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Overcoming Stigma Around Mental Health Services

Leaving depression, anxiety and other conditions untreated can be costly

By Stephen Miller, CEBS 3/15/2016

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The vast majority of employed adults with serious mental health conditions remain untreated. The downstream effects are reflected in larger medical claims, increased absenteeism and lower productivity, according to HR leaders who spoke at the 2016 Business Health Agenda conference, held the first week of March in Washington, D.C. The conference is presented annually by the nonprofit National Business Group on Health.

Benefit chiefs from supermarket chain Safeway Inc. and telecom firm Sprint Corp. described how they're working to improve their employees' mental health by increasing early intervention, removing the stigma around employee assistance programs (EAPs) and steering employees to needed mental health services.

Improving Care Access at Safeway

"There are over 44 million Americans who experience a mental illness any given year," said Kent Bradley, former chief medical officer at Safeway. Citing data from health-management IT firm Castlight and the nonprofit Partnership for Workplace Mental Health (<http://www.workplacementalhealth.org/>), he noted that the prevalence of mental illness among Americans falls along a spectrum that includes:

- Schizophrenia (1.1 percent).
- Bipolar disorder (2.6 percent)
- Major depression (6.9 percent).
- Anxiety disorders (18.1 percent).

A larger number of Americans—up to 20 percent or more—live with milder yet still debilitating forms of depression that result in lower productivity and lost work hours, Bradley noted, yet “71 percent of U.S. adults with depression won’t contact a mental health professional. They figure that they’ve got to work it out themselves.”

He noted four barriers that prevent people from getting care:

- **Awareness.** Employees don’t know what their conditions are and struggle to understand their needs.
- **Mindset.** Employees may not be familiar with, or open to, care options. Stigma keeps them from learning more.
- **Cost.** Certain therapists, especially psychiatrists, don’t take health insurance. Required medications may be expensive and not covered by employees' health plans.
- **Access.** Employees say it’s hard to find or get to the right behavioral health provider. They feel they can’t take time away from work or family.

On the matter of access, Bradley noted, “There must be a recognition that helping employees to find the right care is important. You have to think innovatively, using telehealth or a robust EAP,” for example.

Addressing Depression at Sprint

Sprint, headquartered in Kansas City, Mo., forged a partnership with the nonprofit Mid-America Coalition on Health Care’s Community Initiative on Depression

(http://www.machc.org/documents/11_Accomplishments%2012_04.pdf) “to move the needle forward with respect to people getting appropriate care, identifying signs and symptoms, and breaking down stigma,” said Collier Case, director of benefits at Sprint. “We began opening up the dialogue on behavioral health in the workplace, doing webinars and hosting events.”

Sprint held an initial behavioral health webinar that “employees could watch from their desks or on replay without identifying themselves. It addressed stress and resiliency, and was very well received.”

Using the phrase “stress and resiliency,” Case noted, helped to avert negative associations that might have turned off employees living with depression, keeping them away. But a subsequent webinar addressed the issue of depression head on.

“To break down the stigma that men often have—feeling they have to be tough—we invited a local play-by-play announcer for the Kansas City Royals, Ryan Lefebvre, to speak about his own issues with depression and anxiety (<http://www.amazon.com/Shame-Mans-Journey-Depression-Back/dp/0984113029>). We had an open conversation that brought in a lot more men than we typically might have had.”

Sprint saw “up to 30 percent utilization of our EAP in the two quarters that followed those events. That’s a tremendous amount of access, and a sign that people were trying to seek help.”

Sprint also brings EAP counselors to its onsite health clinic two days a week. “It provides confidentiality and privacy; someone can tell their manager ‘I have to go down to the clinic.’ They’re not saying why or what their health issue is,” Case said.

He recommended making available resources from the nonprofit Partnership for Workplace Mental Health (<http://www.workplacementalhealth.org/Functional/About-Us.aspx>), a program of the American Psychiatric Association Foundation. In particular, a five-minute video (<http://www.workplacementalhealth.org/Spotlights/ICU.aspx>) shows managers and employees how to appropriately reach out to those in distress. “You don’t have to diagnose their condition; just show that you care and then help connect them to appropriate services,” he said.

Lowering Disability Costs

“When we look at those patients with depression or other behavioral health diagnoses, we see that they have twice as much spending with respect to managing chronic physical conditions,” Case said. “Whether the physical condition is triggering depression or it’s the other way around, the co-morbidity issue is very significant.”

About 10 percent of Sprint’s disability costs are directly related to depression or stress, he added, “and those costs begin adding up in terms of work productivity and employees’ financial wellbeing.”

Benefits managers should aim to shift care for behavioral issues “away from the emergency room” and, when appropriate, from inpatient to outpatient settings, Case advised. “A lot of people seek inpatient care because they think that’s where they need to go,” he said. “In fact, appropriate care and treatment may actually be through an outpatient setting, such as group therapy.”

He recommended having “a really deep conversation with your EAP” to ensure that it offers appropriate and accessible counseling services. Another suggestion: “What about incorporating behavior health into your regular wellness programs, and marrying those two together rather than keeping them siloed? There are great opportunities for those counselors to work together.”

Case noted, “What if you could reduce your disability claims by 5 percent? And you did this through early intervention, raising usage of your EAP from the traditional 5 percent up to 12 percent, or even 15 percent of employees? You can then begin to put together a real value proposition.”

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