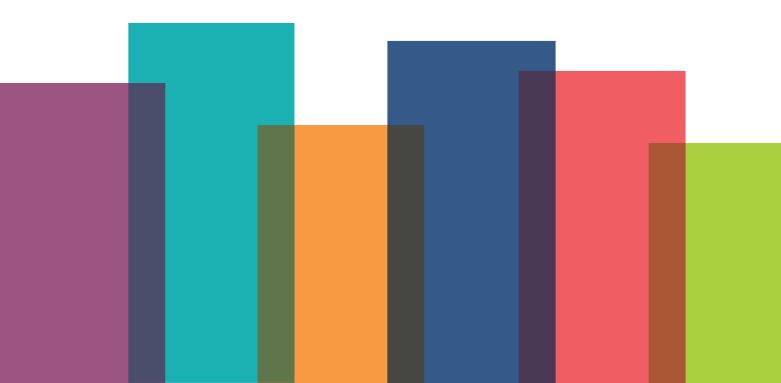
- Employees are not receiving adequate support from supervisors to help manage stress. About 59 percent of respondents disagreed that their supervisor provides emotional support to help them manage their stress, and 1 in 4 employees strongly disagreed with this statement. Of employees who strongly disagreed that their supervisors provide emotional support, over 85 percent disagreed that their employers provide a safe and welcoming environment for employees who live with mental illnesses.
- Talking to a supervisor to change stressful things about work was most strongly correlated with the healthiest overall workplace health scores. Open and honest discussions between supervisors and employees about job

stressors is one important area of focus for employers concerned about employee mental health and healthy work environments.

- Employees who cannot talk to their supervisors about job stressors are less likely to perceive their workplace as a safe environment for employees who live with mental illnesses. Of employees who strongly disagreed that they could talk to their supervisor to change stressful things about their work, over 87 percent disagreed (somewhat disagreed to strongly disagreed) that their employers provide a safe and welcoming environment for employees who live with mental illnesses.
- Employers who do not provide and educate employees about mental health resources are less likely to be perceived as a safe environment for employees who live with mental illnesses. Of employees who strongly disagreed that they know what resources they could use if they needed emotional support, over 85 percent disagreed (somewhat disagreed to strongly disagreed) that their employers provide a safe and welcoming environment for employees who live with mental illnesses, with over 48 percent who strongly disagreed with this statement.
- Employees who feel acknowledged at work are less likely to seek out other employment opportunities. Of employees who strongly agreed that they felt acknowledged and accepted at work, nearly 77 percent disagreed (somewhat disagreed to strongly disagreed), and over 50 percent strongly disagreed that they spend time looking for a new position.

WORKPLACE STRESS AND MENTAL ILLNESS

- Nearly 9 in 10 employees report that their workplace stress affects their mental health. Eighty-five percent of respondents agreed (somewhat to strongly agreed) that their workplace stress affects their mental health.
- Over 65 percent of employees find it difficult to concentrate because of their work environment, compared
 to 46 percent of respondents in 2018. Of employees who strongly agreed that they feel emotionally drained by
 their work, over 85 percent agreed (somewhat agreed to strongly agreed) that they felt distracted because of their
 work environment.
- Nearly 3 in 5 employees feel that their employer does not provide a safe environment for employees who live with mental illness. Over 56 percent of respondents disagreed that their employers provide a safe and welcoming environment for employees who live with mental illnesses. Less than 5 percent of respondents strongly agreed with this statement.
- The majority of employees surveyed are seeking new employment opportunities. Over 56 percent of employees reported that they spend time looking for a new position, compared to 40 percent of respondents in 2018.



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INTRODUCTION: WORK HEALTH SURVEY

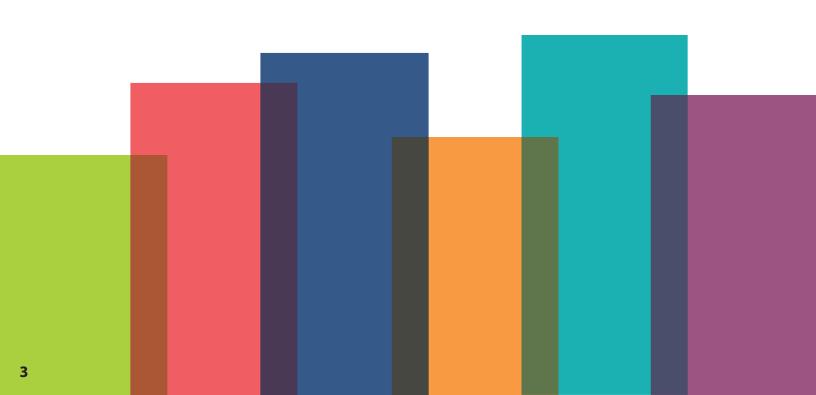
The 2020 Work Health Survey launched on February 13, 2020. It was available to the public through MHA's website, as part of MHA's Online Screening Program. The survey included 16 questions that were selected as measures for financial insecurity, burnout, supervisor support, workplace stress, and mental illness. The Work Health Survey collected 5,030 responses in seven months (February 13, 2020 – September 9, 2020).

DRAWING COMPARISONS

Survey responses were scored on a 1-6 Likert scale: 1 – Strongly Disagree, 2 – Disagree, 3 – Somewhat Disagree, 4 – Somewhat Agree, 5 – Agree, 6 – Strongly Agree. Inverse scoring was used for negatively worded questions or statements. For example, in the question "I feel acknowledged and accepted at work," 1 point is assigned for every "Strongly Disagree" response, and 6 points for every "Strongly Agree." For the question, "My workplace stress affects my mental health," 6 points is assigned to every "Strongly Disagree" and 1 point to every "Strongly Agree." Lower scores indicate an unhealthy workplace. High scores indicate a healthier workplace. The final score for each respondent represented the sum of all ratings, while the average was determined by a collective sum divided by all respondents.

Correlation coefficients were computed for each question against the overall workplace health score. Question 14 (My employer provides a safe and welcoming environment for employees who live with mental illnesses) and Question 15 (I feel acknowledged and accepted at work) had the strongest correlation to the overall score, (r=0.693 and r=0.706, respectively). Question 10 (I am paid enough to save 3 months' worth of expenses for an emergency) had the weakest correlation to the overall score (r=.413).

The respondents to MHA's 2020 Work Health Survey were likely to have found the survey when searching for mental health support through mhascreening.org. The sample weighs heavily among users who are experiencing other mental health concerns or are experiencing problems with work that might exacerbate mental health concerns. Rather than reflecting the general population, MHA's survey respondents represent employees who are most at risk of burnout and poor employee well-being. The convenience sample allows MHA to evaluate the challenges and opportunities that will impact those with the highest needs.



WORK HEALTH SURVEY QUESTIONS

The Work Health Survey included the following guestions and statements:

Individuals were asked to rate each question/statement below using the following scale: Strongly Disagree, Disagree, Somewhat Disagree, Somewhat Agree, Agree, Strongly Agree:

- 1. My supervisor provides emotional support to help me manage my stress.
- 2. My supervisor regularly checks in on me.
- 3. I can talk to my supervisor to change stressful things about my work (e.g. workload, time off, changing tasks/responsibilities).
- 4. I know what resources I can use if I feel like I need emotional support (e.g. accessing insurance benefits, mental health benefits, employee assistance programs, or onsite supports).
- 5. I feel emotionally drained from my work.
- 6. I have accomplished many worthwhile things in my job.
- 7. I really don't care what happens to my colleagues or clients at my job.
- 8. I feel more callous toward people since I took this job.
- 9. I worry about not having enough money to pay for my living expenses.
- 10. I am paid enough to save 3 months' worth of expenses for an emergency.
- 11. I am unable to afford my or my family's health care costs.
- 12. My workplace stress affects my mental health (i.e. depression or anxiety).
- 13. I feel distracted or find it difficult to concentrate because of my work environment.
- 14. My employer provides a safe and welcoming environment for employees who live with mental illnesses.
- 15. I feel acknowledged and accepted at work.
- 16. I spend time looking for a new position while at work or outside of work.

