A CONNECTED WORKPLACE

Addressing stress, loneliness and depression to improve personal and professional health

Tiffany Pierce, MD, MS | Market Medical Executive, Cigna

Together, all the way.®

Cigna®

950216

SEE STRESS DIFFERENTLY

Helping employees take control of stress.

Together, all the way.®

Cigna®

950216

WE TAKE A WHOLE PERSON APPROACH TO HEALTH CARE.

BODY & MIND
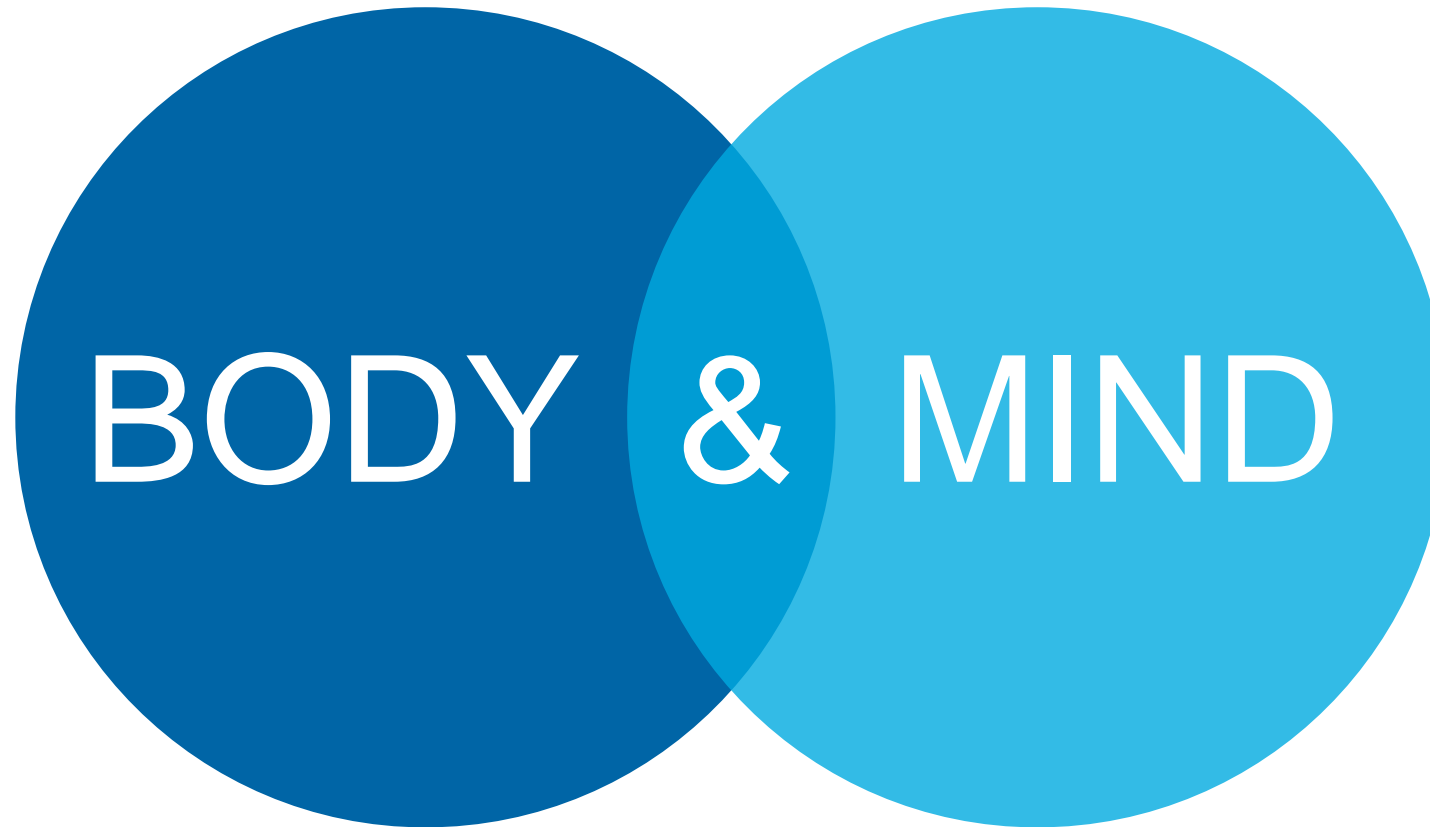
The body and mind are connected. An individual's emotional health can affect their physical **well-being**, and vice versa.

