

'What we measure informs what we do. And if we're measuring the wrong thing, we're going to do the wrong thing.'

Joseph Stiglitz, World Economic Forum, Davos, 2016

Mental Wellbeing Indicators and Interventions

Supporting organisations to understand how to measure mental wellbeing activity to help their people to thrive.



How to use this guide

Organisations can spend time and money on mental wellbeing initiatives, often with no or little understanding on whether they are addressing a mental wellbeing risk within the organisation, or whether the initiatives are improving outcomes.

This guide will help CEOs, senior executives and health and safety managers to understand how mental wellbeing activity in their organisations can be assessed and monitored, to improve mental wellbeing outcomes for their people.

It has two parts:

» **Part one: Understanding mental wellbeing indicators**

Based on the Forum's Mental Health and Wellbeing at Work Framework, this will introduce five key wellbeing indicators that assess wellbeing across all four approaches of the framework.

» **Part two: Organisational assessment against wellbeing indicators**

An assessment for senior leaders and health and safety managers based on the five key wellbeing indicators to understand what is working well, and where gaps may be present in your organisation.

To support this guide, the Forum is working on a digital resource focusing on emerging research into the effectiveness of wellbeing interventions. This will be regularly updated, and will be available on our website from July 2022.



Part one: Understanding mental wellbeing indicators

“Wellbeing is the fulfilment of the physical, mental, social, and cognitive needs and expectations of a worker related to their work (International Standard ISO 45003 Occupational Health and Safety Management – Psychological Health and Safety at Work: Managing Psychosocial Risks – Guidelines), or simply an individual’s ongoing state which enables him or her to thrive or not.”
(British Safety Council, 2018).

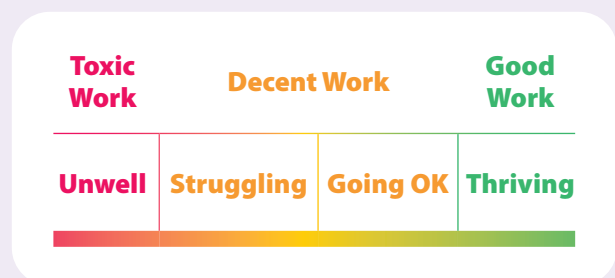
When a person thrives, they feel and function well, across multiple domains of their life. They are competent and confident, have a sense of purpose, and achievement, and positive self-esteem. They build and maintain good relationships, feel engaged with the world around them, live and work productively, cope with the ups and downs of daily life, adapt and manage in times of change or uncertainty, and have balanced emotions. In short, they experience positive mental health. Recent research by the What Works Centre for Wellbeing has shown that high-quality work is strongly linked to mental health (Hardoon, Hey & Bruneti, 2020) and that mental health is the most important factor contributing to life satisfaction, and the biggest single predictor of happiness.

Under the Health and Safety at Work Act 2015 (HSWA), organisations have a clear obligation to prevent harm to both physical and mental health:

*“Workers and other persons should be given the highest level of protection against harm to their **health**, safety, and welfare from work risk, by eliminating or minimising these risks, as is reasonably practicable.”*
(HSWA Section 3(2))

A person’s work environment can have a significant impact on their mental health. According to WorkSafe NZ, mentally healthy work is work where risks to people’s mental health are eliminated or minimised, and their mental wellbeing is prioritised. Wellbeing can be improved with well-designed work and organisational practices. We know that having a job is important for wellbeing, but having a job that is designed, organised and managed well further boosts our wellbeing. Employers are also increasingly recognising the productivity benefits to having employees who have higher mental wellbeing.

It is commonly agreed that we all have mental health every day, just as we all have physical health every day. It exists on a continuum, ranging from thriving to being unwell. It is dynamic (i.e., where a person is at any time on the continuum can change depending on circumstances), subjective (i.e., two people in the same circumstances may track differently along the continuum), and holistic (i.e., it incorporates both our work and personal lives).