The survey also collected work environment information, including employment status (full-time, part-time, or independent contractor), industry type, size of the organization, benefits currently offered by the respondents' company, and benefits they believe would help workplace stress and mental health. It also collected respondents' age and gender. Answering these questions was voluntary.

- 1. How many people work for your organization?
 - a. 1-10
 - b. 11-50
 - c. 51-250
 - d. 251-1,000
 - e. 1,001-5,000
 - f. 5001+
- 2. What is your current employment status?
 - a. Full-time
 - b. Part-time
 - c. Independent contractor/consultant
- 3. Which of the following best describes your position?
 - a. Someone supervises me; I supervise no one.
 - b. Someone supervises me; I supervise one or more people.
 - c. I supervise one or more people; no one supervises me.
- 4. What industry do you work in?
 - a. Academic (professor, TA, researcher)
 - b. Automotive
 - c. Construction
 - d. Education (primary, secondary, childcare)
 - e. Energy
 - f. Financial services
 - g. Food and beverage
 - h. Health care
 - i. Legal services
 - j. Manufacturing

- k. Marketing and sales
- I. Media and telecommunications
- m. Non-profit
- n. Public sector (government)
- o. Research and development
- p. Social services
- q. Other
- 5. What is your estimated individual income?
 - a. Less than \$20,000
 - b. \$20,000-\$39,999
 - c. \$40,000-\$59,999
 - d. \$60,000-\$79,999
 - e. \$80,000-\$99,999
 - f. \$100,000-\$149,999
 - g. \$150,000+
- 6. My employer provides/offers the following benefits (Check all that apply):
 - a. Other financial perks (401k, short or long-term disability)
 - b. Flexible work arrangements (teleworking, remote work)
 - c. Extra time off (vacation, sick, paid time off [PTO])
 - d. Onsite perks (ability to bring a pet to work, massage therapy, or mental health services at work site)
 - e. Insurance benefits that cover mental health
 - f. Wellness space (gym or space to meditate at office)
 - g. Light amenities (food/snacks)
 - h. Flexibility in time off during the workday (breaks, time to go to the gym, relax, take a nap or long lunch)
 - i. Open door and relaxed worked environment
 - j. Opportunities for professional growth
 - k. Competitive wages/salary



HEALTHY WORKPLACES VS UNHEALTHY WORKPLACES

The 2020 Work Health Survey measured health scores across industry and company size. The following chart represents the healthiest and unhealthiest industries across five separate measures: overall health, financial health, burnout, supervisor support, and mental health outcomes.

In 2020, energy, non-profit, social services, and education ranked as the healthiest industries. Consistent with MHA's 2018 findings, food and beverage, retail, manufacturing, and automotive ranked as the unhealthiest industries across all five measures. These industries were also likely to be impacted by the pandemic, especially employers with less than 50 employees.

Measure	Industries with Healthiest Score	Industries with Unhealthiest Score
Overall Health Score	Energy Social Services Non-profit	Automotive Food and Beverage Retail
Financial Health Score	Research and Development Energy Legal Services	Automotive Food and Beverage Retail
Burnout Score	Education Non-profit Social Services	Manufacturing Food and Beverage Retail
Supervisor Support Score	Social Services Non-profit Energy	Automotive Food and Beverage Retail
Mental Health Outcomes	Energy Education Social services	Manufacturing Food and Beverage Retail

The company size impacted how employees perceived their workplace. Companies with 1,000 to 5,000 employees had the healthiest mental health score, and companies with 251 to 1,000 employees had the healthiest supervisor support score. Companies with 50 employees or less had the unhealthiest average supervisor support and mental health scores.

Workplace benefits are key factors that influence working conditions and are predictors of workplace stress levels. Since COVID-19, companies have enhanced benefits to meet employees' evolving needs. The three benefits associated with the healthiest outcomes were:

- Open door policies or relaxed work environment
- Onsite perks (ability to bring a pet to work, mental health services, or massage therapy)
- Opportunities for professional growth

Open door policies, relaxed work environment, and professional growth opportunities continues to be the top workplace benefits, consistent with past *Mind the Workplace* reports. However, onsite perks ranked higher, pushing flexible work arrangements further down the list of perks offered. Since COVID-19, remote work has become a necessity as opposed to a benefit. While many employees enjoy remote work as part of their routine pre- and post-pandemic, other employees prefer to work at a physical workspace. In addition, onsite perks such as onsite childcare or mental health services were no longer available to employees who shifted to remote work environments.

FINANCIAL INSECURITY

Due to COVID-19, workplaces rapidly adapted or closed completely. Employees faced concerns over their livelihoods and financial security. Immediate challenges included increased risk of infection working as an essential employee; taking care of child(ren), elderly parents, or other dependents; shifting to a remote working environment; being temporarily furloughed; or grappling with sudden loss of employment.

According to MHA's Online Screening Program, 1 in 4 people who screened moderate to severe for anxiety (25 percent) and depression (25 percent) in August 2020 cited financial problems as one the primary factors contributing to their mental health problems "right now." MHA's research explores the relationship between financial insecurity and its impact on employee mental health in the age of COVID-19.

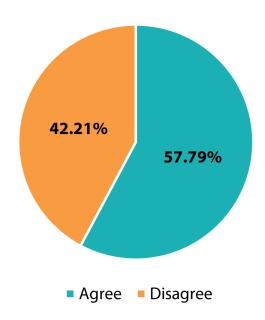
Survey respondents were asked if they were experiencing financial insecurity through the following measures:

- I worry about not having enough money to pay for my living expenses.
- I am paid enough to save 3 months' worth of expenses for an emergency.
- I am unable to afford my or my family's health care costs.

COST OF LIVING

Fifty-eight percent of respondents reported that they worry about not having enough money to pay for their living expenses, with over 1 in 5 (22 percent) employees strongly agreeing with this statement.

TO PAY FOR MY LIVING EXPENSES

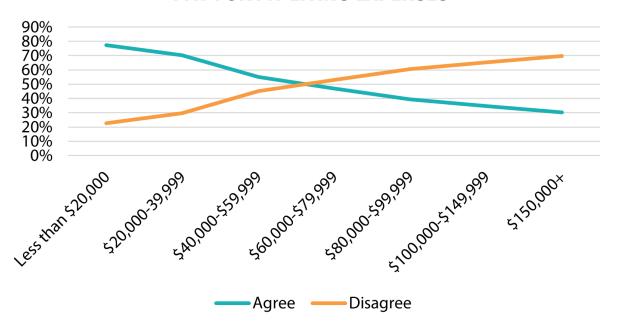


Even fears about potential financial strain have an impact on employee well-being. A recent UK study found perceived future risks: for example, an employed person who fears unemployment or expects worsening financial situation can be more vulnerable to mental health problems than someone who is currently unemployed. In addition, the negative effect of insecurity is experienced equally throughout income distribution.⁴

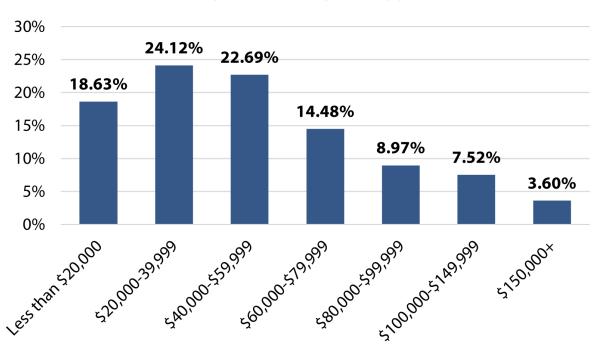
MHA's Work Health Survey findings showed that whether an employee perceived that they had enough money to pay for their living expenses impacted their overall health score. Employees who reported lower income levels had lower health scores overall.