Cigna

NOW LET'S ADD STRESS TO THE EQUATION.

Too much stress can lead to serious chronic conditions* such as:

Heart disease

Diabetes

High blood pressure

Depression

*National Institute of Mental Health. (2016). *5 Things You Should Know About Stress* [Brochure].

Cigna.

WE LIVE IN A WORLD THAT IS STRESSED OUT.

Stress directly impacts the health of employees – and businesses.

84%
of the world's
population is stressed.*

$167B
is how much stress
costs a year.**

Cigna

STRESS CAN LEAD TO:*

Absenteeism

Lack of productivity

Cigna.

A STRESS TEST.

ONCE AGAIN, WITH A PLAN.

- A sensible four-step PLAN includes simple actions that can be incorporated into a person's daily routine.

- Our online quiz helps employees visualize their level of stress.

YOU NEED A PLAN TO CONTROL STRESS.

PERIOD.

Select a period of time every day to take a break from everyday tasks. This will help you see things more objectively, ultimately allowing you to be more productive.

Suggestions:

• Instead of scrolling through emails, why not use your morning commute to envision positive outcomes?

• To make your life less chaotic, try to wake up 10 minutes earlier, and use this time for something you enjoy.

LOCATION.

Head to a location that's conducive to taking a break.

Suggestions:

• Going to a local park for a stroll can help you focus.

• Visit a nearby river or lake and find a relaxing spot to sit for a while.

ACTIVITY.

Choose an activity you enjoy that can help to relieve stress.

Suggestions:

• Reading a good book, or joining a book club, can be a positive distraction.

• Try cooking new, healthy recipes.

• Dancing, running, playing music – dive into these and other activities you think could be fun.

NAME.

Name some people you can talk with who can help keep you from falling into negative thought patterns.

Suggestions:

• Speak with someone at work about setting boundaries and prioritizing to protect you from mounting pressures.

• Reach out to an old friend or family member you haven't spoken with in a while.

Cigna

AS AN EMPLOYER, HERE'S WHAT ELSE YOU CAN DO.

BE AWARE OF STRESS IN THE WORKPLACE.

Share resources with employees, such as:

- Employee Assistance Program (EAP)

- Virtual behavioral care

- Lifestyle Management programs

- Health Information Line

- Self-directed digital tools

DEFINING LONELINESS.

Loneliness is subjective:

- Difference between **feeling lonely** or **experiencing loneliness** and being alone.

- Amount of social connection one wants to have vs. what they currently have.

This study built off of **UCLA's Loneliness Scale**:

- A 20-item scale designed to measure one's subjective feelings of loneliness as well as feelings of social isolation.

- A score of 43 or higher is considered lonely.