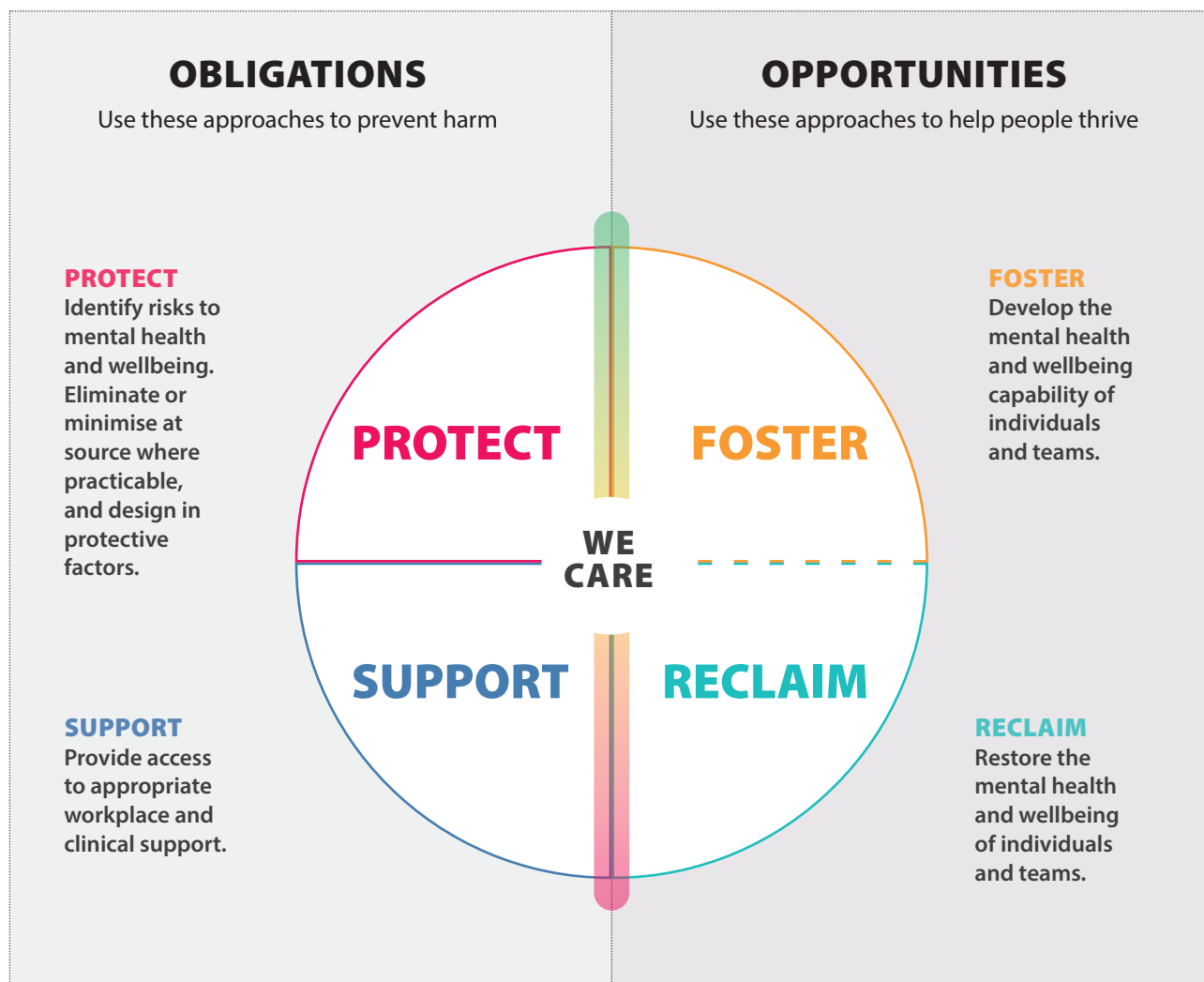
When people are unwell, they can experience mental harm. Mental harm at work is caused when a significant cognitive, emotional, or behavioural impact arises from, or is exacerbated by, work-related risk factors (WorkSafe, 2020). The harm may result from a single or repeated exposure. It may be immediate (i.e., acute) or gradual (i.e., chronic).

