

The Mental Health Index™ report

The United States, April 2020

Spotlight on the mental health impact of the COVID-19 pandemic



LifeWorks
by Morneau Shepell

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Executive Summary

The April 2020 Mental Health Index™ comes at a unique time. The COVID-19 pandemic has disrupted lives and livelihoods more broadly and more quickly than anything in recent memory. As well, it looms ominously for at least the next several months. While an impact on mental health would be expected, the size of the impact is noteworthy.

The overall Mental Health Index™ for April 2020 is -8 points. A negative score indicates poorer mental health relative to the benchmark, and a positive score indicates better mental health. The benchmark reflects mental health data from 2017, 2018 and 2019. An 8-point decrease from the pre COVID-19 benchmark¹ is unprecedented in the three years when benchmark data was being collected. The current score of 67 is equivalent to the seventh percentile of the benchmark and is typical of a population in distress. The main factor that accounts for the current decrease is financial concern.

The Mental Health Index™ is lower for:

- those who were recently employed but are not currently², compared to those currently employed
- those who identify as female compared to male
- the younger the age groups

The lowest Mental Health Index™ sub-scores are for:

- anxiety (-11.6), followed by
- depression (-10.2)
- optimism (-8.9)
- work productivity (-8.7) and
- isolation (-7.9)

The overall Mental Health Index™ for April 2020 is -8 points

¹ The raw score for the Mental Health Index™ benchmark is 75/100. The April 2020 score is 67/100.

² All respondents had been employed within the prior six months.



In spite of this, there is relatively little change in the measure of general psychological health (2.1), however, this risk measure lags the other sub-scores. The financial risk score remains relatively strong, suggesting the impact of economic change has not yet depleted emergency savings. That said, those without emergency savings have a much lower Mental Health Index™ score (-18) than the overall group (-8).

The Mental Stress Change score is a separate indicator that measures the change in mental stress from month to month. A score of 50 reflects no change in mental stress from the prior month. Scores above 50 reflect more mental stress, scores below 50 reflect less mental stress. The range is from zero to 100.

The Mental Stress Change score for April 2020 is 71.6. This reflects a significant increase in mental stress compared to the prior month. While some increase in mental stress has been reported over the past three years, the current score indicates that more than half the population is experiencing more mental stress compared to the prior month, with a negligible proportion experiencing less.

Considering geography, the greatest increase in stress month over month is in:

- the Northeastern United States (73.5), followed by
- the Western States (71.2)
- the Midwestern States (71.1) and
- the Southern States (71.1)

Among the most populous states, the greatest increase in stress is in New York (73.6). This compares to California (70.8), Florida (70.0) and Texas (69.5).

There is a greater increase in mental stress for those who:

- identify as female compared to those who identify as male
- have two or more children, compared with those with one child or none, and
- those between 30-39 years of age, compared to other age groups



Households with middle incomes of \$60K to <\$100K are experiencing a greater increase in stress than households with either higher or lower incomes. That said, lower income households have lower Mental Health Index™ scores. This suggests that those with lower incomes may have had higher daily stress prior to the onset of the pandemic, hence the a less significant increase in stress than those with higher incomes, but those with lower incomes are faring worse overall.

There is a wide range of concerns and fears specifically related to the pandemic.

The most pervasive concerns impacting mental health are:

- the financial impact of the pandemic (53 per cent), followed by
- the fear of having a loved one pass away (44 per cent),
- getting ill (40 per cent),
- uncertainty regarding how the virus will impact family and relationships (29 per cent), and
- ongoing work strain/overwork due to the pandemic (33 per cent).

When considering the “number one” concern, however, fear of the death of a loved one is a greater concern than finances.

A significant majority (75 per cent) indicates that the COVID-19 pandemic specifically, is having a negative impact on their mental health.

- About half of the total (48 per cent) feel a negative impact, but they also feel that they will be able to cope
- Another 27 per cent indicate a greater negative impact and uncertainty about the ability to cope, with half of those indicating a very negative impact or crisis.

The most pervasive concerns impacting mental health are financial impact of the pandemic, followed by fear of having a loved one pass away



Overall, the younger the individual, the greater the negative impact of the COVID-19 pandemic. Those with children are also more likely than those without to have a more negative impact.

Ninety-six (96) per cent indicate personal disruption as a result of the COVID-19 pandemic. At this point, there are varying beliefs about how long the disruption will last:

- 27 per cent believe that the disruption to them personally will be over in June 2020,
- 18 per cent believe that it will be over before then,
- 37 percent believe it will be over either July, August or September, and
- 10 percent believe that the disruption will end in 2021.

Those who believe that the personal disruption of the pandemic will last longer, are more likely to have lower scores on the Mental Health Index™.

The data from the Mental Health Index™ is intended to promote insight and positive action by individuals, business and government.