UCLA LONELINESS SCALE

| 20 | 30 | 40 | 50 | 60 | 70 | 80 |

Less Lonely   Very Lonely
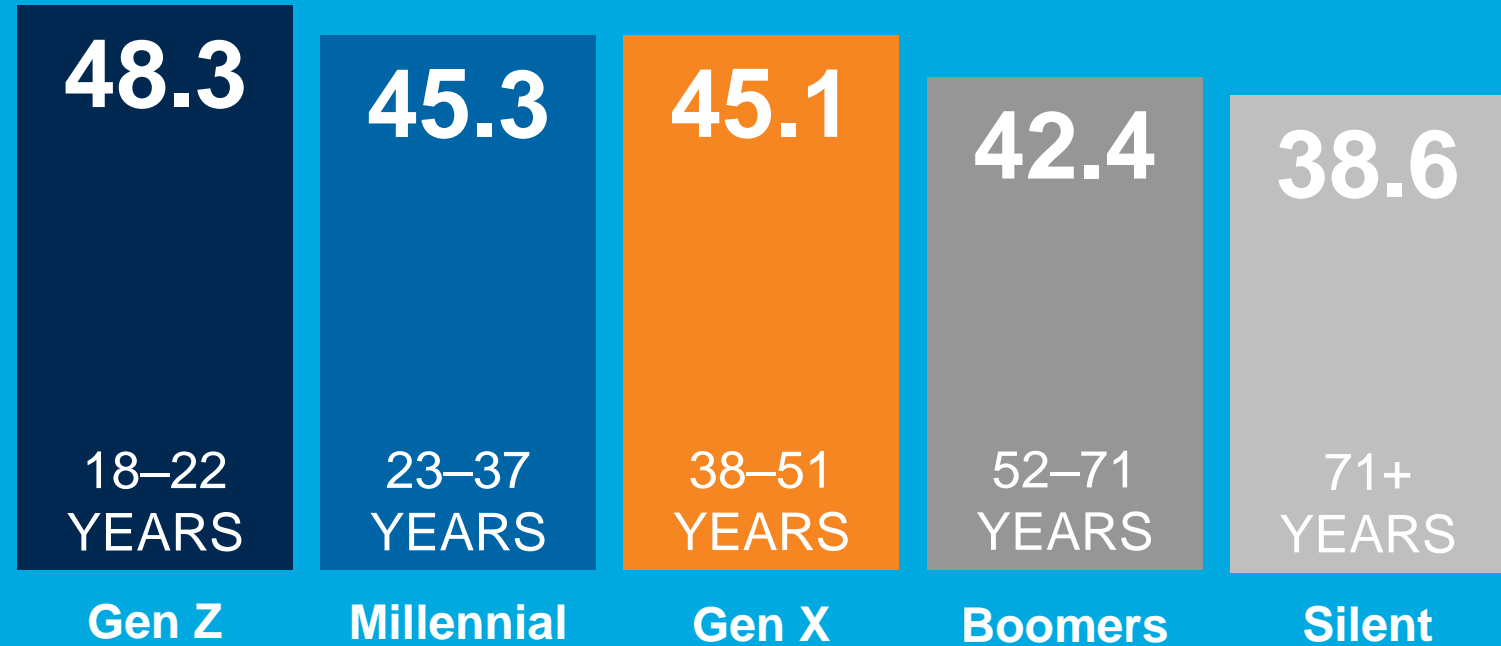
✿ Cigna®

MOST RESPONDENTS ARE CONSIDERED LONELY

as measured by a score of **43 or higher** on UCLA's Loneliness Scale.*

*DesHarnais Bruce L, Wu, JS, Lustig, SL, Russell DW, and Nemecek, DA. Loneliness in the United States: A 2018 National Panel Survey of Demographic, Structural, Cognitive, and Behavioral Characteristics. American Journal of Health Promotion 2019, 1–11.
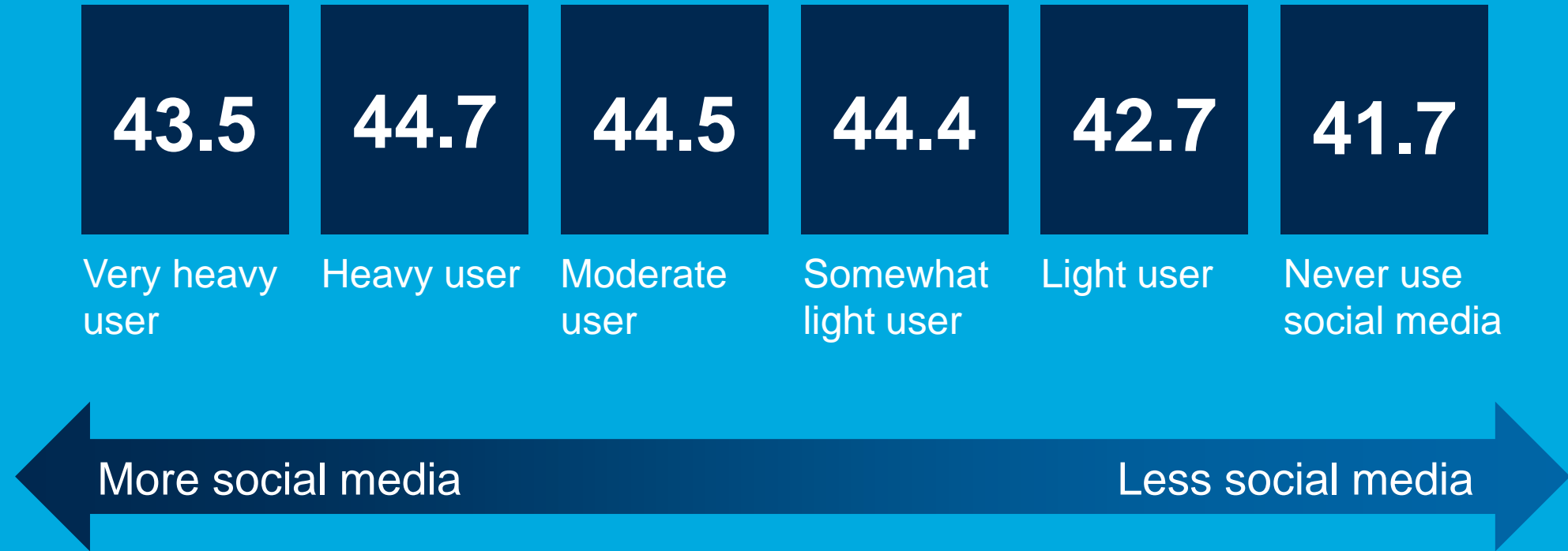
Cigna

CIGNA U.S. LONELINESS INDEX.

Gen Z is the loneliest generation and claims to be in worse health than older generations.

48.3	**45.3**	**45.1**	**42.4**	**38.6**
18–22 YEARS	23–37 YEARS	38–51 YEARS	52–71 YEARS	71+ YEARS
Gen Z	**Millennial**	**Gen X**	**Boomers**	**Silent**

Cigna

CIGNA U.S. LONELINESS INDEX.

No correlation found between social media use alone and feelings of loneliness.

43.5	44.7	44.5	44.4	42.7	41.7
Very heavy user	Heavy user	Moderate user	Somewhat light user	Light user	Never use social media

← More social media   Less social media →

Cigna

CIGNA U.S. LONELINESS INDEX.
Sleep

45.7
Too little

41.7
Just right

49.0
Too much

People who say they get enough sleep have the lowest loneliness scores.

Cigna.

CIGNA U.S. LONELINESS INDEX.
Physical activity

45.4
Too little

41.7
Just right

45.2
Too much

People who say they exercise the right amount have the lowest loneliness scores.

CIGNA U.S. LONELINESS INDEX.

The workplace

48.0
Too little

41.9
Just right

45.0
Too much

People who say they work the right amount have the lowest loneliness scores.

Cigna.

CIGNA U.S. LONELINESS INDEX.
Spending time with family

48.0
Too little

41.3
Just right

46.1
Too much

People who say they spend the right amount of time with family have the lowest loneliness scores.

Cigna

CIGNA U.S. LONELINESS INDEX.

Individuals with lower incomes have higher loneliness scores than those with higher incomes.