Measuring wellbeing

Exercising a duty of care in relation to protecting and preventing harm to the mental wellbeing of workers is no different to the duty of care to protect and prevent harm to their physical safety and health. However, given the subjective nature of mental wellbeing, measuring it is not an easy or straightforward task.

Lack of clear wellbeing indicators has been identified as a barrier to the development of mentally healthy workplaces.

The Forum's **Mental Health and Wellbeing at Work** framework outlines four approaches to developing a mentally healthy workplace. These approaches address the full range of the mental health continuum, enabling an organisation to not only meet its legal obligations to prevent harm, but also support people to thrive, not simply survive, at work.



PROTECT/FOSTER: Use **proactively** to build resilience.



RECLAIM/SUPPORT: Use **reactively** once harm has occurred to restore health and wellbeing.

Wellbeing indicators

Mental wellbeing, like safety, cannot be measured directly, so proxies or 'indicators' are used to provide assurance or confidence that workers are being protected from harm – physically and/or mentally - by their work. To gain this confidence requires a suite of wellbeing indicators that assess mental wellbeing across all four approaches of the Mental Health and Wellbeing at Work framework, and by default across the full spectrum of the mental health continuum.

To comprehensively measure wellbeing requires a wide range of measures.

Measures that focus on the *design* of wellbeing interventions as well as the *anticipation* of future needs.



Design indicators focus on activities that assess, respond, or improve wellbeing interventions that protect, foster, reclaim and support wellbeing.



Anticipation indicators focus on predicting future needs in relation to protecting, fostering, reclaiming, and supporting wellbeing. Anticipation indicators are used to inform future design indicators.

As well as measures that focus on *monitoring* the range and use of wellbeing interventions, *verifying* the impact, and *learning* from the outcomes of the interventions implemented.



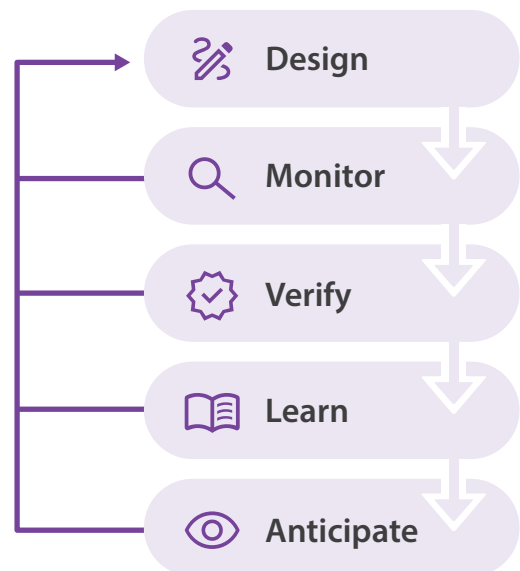
Monitoring indicators track the range, effort, and accessibility of wellbeing interventions that protect, foster, reclaim and support wellbeing.



Verifying indicators provide assurance on the effect and impact of these interventions.



Learning indicators reflect on what happened as a result of the wellbeing interventions. This reflection aims to increase knowledge and understanding in relation to the design, implementation, and outcome of wellbeing interventions. These reflections are used to inform the design of future wellbeing activities.



Monitor, Verify, Learn and Anticipate indicators all feedback into the Design indicators.

On the next page, this guide outlines a range of mental wellbeing interventions and indicators that can be used by organisations. Not all of them will be relevant for your organisation, but the focus should be on finding a combination of measures across all five areas; design, monitor, verify, learn and anticipate, that will work for your organisation.