The threshold in which people felt that they earned enough to pay for their living expenses was an individual income between \$60,000 and \$79,999 per year. Sixty-five percent of Work Health Survey respondents reported earning an annual individual income level of less than \$60,000.

I WORRY ABOUT NOT HAVING ENOUGH MONEY TO PAY FOR MY LIVING EXPENSES



ANNUAL INDIVIDUAL INCOME

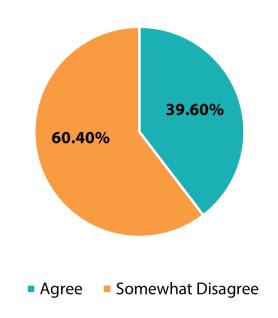


EMERGENCY SAVINGS

The COVID-19 pandemic was declared a national emergency in the U.S. on March 13, 2020.5 Since then, 14 percent of Americans — almost 46 million people — said they have wiped out their emergency savings, according to a recent CNBC survey. By Mid-May, over 36 million unemployment claims were filed. MHA's Work Health Survey findings reinforce that employed and unemployed individuals were not prepared for the economic fallout of this public health crisis.

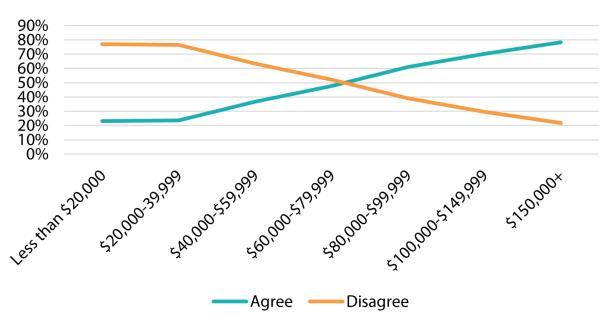
Over 60 percent of respondents reported that they are not paid enough to save for an emergency, with nearly 29 percent strongly agreeing with this statement.

I AM PAID ENOUGH TO SAVE 3 MONTHS' WORTH OF EXPENSES FOR AN EMERGENCY



The threshold in which people felt comfortable to save for an emergency was an annual individual income of at least \$80,000 per year. Nearly 80 percent of Work Health Survey respondents reported earning an annual individual income level of less than \$80,000.

I AM PAID ENOUGH TO SAVE 3 MONTHS' WORTH OF EXPENSES FOR AN EMERGENCY



WAGE STAGNATION AND INCOME INEQUALITY DRIVES FINANCIAL INSECURITY

The pandemic has amplified preexisting issues for employees, including wage stagnation, inadequate access to affordable health care, degradation of employee mental health, and employees in industries vulnerable to physical and psychological harm.

Federal and state minimum wage legislation and poverty guidelines have historically failed to meet employees' realistic financial needs. Economic insecurity is a well-documented socioeconomic determinant of health,⁸ and the pandemic's effects on employee well-being only reinforce the need to alleviate position and financial insecurity for employees through policy change.

According to the Department of Labor, the federal minimum wage is \$7.25 per hour and has remained unchanged since 2009.9 This amount differs across states, with most states' minimum wage either at or below the federal rate. A study conducted by the Massachusetts Institute of Technology found that the average living wage in the U.S. is \$16.54 per hour in 2019, before taxes, for a family of four with two working adults and two children.10 Only eight states currently have a \$15 per hour minimum wage.

In addition, the U.S. 2020 Federal Poverty Guidelines from the Office of the Assistant Secretary for Planning and Evaluation dictates that the poverty guideline for an individual is \$12,760 and a family of four is \$26,200.¹¹

Our findings show that employees do not feel financially secure until they earn at least \$60,000 to \$80,000 per year. Nearly 80 percent of Work Health Survey respondents reported earning an annual individual income level of less than \$80,000.

In 2020, Congress passed a series COVID-19 relief packages to alleviate the economic fallout of the pandemic. Unfortunately, the stimulus payments to individuals served as a temporary and inadequate solution for systemic wage and income equality. MHA believes that both federal and state governments must work collaboratively to enforce meaningful change in minimum wage and income equality policy to ensure all people feel financially secure, especially in the event of a traumatic event or emergency such as a global pandemic.

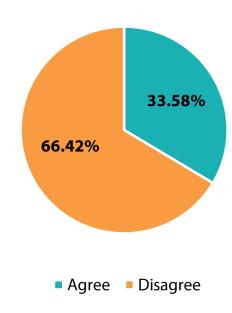
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EMPLOYER-SPONSORED HEALTH CARE

Access to affordable health care is essential during a global public health crisis, and employers play a considerable role in providing that benefit to employees. About 158 million people in the U.S. receive employer-sponsored health insurance, which represents almost 50 percent of the total U.S. population, according to the Kaiser Family Foundation.¹²

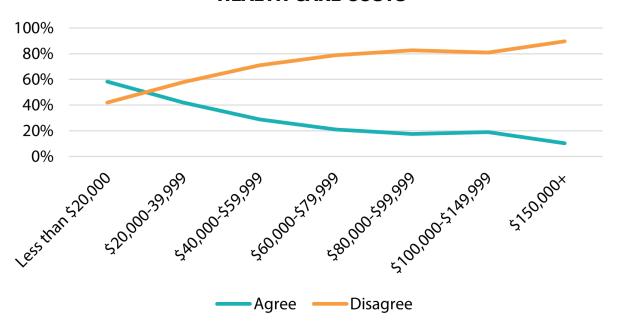
In MHA's 2020 Work Health Survey, nearly 34 percent of respondents report that they are unable to afford their health care costs. Employees often struggle to pay premiums and cannot afford additional co-pays, out-of-pocket expenses, and out-of-network costs necessary to access needed care.

I AM UNABLE TO AFFORD MY OR MY FAMILY'S HEALTH CARE COSTS



Employees who reported earning less than \$20,000 per year, which represented 20 percent of respondents, were also more likely to report being unable to afford their own or their family's health care costs

I AM UNABLE TO AFFORD MY OR MY FAMILY'S HEALTH CARE COSTS



The threshold of \$20,000 indicates that federal policies like the Affordable Care Act (ACA) are helping employees with high health care costs, but there is room for improvement, especially for employees who earn less than \$20,000 a year and may qualify for Medicaid.

In MHA's *State of Mental Health in America 2020 Report*, 39 states saw a reduction in adults with mental illness who are uninsured. The largest reductions were seen in Louisiana (5.3 percent), New York (4.7 percent), lowa (4.6 percent) and Arkansas (4.2 percent).

Each of the bottom 17 states, except for Louisiana, were states that had not expanded Medicaid at the time data were collected. Louisiana, however, has had the largest reductions in the rate of uninsured adults with mental illness since the state expanded Medicaid in 2016, from 20 percent of adults with mental illness to 14.7 percent.

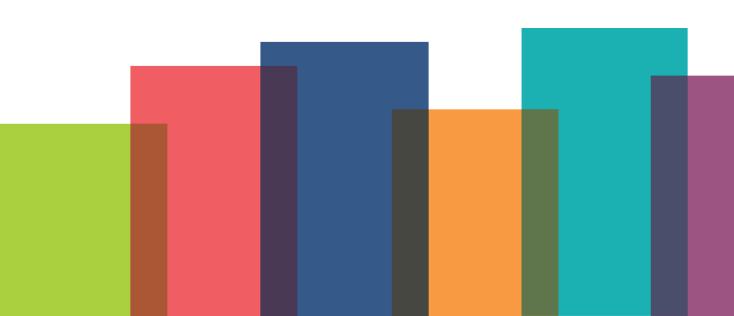
CHALLENGES WITH EMPLOYER-SPONSORED HEALTH CARE

All workplaces across size and industry are susceptible to COVID-19 infection, but not all workforce populations (including, but certainly not limited to, essential workers, healthcare professionals, teachers, government employees, etc.) face the same level of exposure to infection and level of access to affordable health care. Our survey findings reflect these disparities in health care access, with nearly 34 percent of respondents reporting that they were unable to afford their health care costs.