+8.7 points

41.0 — High income (>150K)

49.7 — Low income (<10K)
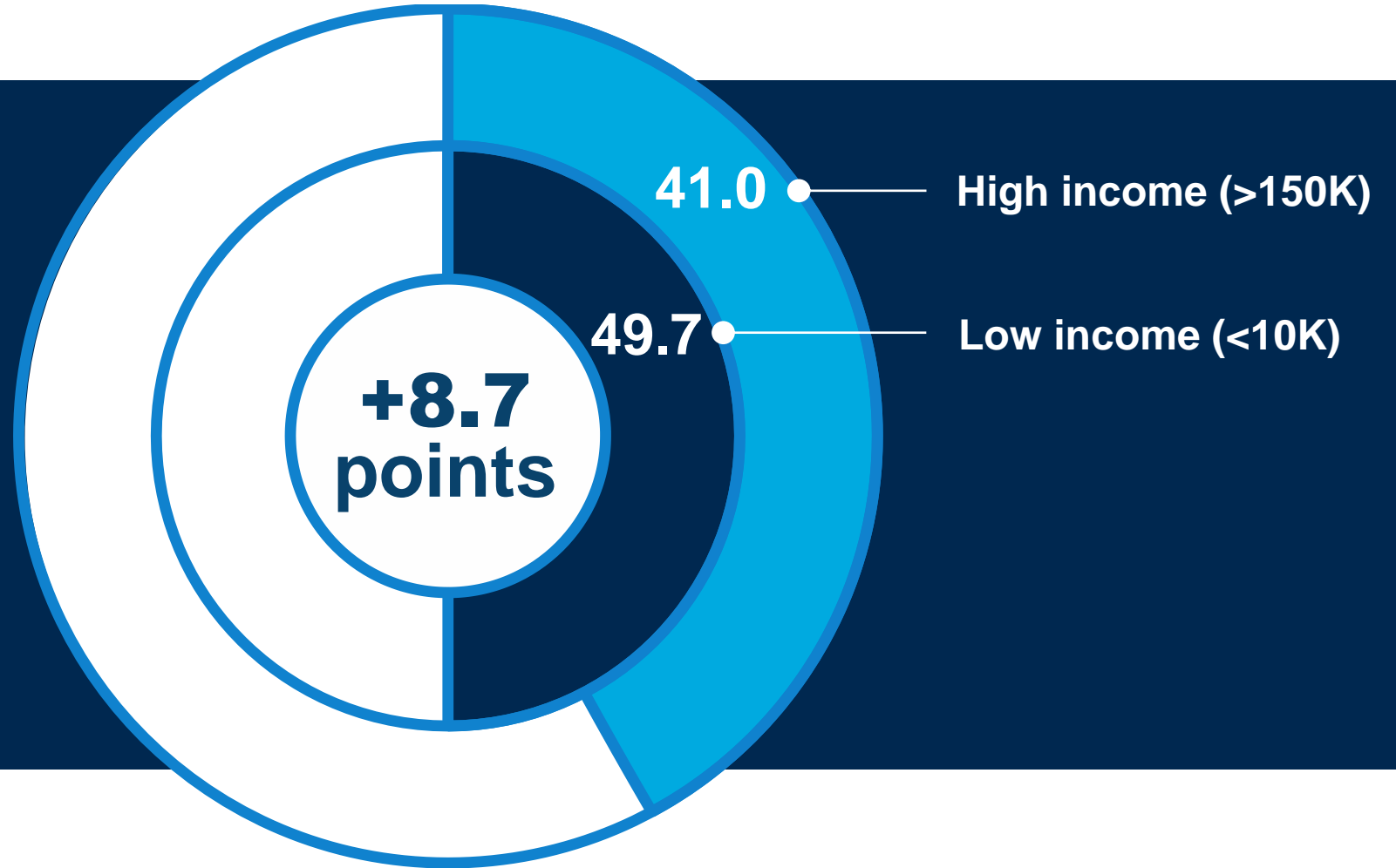
Cigna

TAKE THE LONELINESS QUIZ.

https://app.snapapp.com/LonelinessSurvey

LONELINESS IN AMERICA BY THE NUMBERS.

7%
increase in
loneliness
since 2018

90,000
lifetime hours people
spend at work

61%
of workers or nearly 3 in 5
Americans are lonely

UNDERSTANDING THE LONELINESS EPIDEMIC AND SOLUTIONS FOR THE WORKPLACE.

A MATERIAL IMPACT ON WORKERS.

Lower quality

Lonely workers are **3x more likely** to say the quality of their work is lower than it should be.