Measuring Wellbeing Framework

Approaches To Wellbeing and Mental Health at Work

Protect

Identify risks to mental health and wellbeing. Eliminate or minimise at source where practicable, and design in protective factors.



DESIGN
Assessing, responding, and improving.

Risk assessment

- Psychosocial risk assessments e.g., the Mental Wellbeing By Design process for **all** types of work
- Completion of workload assessments
- Assessment of individual wellbeing and organisational wellbeing practices

Good design

- A current strategic wellbeing plan
- Psychosocial risks specific to the full range of work identified on the H&S critical register
- A range of wellbeing indicators included in Board report
- Relevant wellbeing procedures e.g., Bullying and harassment, flexible work, workload
- Proactive design of work to eliminate or minimise identified psychosocial hazards
- Support of community wellbeing projects
- Personal or wellbeing days in addition to sick leave

Foster

Develop the mental and wellbeing capability of individuals and teams.



MONITOR
Tracking range, effort, and accessibility

- No. and quality of psychosocial risk assessments completed
- Percentage of staff trained to complete psychosocial risk assessments
- No. of work design changes made to eliminate or reduce psychosocial risks
- Regular workload assessments
- No. of workload assessment items actioned
- Monitoring of physiological conditions e.g., fatigue, fitness for work
- Monitor reported levels of psychological safety
- Monitoring of subjective wellbeing by wellbeing apps.
- No. of days away from work due to mental wellbeing or stress
- No. of reports of bullying and harassment
- Staff retention rates
- Injuries
- Level of reported psychological safety

- Leadership wellbeing programmes to develop the mindset and practices e.g., wellbeing conversations, of people leaders so they can build a thriving culture, as well as support staff that may be struggling
- Programmes to build awareness and understanding of mental health of **all** staff
- Programmes to build internal peer support
- Programmes to build individual mental wellbeing and resiliency practices
- Programmes enabling staff to volunteer in community projects
- Programmes involving workers' families and community
- Frequency, variety, and quality of wellbeing communications to inform and educate workers on wellbeing matters e.g., notices, emails, social media, discussion group
- A range of subsidised wellbeing activities
- Programmes to build awareness of the value of humble enquiry in relation to wellbeing conversations.
- Percentage of workers attending mental wellbeing programmes
- Percentage of workers satisfied with mental wellbeing programmes
- Percentage of people leaders attending mental wellbeing programmes
- No. of wellbeing conversations people leaders have each month
- No. of family and community accessing wellbeing programmes
- Percentage of staff participating in community projects
- No. of staff accessing wellbeing information from the intranet e.g., number of sign-ins, questions and responses posted on wellbeing forum
- No. of staff using mental health apps



VERIFY
Assuring effect and impact

- Identified psychosocial risks are eliminated or minimised
- Level of reported subjective wellbeing using for e.g., WHO 5, The ONS-4, the overall life satisfaction scale "Overall how satisfied are you with your life, these days?"; measured on a scale of 0 to 10 (from "extremely dissatisfied" to "extremely satisfied")
- Decreased stress leave
- Decreased staff turnover
- Level of satisfaction with balance of work and personal life.

- Percentage of workers expressing satisfaction with wellbeing programmes
- Percentage of leaders expressing satisfaction with leadership wellbeing programmes
- Percentage of staff satisfaction with organisational wellbeing practices
- Percentage of staff signed up for wellbeing initiatives e.g., planting trees, fun runs



LEARN
Reflecting on what happened

- Frequency and quality of Learning Team reviewing the psychosocial risk process and outcomes and percentage of findings shared with workers
- Review of strategic wellbeing plan
- Review feedback from the Mental Wellbeing By Design process
- Programmes to build awareness of the value of humble enquiry in relation to wellbeing conversations.

- Frequency of Learning Team reviewing of the range, accessibility, and appropriateness of capability wellbeing programmes
- Employee feedback from surveys, focus groups etc.