MHA supports the implementation of a universal federal health care option to reduce the barrier of cost. With ongoing gaps in access to effective mental health services and supports, the federal government's continuing engagement is indispensable, in partnership with the states, to keep up the effort to ensure that the safety net adequately protects all citizens.

Currently, Medicaid is the only source of funding for some behavioral health services. However, under the current Medicaid system, each state controls who is covered by Medicaid and which services are covered. This not only creates health disparities, as people may not have the same access to covered treatments based on which state they live in but may also cause someone to lose eligibility or coverage of certain treatments if they move from one state to another, disrupting continuous care. Having a universal federal health care option would reduce discontinuation of treatment and could create a system that is easier to navigate.

For more information, please see MHA's Position Statement 14: The Federal Government's Responsibilities for Mental Health Services and the State of Mental Health in America 2020 Report.



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EMPLOYEE BURNOUT

Studies on the mental health effects of COVID-19 in the workplace have primarily targeted health care professionals, including a recent study in which doctors and nurses experienced high levels of burnout due to the pandemic. However, employees do not need to work in high-stress environments to experience burnout. Our findings reinforce that burnout is a threat to employee mental health across company size, industry, and organizational rank.

According to the World Health Organization, burnout is defined as a syndrome resulting from chronic workplace stress that has not been successfully managed, characterized by three dimensions: feelings of energy depletion or exhaustion; reduced professional efficacy; and increased mental distance from one's job, or feelings of negativism or cynicism related to one's job.¹⁴

Common factors that contribute to burnout include overwhelming workload, long working hours, chronic staff shortages, an aggressive administrative environment, and a lack of support from management.¹⁵ Burnout has frequently accompanied lower productivity and quality of work, job dissatisfaction, low organizational commitment, absenteeism, intention to leave the job, and turnover.¹⁶

We asked employees who completed the survey if they were experiencing common signs of burnout through the following measures adapted from the Maslach Burnout Inventory:¹⁷

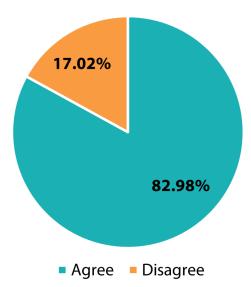
- I feel emotionally drained from my work.
- I have accomplished many worthwhile things in my job.
- I really don't care what happens to my colleagues or clients at my job.
- I feel more callous toward people since I took this job.

EXHAUSTION

Exhaustion, including emotional exhaustion, is one of the earliest signs of burnout. Employees who are feeling emotionally drained from work are at higher risk of workplace stress, leading to burnout and other mental health concerns. One study found that 90 percent of the respondents with severe burnout reported a physical or mental disease, with musculoskeletal pain and depression as the most common problems.¹⁸

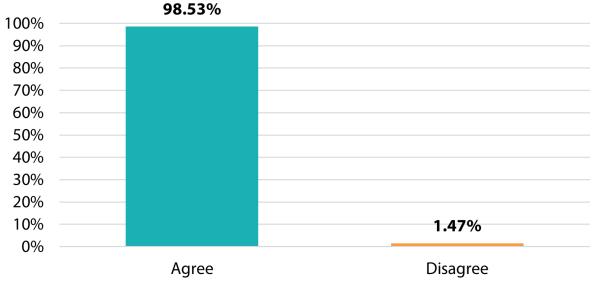
Nearly 83 percent of respondents felt emotionally drained from their work, with over 40 percent stating they strongly agreed with this statement.

I FEEL EMOTIONALLY DRAINED FROM MY WORK



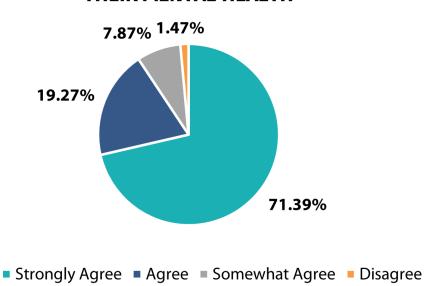
Of employees who strongly agreed that they feel emotionally drained by their work, 99 percent agreed (somewhat agreed to strongly agreed), and 71 percent strongly agreed that their workplace affects their mental health. Feeling emotionally drained from work was strongly correlated with workplace stress affecting mental health (r=0.612).

EMPLOYEES WHO STRONGLY AGREED THAT THEY FELT EMOTIONALLY DRAINED FROM THEIR WORK



My workplace stress affects my mental health

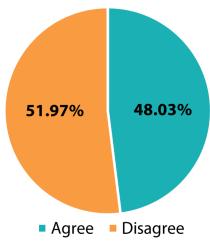
OF EMPLOYEES WHO STRONGLY AGREED THAT THEY FELT EMOTIONALLY DRAINED FROM THEIR WORK, 71% STRONGLY AGREED THAT THEIR WORKPLACE AFFECTS THEIR MENTAL HEALTH



CYNICISM

Forty-eight percent of employees agreed that felt more callous toward people since they took their job. Since the start of the pandemic, a shift in routine and working environments may have led to employees experiencing higher levels of miscommunication, frustration, lack of connection, and isolation from colleagues and clients.



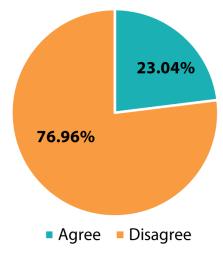


In addition, feeling callous towards people was moderately correlated with feeling acknowledged and accepted at work (r=0.357). In other words, employees who feel acknowledged and accepted at work are less likely to experience cynicism, a more severe sign of burnout.

Conversely, feeling more callous toward people was moderately correlated with workplace stress affecting mental health (r=0.438). This finding suggests that people who do experience severe burnout are more likely to have their workplace stress affect their mental health.

Twenty-three percent of employees report that they don't care what happens to their colleagues or clients. People caring about their colleagues or clients was moderately correlated with feeling acknowledged and accepted at work (r=0.309).

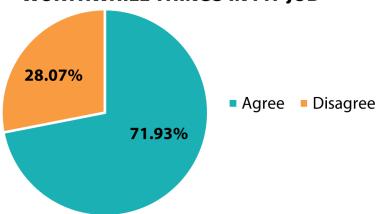
I REALLY DON'T CARE WHAT HAPPENS TO MY COLLEAGUES OR CLIENTS AT MY JOB



PROFESSIONAL EFFICACY

Over 71 percent of employees report that they have accomplished many worthwhile things in their job, which suggests that a majority of employees are not experiencing the late stages of burnout. However, one in four employees are experiencing reduced professional efficacy, a high-risk factor that contributes to job dissatisfaction and turnover.

I HAVE ACCOMPLISHED MANY WORTHWHILE THINGS IN MY JOB



BURNOUT PREVENTION AND EARLY INTERVENTION

Unfortunately, burnout could lead to more severe mental health concerns like depression and anxiety if left untreated. Both managers and employees have a responsibility to monitor and address burnout before it becomes critical. An employer can help prevent or mitigate the impact of burnout on their employees through the following recommendations:

Address the early signs of burnout. For employees experiencing exhaustion, managers should assist employees with managing or adjusting their workload. In addition, interventions could include supervisors encouraging employees to take a personal day or plan a vacation to recharge. Employees often express concern about not being able to take needed time off when handling an unmanageable workload.