Less careful

Lonely workers are also more than **twice as likely** to admit not doing their work as carefully as they should.

Less productive

Lonely workers are over **3x more likely** than non-lonely workers to admit they are less productive than most workers with a similar job.

Higher churn

Lonely workers think about quitting their job more than **twice as often** as non-lonely workers.

Cigna

LONELINESS COSTS US.

Lonely workers miss **15 more days a year** of work than non-lonely workers.

Leads to an estimated productivity loss of **$4,180 per lonely worker**, or a total of more than **$406 billion a year**.*

*Productivity loss is calculated by taking average hourly compensation from the Bureau of Labor Statistics ($34.77), multiplying that by 8 for a workday (~$278), and then multiplying by additional days missed by lonely workers per year (~15). This leads to a total cost per lonely worker per year of ~$4,180. To calculate total cost, we then multiply it by the number of lonely workers (~97 million) to yield the $406 billion estimate.

Cigna

EMPLOYMENT TENURE, WORK ENVIRONMENT AND INDUSTRY TYPE MAKE A DIFFERENCE.

Tenure

Employees in a position for less than a year (62%) say they always or sometimes feel alone, while employees at their current job for 10 years or more are the least likely to report feeling alone.

Environment

Remote workers and telecommuters are more likely to say they always or sometimes feel alone and lack companionship.

Researchers in laboratories and members of the military report higher rates of loneliness than educators who work in school settings.

Industry

Workers in the entertainment industry have the highest average loneliness score.

Employees working in the nonprofit industry and in government have lower levels of loneliness among the industries sampled.
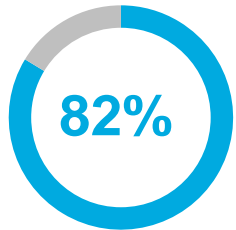
Seniority

Entry-level employees have the highest loneliness score, followed by senior executives. Those in between are the least lonely.
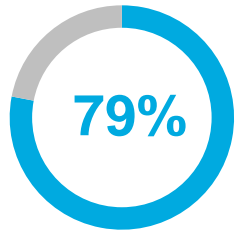
Cigna

THE MOST AND LEAST LONELY WORKERS.

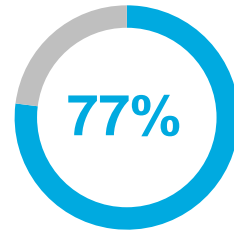Even employees considered the least lonely are still a majority lonely.
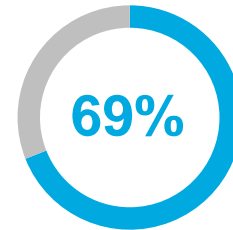
MOST LONELY WORKERS

82%
Sharing/gig economy workers
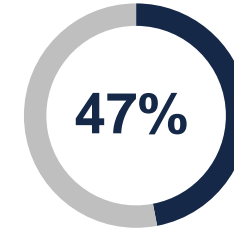
79%
Younger workers age 18–24

77%
Those who have been working for their company/ organization for less than six months
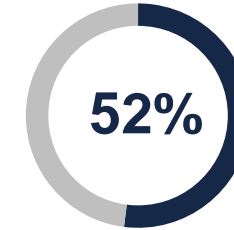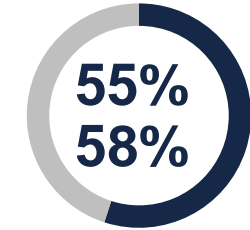
69%
Those in senior executive positions

LEAST LONELY WORKERS

47%
Workers age 55+

52%
Those with work tenures of more than 10 years

55% 58%
Those who work in government (55%) and education (58%)

Cigna.

CHANGING CULTURE:

Drivers of loneliness at work.

1 Feeling the need to hide one's true self when at work

2 Making fewer phone calls than they prefer

3 Not finding work meaningful or fulfilling

4 Company/organization's values don't align with employee's values

5 Managers don't advocate for the employee

6 Making more video calls than they prefer

7 Eating lunch alone at their desk

8 Not being able to leave work at work

Note: Sorted by largest effect on loneliness

Cigna

CHANGING CULTURE:
Statistically significant deterrents against loneliness.