ANTICIPATE
Predicting future needs

- Number of predictive risk assessments using future scenarios and role plays
- Emerging trends in industry, community, and/or international mental health and wellbeing
- Number of presentations from professional, industry, or national bodies (e.g., Mental Health Foundation of New Zealand) on emerging trends in mental health and wellbeing

Approaches To Wellbeing and Mental Health at Work

Reclaim

Restore the mental health and wellbeing of individuals and teams.

Support

Provide access to appropriate workplace and clinical support.



DESIGN
Assessing, responding, and improving.

- Events and activities to restore the mental wellbeing based on credible wellbeing frameworks e.g., Five Ways to Wellbeing, Te Whare Tapa Whā
- Programmes to maintain or restore physical health e.g., nutrition, diabetes, stop smoking
- Peer support programmes
- A range of subsidised wellbeing activities, including wellbeing apps.

- Provision of external, off site or on-site, medical and counselling support services e.g., EAPs
- Provision of return-to-work programmes
- Provision of internal peer support



MONITOR
Tracking range, effort, and accessibility

- No. of wellbeing programmes
- No. of workers participating in wellbeing activities e.g., family events, sports events
- Participation in programmes to support wellness e.g., mindfulness, nutrition, 5 ways to wellbeing activities, conflict management

- No. of workers accessing the EAP
- No. of workers absent due to personal mental health issues or due to supporting family and friends with mental health issues
- No. of people accessing internal peer support
- No. of Return-to-Work programmes



VERIFY
Assuring effect and impact

- Percentage of workers expressing satisfaction with wellbeing events and activities



LEARN
Reflecting on what happened

- Frequency of Learning Team reviewing of the range, accessibility, and appropriateness of restorative wellbeing programmes
- Regular review of peer support programme e.g., use of, issues raised, development needs identified

- Frequency of Learning Team reviewing of the reported EAP uptake and issues raised

Part two: Measuring wellbeing in your organisation

Complete the following table with the wellbeing indicators currently in use in your organisation.

Approaches To Wellbeing and Mental Health at Work

Protect

Identify risks to mental health and wellbeing. Eliminate or minimise at source where practicable, and design in protective factors.

Foster

Develop the mental and wellbeing capability of individuals and teams.



Risk assessment

DESIGN

Assessing, responding, and improving.

Good design



MONITOR

Tracking range, effort, and accessibility



VERIFY

Assuring effect and impact



LEARN

Reflecting on what happened



ANTICIPATE

Predicting future needs

Reflections

Does your organisation have wellbeing interventions across all 4 approaches? Are all 5 types of wellbeing indicators in use? If not, which ones need to be included?

Approaches To Wellbeing and Mental Health at Work

Reclaim

Restore the mental health and wellbeing of individuals and teams.

Support

Provide access to appropriate workplace and clinical support.



DESIGN
Assessing, responding, and improving.