Consider the source for late stages of burnout. For employees experiencing cynicism or reduced professional efficacy, interventions could include a change in supervisors, teams, or projects, or seeking out other positions or responsibilities within the company.

Model and practice healthy behaviors. Educate employees about burnout prevention by leading by example. If leadership and management make healthy behaviors a priority, employees will see that these behaviors are not only acceptable but encouraged.

Share stress management information during orientation. New employee orientation and onboarding are opportunities to share the importance of managing stress and balancing work-life demands. Educate new employees about company policies and resources that support employee mental health.

Keep employees informed of policies and programs. Education about stress management and burnout prevention should be an ongoing part of staff communication. Send written or verbal reminders to staff about the resources that support mental health, and encourage employees to use available benefits, such as Employee Assistance Program (EAP) services or PTO.

For more information about workplace stress and burnout, please visit MHA's website at www. mhanational.org/workplace or review the following articles:

- How can I achieve better work-life balance?
- How can I manage stress at work?
- I feel "stuck" at work.

SUPERVISOR SUPPORT

For better or worse, the pandemic has led to transformational change in small and large workplaces alike. A change of work environment likely also means a change in workplace culture, supervisor communication styles, and coworker relationship-building. Supervisor support has been a consistent factor that impacts employee mental health and well-being across MHA's four iterations of the Mind the Workplace report and over 50,000 employee responses. In addition, how valued an employee feels remains a higher priority than having a higher salary, after a living wage.

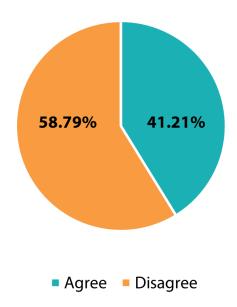
Survey respondents were asked about their experiences with supervisor support through the following measures:

- My supervisor provides emotional support to help me manage my stress.
- My supervisor regularly checks in on me.
- I can talk to my supervisor to change stressful things about my work.
- I know what resources I can use if I feel like I need emotional support.
- I feel acknowledged and accepted at work.

EMOTIONALLY SUPPORTIVE SUPERVISORS

Fifty-nine percent of respondents disagreed that their supervisor provides emotional support to help them manage their stress, and one in four employees strongly disagreed with this statement.

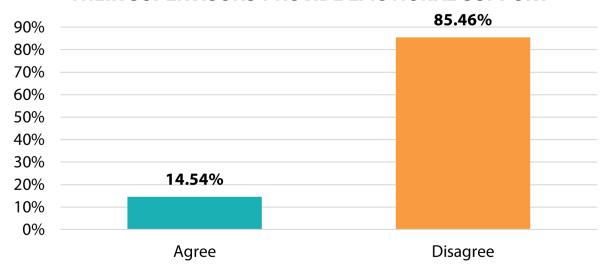
MY SUPERVISOR PROVIDES EMOTIONAL SUPPORT TO HELP ME MANAGE MY STRESS



Supervisors providing emotional support was strongly correlated with the employer providing a safe and welcoming environment for employees who live with mental illnesses (r=0.574).

Of employees who strongly disagreed that their supervisors provide emotional support, over 85 percent disagreed (somewhat disagreed to strongly disagreed) that their employers provide a safe and welcoming environment for employees who live with mental illnesses.

EMPLOYEES WHO STRONGLY DISAGREED THAT THEIR SUPERVISORS PROVIDE EMOTIONAL SUPPORT



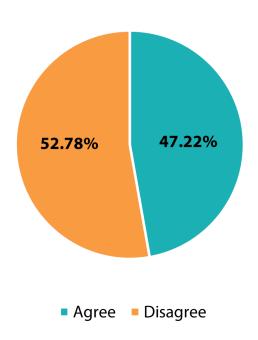
My employer provides a safe and welcoming environment for employees who live with mental illnesses

SUPERVISOR GUIDANCE AND STRESS MANAGEMENT

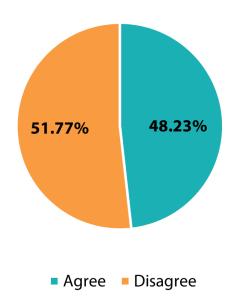
A supervisor regularly checking-in with employees was moderately correlated with the employer providing a safe welcoming environment for employees who live with mental illnesses (r=0.470).

However, our findings show that only one in two employees have supervisors who regularly check in on them (47 percent) and feel they can talk to their supervisors to change stressful things about their work (48 percent).

MY SUPERVISOR REGULARLY CHECKS IN ON ME



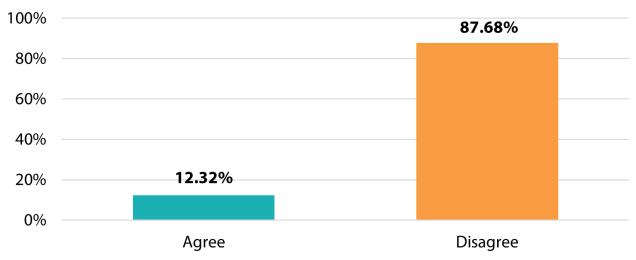
I CAN TALK TO MY SUPERVISOR TO CHANGE STRESSFUL THINGS ABOUT MY WORK



Talking to a supervisor to change stressful things about work was most strongly correlated with the healthiest overall workplace health scores (r=0.692). In addition, it was strongly correlated with the employer providing a safe welcoming environment for employees who live with mental illnesses (r=0.573).

Of employees who strongly disagreed that they could talk to their supervisor to change stressful things about their work, over 87 percent disagreed (somewhat disagreed to strongly disagreed) that their employers provide a safe and welcoming environment for employees who live with mental illnesses.

EMPLOYEES WHO STRONGLY DISAGREED THAT THEY CAN TALK TO THEIR SUPERVISOR TO CHANGE STRESSFUL THINGS ABOUT THEIR WORK



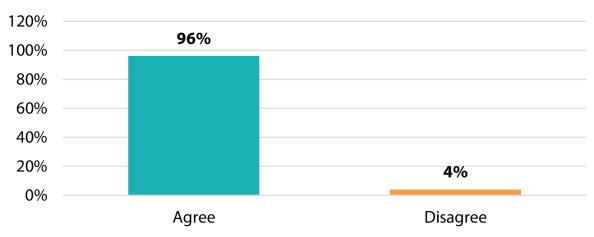
My employer provides a safe and welcoming environment for employees who live with mental illnesses

ACKNOWLEDGEMENT AND ACCEPTANCE

Feeling acknowledged and accepted at work was most strongly correlated with the healthiest overall workplace health scores (r=0.706). In addition, feeling acknowledged and accepted at work was strongly correlated with the employer providing a safe welcoming environment for employees who live with mental illnesses (r=0.596). Over 57 percent of employees agreed that they felt acknowledged and accepted at work.

Of employees who strongly agreed that their employer provides a safe and welcoming environment for employees who live with mental illnesses, 96 percent agreed (somewhat agreed to strongly agreed) that they feel acknowledged and accepted at work, with over 61 percent strongly agreeing with this statement.

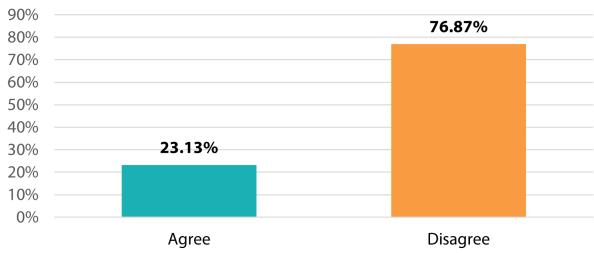
EMPLOYEES WHO STRONGLY AGREED THAT THEIR EMPLOYER PROVIDES A SAFE AND WELCOMING ENVIRONMENT FOR EMPLOYEES WHO LIVE WITH MENTAL ILLNESSES



I feel acknowledged and accepted at work

Of employees who strongly agreed that they felt acknowledged and accepted at work, nearly 77 percent disagreed (somewhat disagreed to strongly disagreed), and over 50 percent strongly disagreed that they spend time looking for a new position.