1 Encouraging coworkers to be **supportive** of each other

2 Enabling employees to **meet new people** at work outside of their day-to-day interactions

3 Promoting good **work-life balance**

4 Making it easy for employees to **meet new people** at work

5 Encouraging a **balanced use of technology** (e.g., phone calls, video calls, chats)

6 Enabling a sense of **shared goals** among colleagues

7 Facilitating lunches among **colleagues who enjoy eating lunch together**

Cigna

WHAT WE CAN DO.

LONELINESS DRIVERS	HOW WE ADDRESS THEM
Environmental factors: • Tenure • Remote workers • Specific industries • Seniority	• Employee Assistance Program (EAP): Emotional health • Behavioral: Find a provider/therapist • Employee Resource Groups (ERGs) • Employee working lunch groups • Peer support (iPrevail)
Cultural issues: • Poor relationships with coworkers • Feeling the need to hide one's true self when at work • Lack of shared goals • Not finding work meaningful or fulfilling • Eating lunch alone at their desk • Unbalanced use of technology • Not being able to leave work at work	• EAP: Emotional health • Behavioral: Find a provider/therapist • Community-based support groups • Mentorship • Team goal-setting exercises • Peer support (iPrevail) • Onsite fitness centers • Guidelines for use of technology and email/work "dark hours" • Volunteer match service for local opportunities

DEPRESSION IN THE WORKPLACE.

A correlate of loneliness

950216

BASIC FACTS ABOUT DEPRESSION.

What is depression?	A medical condition that can affect mood, behavior and the physical body
What does it look like?	Hopelessness, loss of enjoyment, disrupted sleep and eating, withdrawal, mood changes, feelings of guilt and low self-esteem
What causes it?	A combination of genetic, situational and physical factors may be involved

Cigna

BASIC FACTS ABOUT DEPRESSION.

- Causes, triggers and symptoms can point to different diagnoses.

- Without treatment, duration is indefinite.

- 80% of people respond well to treatment, with an improvement in symptoms within weeks.

OBSTACLES TO SEEKING TREATMENT.

Embarrassment, the stigma of mental illness: "Only crazy people go to shrinks."

Believing depression is a personal weakness: "I just need to deal with it."

Limited information about treatment: "It costs too much," "It takes too much time."

A belief that treatment won't help or isn't deserved: "What's the point?"

Denial: "I'm fine, just a little down."

POTENTIAL EFFECTS OF DEPRESSION IN THE WORKPLACE.

- Absenteeism and presenteeism

- Decreased productivity

- Missed deadlines, increased errors

- Fatigue or physical complaints interfering with work

- Safety problems, accidents

- Lack of cooperation

- Disconnect from teammates

- Morale problems
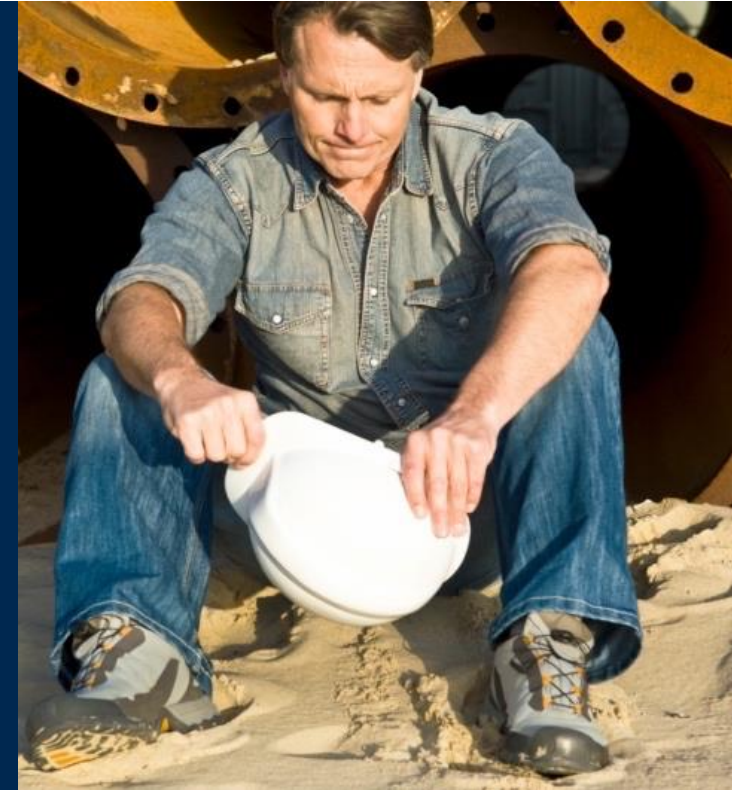
WHAT CAN YOU DO?