Risk assessment

Good design



MONITOR
Tracking range, effort, and accessibility



VERIFY
Assuring effect and impact



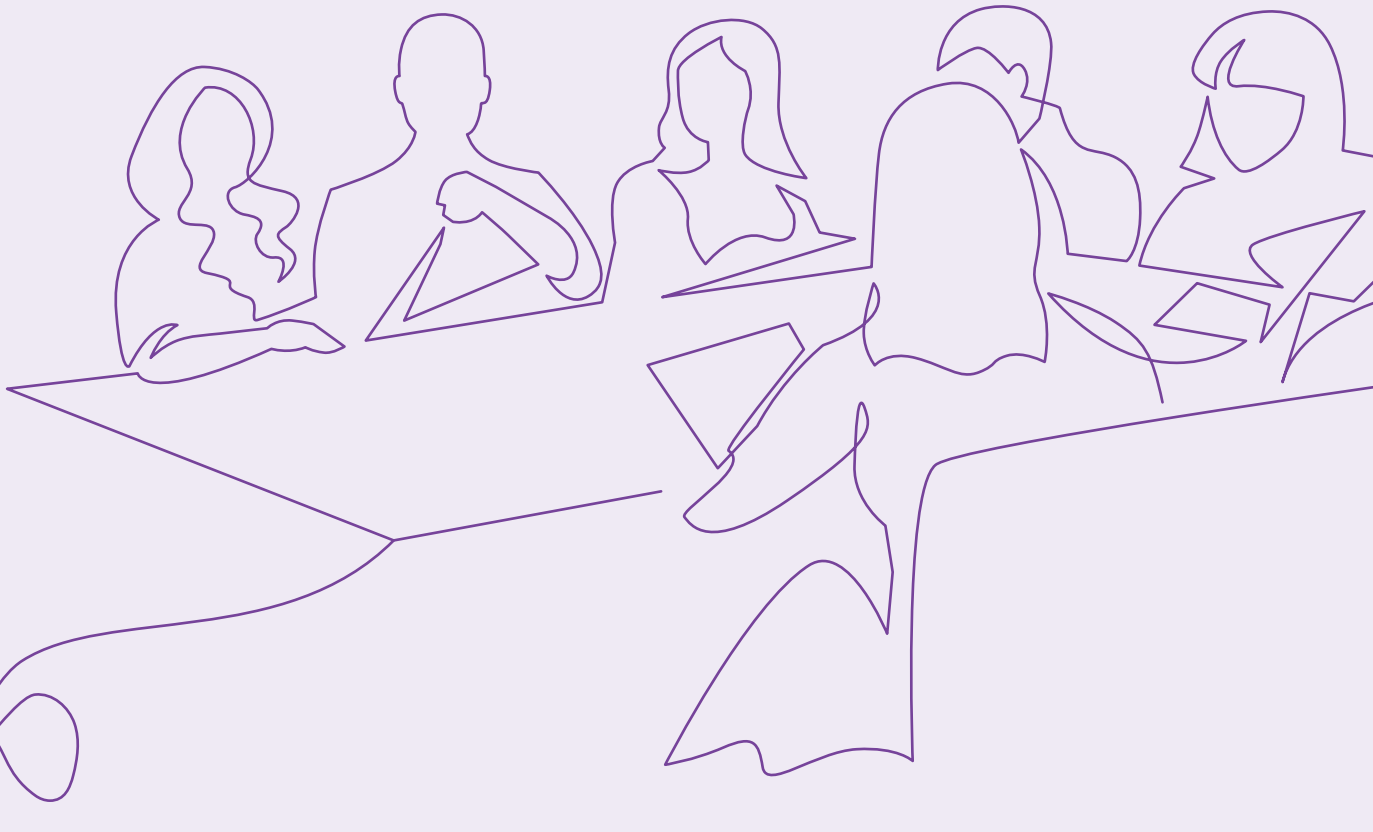
LEARN
Reflecting on what happened



ANTICIPATE
Predicting future needs

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About the Forum

The Business Leaders' Health and Safety Forum inspires and supports its members to become more effective leaders on health and safety. The Forum has more than 390 members, who are Chief Executives or Managing Directors of significant New Zealand companies.

Contact us info@forum.org.nz or find out more at:
www.forum.org.nz



About Leading Safety

Dr Hillary Bennett is a Director of Leading Safety, a consultancy specialising in the leadership of safety and wellbeing, and the assessment and development of safety and wellbeing culture. Hillary is a registered psychologist and has 38 years' experience in consulting to organisations, both large and small, in the private and public sector, in New Zealand and overseas. In 2019, she received the SafeGuard Lifetime achievement award for her pioneering work in health and safety leadership and in the forestry sector in New Zealand. She is the Oceania Regional Representative for the ISO/Technical Committee 283 Occupational Health and Safety Management.

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