EMPLOYEES WHO STRONGLY AGREED THAT THEY FELT ACKNOWLEDGED AND ACCEPTED AT WORK

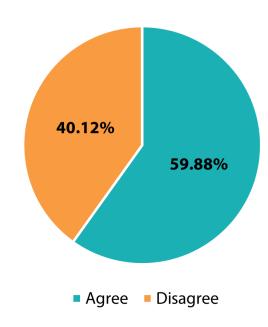


I spend time looking for a new position while at work or outside of work

FINDING MENTAL HEALTH SUPPORT AT WORK

Nearly 60 percent of respondents reported knowing what resources they could use if they needed emotional support, such as accessing insurance benefits or an EAP.

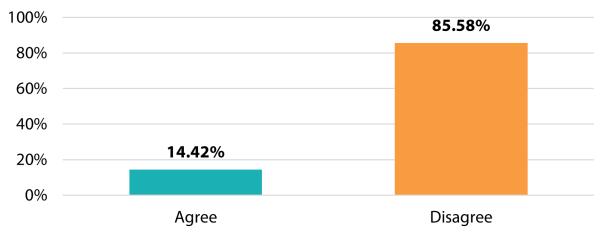
I KNOW WHAT RESOURCES I CAN USE IF I FEEL LIKE I NEED EMOTIONAL SUPPORT



An employee knowing what resources they can use if they need emotional support was moderately correlated with the employer providing a safe welcoming environment for employees who live with mental illnesses (r=0.448).

Of employees who strongly disagreed that they know what resources they could use if they needed emotional support, over 85 percent disagreed (somewhat disagreed to strongly disagreed) that their employers provide a safe and welcoming environment for employees who live with mental illnesses, with over 48 percent who strongly disagreed with this statement.

EMPLOYEES WHO STRONGLY DISAGREED THAT THEY KNOW WHAT RESOURCES THEY COULD USE IF THEY NEEDED EMOTIONAL SUPPORT



My employer provides a safe and welcoming environment for employees who live with mental illnesses

HEALTHY MANAGEMENT PRACTICES DURING COVID-19

A workplace culture that promotes supervisor support and guidance helps employees better manage their stress and feel more motivated to perform their jobs well. Here are four items to consider when improving employee well-being as a supervisor:

Be supportive. Regular check-ins with employees can help supervisors better understand their needs and provide the appropriate support. In addition, regular supervisor check-ins should emphasize bi-directional feedback, acknowledge employees' efforts, and provide emotional support. If an employee expresses a mental health concern, here's how the supervisor can start the conversation:

- Ask appropriate open-ended questions.
- Actively listen with complete attention to the employee.
- Recognize their feelings and express understanding back to them.
- Encourage them to use the company's mental health resources.

Be flexible. Supervisors should negotiate realistic expectations and strategize how to best meet these expectations under the given circumstances in collaboration with employees. In terms of employee output, focus on goals accomplished rather than hours logged. Being empathetic, patient, and flexible as a supervisor can mean a lot for employees who are struggling with their mental health.

Stay connected. According to MHA's 2018 Mind the Workplace Report, having positive relationships with coworkers and supervisors is the top reason employees feel satisfied at work. However, 65 percent of respondents reported feeling isolated in their workplace due to an unhelpful and hostile environment. Working alone because a workplace is hostile or unhelpful is the factor most strongly correlated with overall workplace health. Connection is crucial, and supervisors can help facilitate how employees stay connected in a virtual work environment. Examples include video calls to encourage employees to share stressors and coping strategies or a weekly newsletter that shares employees' favorite indoor activities, recipes, and exercise routines.

Model and practice self-care. When providing support to others, a little self-care can alleviate stress and help a supervisor tackle challenges with a clear mind. Examples for self-care include staying organized and prioritize; taking frequent breaks; practicing meditation, breathing, or expressing gratitude; or video chatting with a loved one.

For more information on mentally healthy management practices, please visit MHA's website at www.mhanational.org/workplace or review the following articles:

- What are some mentally healthy management practices?
- Why is employee recognition important?

WORKPLACE STRESS AND MENTAL ILLNESS

Work environments have drastically changed over the last year, including the addition of personal protective equipment (PPE) and physical distancing guidelines in workplace settings or shifts to remote work environments. Employees may also have lost childcare services; are homeschooling their children; or are sharing a workspace with spouses, partners, or parents. Remote work environments may be ill-equipped for an employee to carry out their job's responsibilities, like a lack of the appropriate technology, home office equipment, or access to reliable internet.

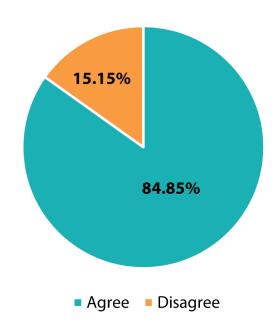
Survey respondents were asked about their workplace stress and mental health through the following measures:

- My workplace stress affects my mental health (i.e., depression or anxiety).
- I feel distracted or find it difficult to concentrate because of my work environment.
- My employer provides a safe and welcoming environment for employees who live with mental illnesses.
- I spend time looking for a new position while at work or outside of work.

EMPLOYEE MENTAL HEALTH AND COVID-19

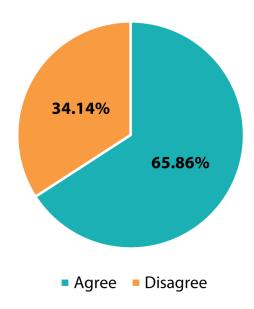
Nearly 85 percent of respondents agreed (somewhat to strongly agreed) that their workplace stress affects their mental health.

MY WORKPLACE STRESS AFFECTS MY MENTAL HEALTH

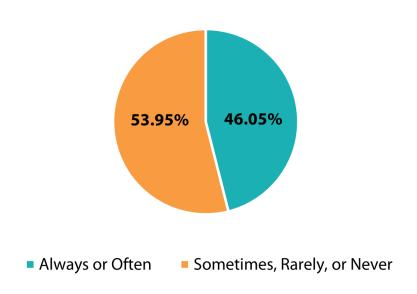


In the 2020 Work Health Survey, over 65 percent of respondents found it difficult to concentrate because of their work environment. In *MHA's Mind the Workplace 2018 Report,* findings showed that 46 percent of 17,140 survey respondents always or often were distracted or found is difficult to concentrate because of their work environment by comparison. This finding demonstrates a 16 percent increase in employees who found it difficult to concentrate because of their work environment.

I FEEL DISTRACTED OR FIND IT DIFFICULT TO CONCENTRATE BECAUSE OF MY WORK ENVIRONMENT

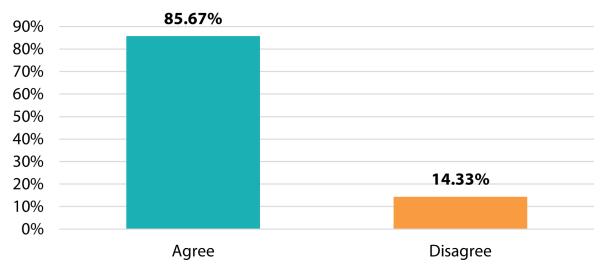


HOW OFTEN ARE YOU DISTRACTED OR FIND IT DIFFICULT TO CONCENTRATE BECAUSE OF YOUR WORK ENVIRONMENT?