- Learn about depression

- Know the sources of help available

- Recognize when an employee shows signs that might be depression-related

- Move past any hesitation to address the issue

BEHAVIORAL HEALTH LANDSCAPE.

Drug overdose deaths tripled in the United States from 1999 to 2016[1]

Behavioral health and disability are well-established **drivers** of substance use[1]

48 million: 1 in 5 American adults has a behavioral health condition[2]

2 out of 3 PCPs report difficulty when referring patients for behavioral health[3]

111 million people in the United States live in areas with provider shortages[3]

Nationwide shortage of psychiatrists

Severe shortage of child and adolescent psychiatrists

1. "Behavioral health workforce faces critical challenges in meeting population needs." 5/2018. Elsevier. elsevier.com/about/press-releases/research-and-journals/behavioral-health-workforce-faces-critical-challenges-in-meeting-population-needs.
2. The National Survey on Drug Use and Health: 2018. Substance Abuse and Mental Health Services Administration. samhsa.gov/data/sites/default/files/cbhsq reports/NSDUHNationalFindingsReport2018/NSDUHNationalFindingsReport2018.pdf.
3. "Addressing the escalating psychiatrist shortage." 2/2018. Association of American Colleges. news.aamc.org/patient-care/article/addressing-escalating-psychiatrist-shortage.

ADDRESSING STIGMA.

RECOGNIZE

We must first recognize the high prevalence of mental illness and substance use disorders

REEDUCATE

Then reeducate ourselves, friends and family on the truths of mental illness and addiction

REDUCE

When we do this, we can reduce the stigma

STAMP OUT STIGMA

Cigna.

AN INNOVATIVE APPROACH TO MENTAL HEALTH:

Mental Health First Aid USA.[1]

- Mental Health First Aid is an eight-hour certification course that teaches participants how to recognize and support an individual who is experiencing a mental health crisis or problem **until professional help can be obtained.**[2]

- People are often unsure how to respond when a mental health crisis occurs. Mental Health First Aid teaches skills to provide initial help.

- Mental Health First Aid aims to increase mental health literacy and decrease the stigma around mental health problems.

- Mental Health First Aid is included on the Substance Abuse and Mental Health Services Administration's National Registry of Evidence-based Programs and Practices (NREPP).[3]

1. Mental Health First Aid copyrighted 2015, National Council for Behavioral Health and The Missouri Department of Mental Health.
2. Mental Health First Aid, https://www.mentalhealthfirstaid.org.
3. Mental Health First Aid, Research & Evidence Base, excerpt from https://www.mentalhealthfirstaid.org/about/research/, 2017.

THE BENEFITS OF MENTAL HEALTH FIRST AID.

Risk factors and warning signs of mental health and substance use issues/ concerns.[1]

Information related to depression and mood disorders, anxiety disorders, trauma, psychosis and substance use disorders.

Strategies to assist in both crisis and non-crisis situations, including development of a five-step action plan.

Learn about professional, peer and self-help resources.

Studies have shown that individuals certified in Mental Health First Aid improve their knowledge of signs, symptoms and risk factors of mental illnesses and addictions, increase their confidence in and likelihood to help an individual in distress, and show improved mental wellness themselves.[2]

Cigna.