Feeling emotionally drained from work is moderately correlated with feeling distracted because of the work environment (r=0.465). Of employees who strongly agreed that they feel emotionally drained by their work, over 85 percent agreed (somewhat agreed to strongly agreed) that they felt distracted because of their work environment.

EMPLOYEES WHO STRONGLY AGREED THAT THEY FELT EMOTIONALLY DRAINED FROM THEIR WORK



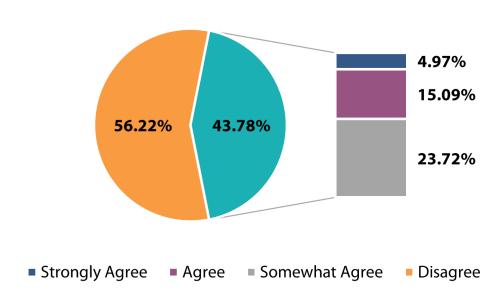
I feel distracted or find it difficult to concentrate because of my work environment

MENTAL ILLNESS-INCLUSIVE WORK ENVIRONMENTS

An employer providing a safe and welcoming environment for employees who live with mental illnesses was most strongly correlated with the healthiest overall workplace health scores (r=0.693).

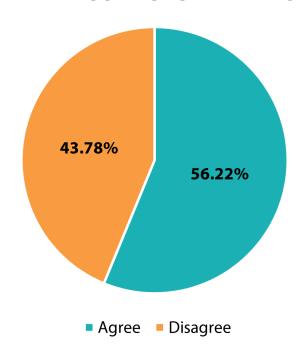
Over 56 percent of respondents disagreed that their employers provide safe and welcoming environment for employees who live with mental illnesses. Less than five percent of respondents strongly agreed with this statement.

MY EMPLOYER PROVIDES A SAFE AND WELCOMING ENVIRONMENT FOR EMPLOYEES WHO LIVE WITH MENTAL ILLNESSES

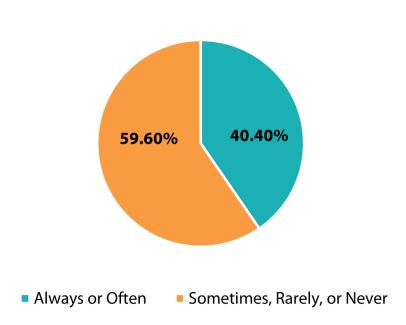


In the 2020 Work Health Survey, over 56 percent of respondents reported that they spend time looking for a new position. This was a 16 percent increase from MHA's *Mind the Workplace 2018 Report*, in which 40 percent of respondents reported always or often thinking about or actively looking for a new position.

I SPEND TIME LOOKING FOR A NEW POSITION



I SPEND TIME THINKING ABOUT OR ACTIVELY LOOKING FOR ANOTHER JOB (2018)



SAFE AND WELCOMING WORK ENVIRONMENTS

Employers that acted with transparency, empathy, and flexibility likely experienced a smoother transition during COVID-19 than companies that did not consider workplace culture, especially in high-stress or remote work environments.

To provide a safe and welcoming environment for employees who live with mental illnesses, employers should consider:

- Hiring and training supervisors to feel comfortable providing emotional support
- Encouraging employees to talk to their supervisors about changing job stressors
- Encouraging supervisors to check-in with employees regularly
- Providing proper recognition to employees for their efforts
- Providing additional resources for emotional support

For more information on how to provide a safe and welcoming environment for employees who live with mental illness, please visit MHA's website at www.mhanational.org/workplace or review the following articles:

- How can we support an employee with a mental health concern?
- What is emotional intelligence and how does it apply to the workplace?
- What additional resource supports can we offer?

If interested in a comprehensive assessment of your workplace health, MHA has developed the *Bell Seal for Workplace Mental Health*, a national certification program to recognize and guide employers who are creating mentally healthy workplaces. Learn more at www.mhanational. org/bestemployers.



APPENDIX A: WORK HEALTH SURVEY RESULTS

The Work Health Survey comprised 16 questions measuring workplace health using the following domains as a framework: workplace stress, burnout, and financial security. The survey was made accessible on MHA's website as part of our Online Screening Program. Survey questions were required, and additional demographic questions were voluntary.

Over 5,000 surveys were completed, the results of which are analyzed in this Appendix. The purpose of the Work Health Survey was threefold:

- 1. Collecting data on the attitudes and perceptions held by employees towards their workplace
- 2. Measuring the state of workplace health across industries and drawing comparisons
- 3. Identifying key factors affecting workplace health and employee mental health and well-being

SURVEY RESULTS: DEMOGRAPHICS

How many people work for your organization?	Count	%
1-10	477	10.88%
11-50	845	19.27%
51 – 250	927	21.14%
251 - 1,000	740	16.87%
1,001 - 5,000	582	13.27%
5,001+	815	18.58%
Grand Total	4,386	100.00%

What is your current employment status?	Count	%
Full-time	3,858	87.46%
Part-time Part-time	462	10.47%
Independent contractor/consultant	91	2.06%
Grand Total	4,411	100.00%

Which of the following best describes your position?	Count	%
Someone supervises me; I supervise no one.	2,769	62.90%
Someone supervises me; I supervise one or more people	1,488	33.80%
I supervise one or more people; no one supervises me.	145	3.29%
Grand Total	4,402	100.00%

What industry do you work in?	Count	%
Academic (professor, TA, researcher)	158	4.23%
Automotive	68	1.82%
Construction	108	2.89%
Education (primary, secondary, childcare)	379	10.15%
Energy	69	1.85%

Social services Grand Total	277 3,734	7.42% 100.00%
Retail	92	2.46%
Research and development	82	2.20%
Public sector (government)	274	7.34%
Non-profit	290	7.77%
Media & telecommunications	95	2.54%
Marketing and sales	252	6.75%
Manufacturing	181	4.85%
Legal services	60	1.61%
Healthcare	879	23.54%
Food and beverage	238	6.37%
Financial services	232	6.21%

What is your estimated individual income?	Count	%
Less than \$20,000	808	18.63%
\$20,000-39,999	1,046	24.12%
\$40,000-\$59,999	984	22.69%
\$60,000-\$79,999	628	14.48%
\$80,000-\$99,999	389	8.97%
\$100,000-\$149,999	326	7.52%
\$150,000+	156	3.60%
Grand Total	4,337	100.00%

Benefits:	Count	%
Other financial perks (401k, short or long-term disability)	2,731	17.58%
Extra time off (vacation, sick, PTO)	2,737	17.62%
Light amenities (food/snacks)	1,245	8.02%
Insurance benefits that cover mental health	2,223	14.31%
Flexible work arrangements (teleworking, remote work)	1,537	9.90%
Competitive wages/salary	1,292	8.32%
Wellness space (gym or space to meditate at office)	742	4.78%
Opportunities for professional growth	1,597	10.28%
Onsite perks (ability to bring a pet to work, massage therapy, or mental health services at work site)	392	2.52%
Open door and relaxed worked environment	1,036	6.67%
Grand Total	15,532	100%

SURVEY RESULTS: SURVEY QUESTIONS

QUESTION 1 MY SUPERVISOR PROVIDES EMOTIONAL SUPPORT TO HELP ME MANAGE MY STRESS 1400 1307 1200 1036 1040 1000 688 610 600 610 610



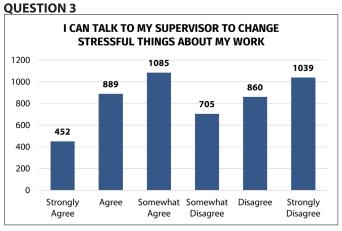
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200

349

Stronaly

Agree



Somewhat Somewhat

Disagree

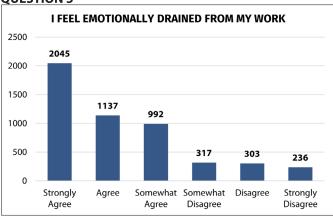
Agree

Disagree

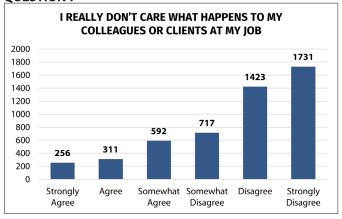
Strongly

Disagree

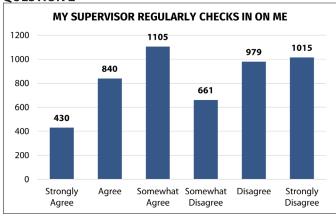




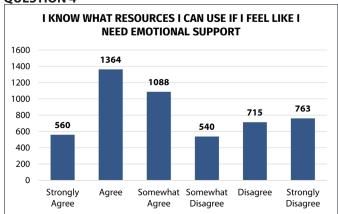
QUESTION 7



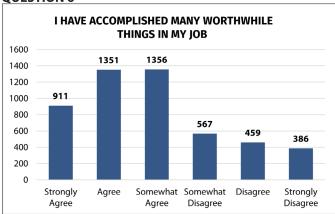
QUESTION 2



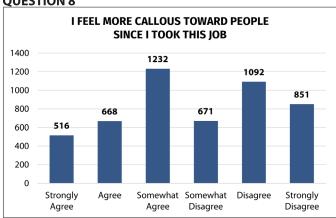
QUESTION 4



QUESTION 6



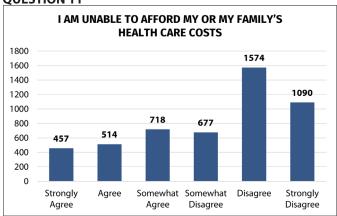
QUESTION 8



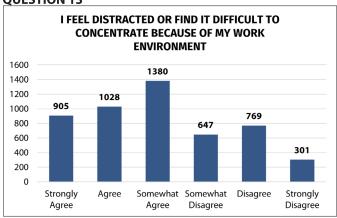
QUESTION 9



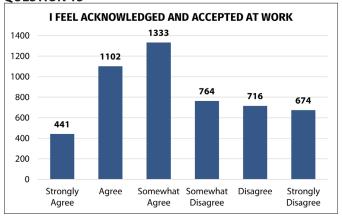
QUESTION 11



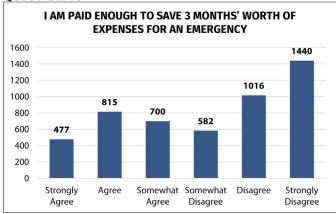
QUESTION 13



QUESTION 15



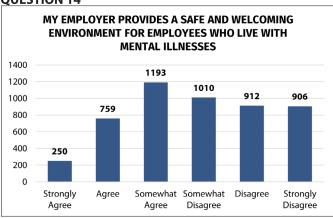
QUESTION 10



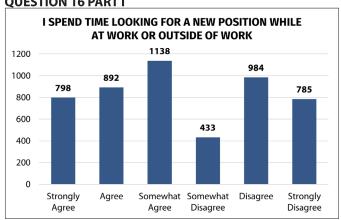
QUESTION 12



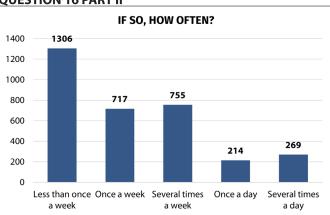
QUESTION 14



QUESTION 16 PART I



QUESTION 16 PART II



ENDNOTES

- 1. "2021 Pulse of Talent: What Today's Employees Want and Need." *Ceridian*, <u>www.ceridian.com/resources/talent-management-strategies-pulse-of-talent-report?utm_source=pr-newswire-Nov20-global-dayforce-pulse-talent&utm_medium=web&CampaignID=.</u>
- 2. "The Employment Situation November 2020." *Bls.gov*, Bureau of Labor Statistics, 4 Dec. 2020, 8:30 A.M. (ET), <u>www.bls.gov/news.release/pdf/empsit.pdf.</u>
- 3. Reinert, Madeline. "COVID-19 and Mental Health: A Growing Crisis." *Mental Health America*, Mental Health America, 20 Oct. 2020, www.mhanational.org/sites/default/files/Spotlight%202021%20-%20COVID 19%20and%20Mental%20Health.pdf.
- 4. Daniel Kopasker, Catia Montagna, Keith A. Bender, Economic insecurity: A socioeconomic determinant of mental health, SSM Population Health, Volume 6, 2018, Pages 184-194, ISSN 2352-8273, https://doi.org/10.1016/j.ssmph.2018.09.006.
- 5. "Proclamation on Declaring a National Emergency Concerning the Novel Coronavirus Disease (COVID-19) Outbreak." *The White House*, The United States Government, https://www.whitehouse.gov/presidential-actions/proclamation-declaring-national-emergency-concerning-novel-coronavirus-disease-covid-19-outbreak/.
- 6. Jdickler. "Nearly 14% of Americans Have Wiped out Their Emergency Savings during the Pandemic: CNBC + Acorns Survey." *CNBC*, CNBC, 1 Sept. 2020, www.cnbc.com/2020/09/01/nearly-14percent-of-americans-have-wiped-out-emergency-savings-during-pandemic.html.
- 7. Cohen, Patricia, and Tiffany Hsu. "Rolling Shock' as Job Losses Mount Even with Reopenings." *The New York Times*, The New York Times, 14 May 2020, www.nytimes.com/2020/05/14/business/economy/coronavirus-unemployment-claims.html.
- 8. J. Benach, A. Vives, M. Amable, C. Vanroelen, G. Tarafa, C. Muntaner, Precarious Employment: Understanding an Emerging Social Determinant of Health, Annual Review of Public Health, 2014 35:1, Pages 229-253.
- 9. "Minimum Wage." U.S. Department of Labor, www.dol.gov/general/topic/wages/minimumwage.
- 10. Nadeau, Carey Ann. "Living Wage Calculator." *Living Wage Calculator*, 3 Mar. 2020, <u>www.livingwage.mit.edu/articles/61-new-living-wage-data-for-now-available-on-the-tool</u>.
- 11. "Poverty Guidelines." ASPE, 5 Mar. 2020, aspe.hhs.gov/poverty-guidelines.
- 12. "Health Insurance Coverage of the Total Population." *KFF*, 23 Oct. 2020, <u>www.kff.org/other/state-indicator/total-population/?dataView=1</u>.
- 13. Sung, Chih-Wei, et al. "Burnout in Medical Staffs During a Coronavirus Disease (COVID-19) Pandemic." SSRN, 9 June 2020, www.papers.ssrn.com/sol3/papers.cfm?abstract_id=3594567.
- 14. "Burn-out an 'Occupational Phenomenon': International Classification of Diseases." World Health Organization, World Health Organization, 28 May 2019, www.who.int/mental_health/evidence/burn-out/en/.
- 15. Maslach, Christina, and Michael P. Leiter. "Understanding the Burnout Experience: Recent Research and Its Implications for Psychiatry." Wiley Online Library, John Wiley & Sons, Ltd, 5 June 2016, wps.20311.
- 16. Schaufeli WB, Enzmann D. The burnout companion to study and practice: a critical analysis. London: Taylor & Francis, 1998.
- 17. Maslach, C., Jackson, S. E., & Leiter, M. P. (1996). *Maslach burnout inventory manual*. Palo Alto, Calif. (577 College Ave., Palo Alto 94306: Consulting Psychologists Press.
- 18. Ahola K. *Occupational burnout and health*. People and Work Research Reports 81. Helsinki: Finnish Institute of Occupational Health, 2007.