Additional data and analyses

Industry scores, demographic breakdown of sub-scores, and specific cross-correlational and custom analyses as well as benchmarking against the national results or any sub-group, are available upon request. Contact MHI@morneaushepell.com

The younger the individual,
the greater the negative
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Overview of the Mental Health Index™

The mental health and well-being of a population is essential to overall health and work productivity. The Mental Health Index™ provides a measure of the current mental health status of employed adults in a given geography, compared to the benchmarks collected in the years of 2017, 2018 and 2019. The increases and decreases in the Index are intended to predict cost and productivity risks, and inform the need for action by individuals, business and government.

The Mental Health Index™ report has three main parts:

- The overall Mental Health Index™ (MHI), which is a measure of deviation from the benchmark of mental health and risk.
- A Mental Stress Change score (MStressChg), which measures the level of reported mental stress, compared to the prior month.
- A Spotlight section that reflects the specific impact of current issues in the community: For the current and immediately foreseeable future, the measures in this section relate to the mental health impact of the COVID-19 pandemic.

Collected through an on-line survey of 5,000 residents of the United States

Methodology

The data for this report was collected through an on-line survey of a representative group of 5,000 residents of the United States and who are currently employed or who were employed within the prior six months. The same respondents participate each month to remove sampling bias. The respondents were asked to consider the prior two weeks when answering each question. The Mental Health Index™ is published monthly, starting April 2020. The benchmark data was collected in 2017, 2018 and 2019. The data for the current report was collected between April 4, 2020 and April 9, 2020.



Calculations

To create The Mental Health Index™, the first step leverages a response scoring system that turns individual responses to each question into a point value. Higher point values are associated with better mental health and less mental health risk. Each individual's scores are added and then divided by the total number of possible points to get a score out of 100. The raw score is the mathematical mean of the individual scores.

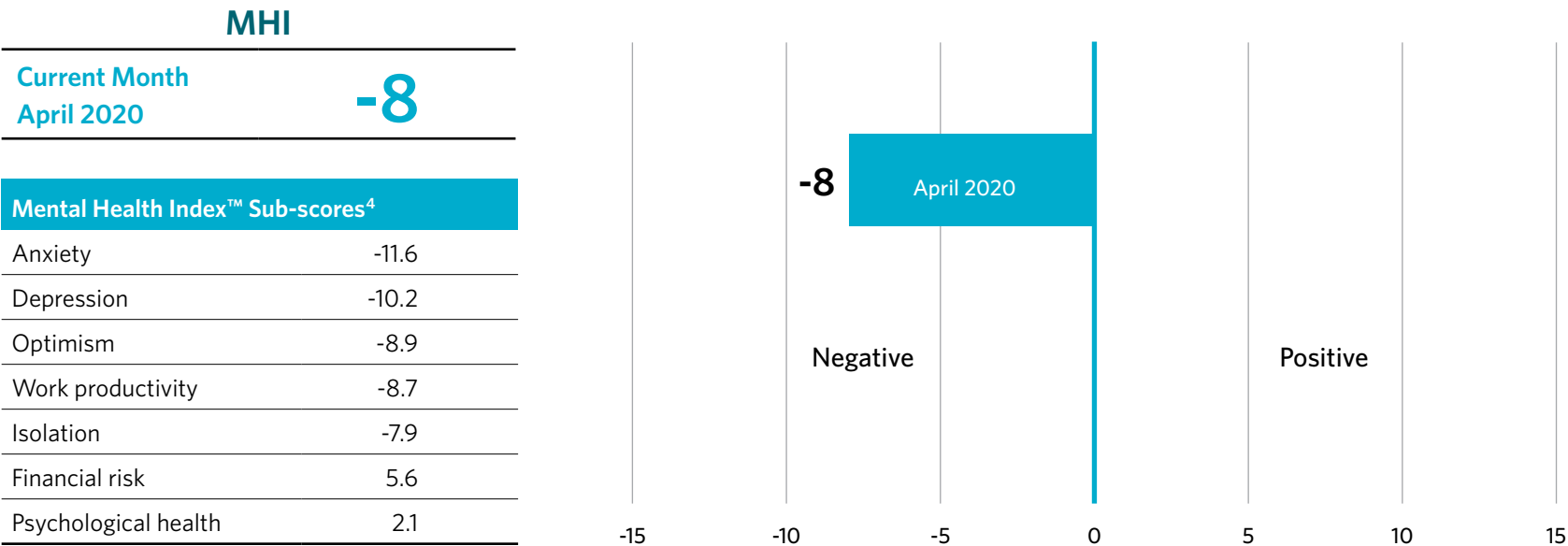
To demonstrate change, the current month's scores are then compared to the benchmark and the prior month. The benchmark is comprised of data from 2017, 2018 and 2019. This was a period of relative social stability and steady economic growth. **The deviation relative to the benchmark is the Mental Health Index™. A score of zero in The Mental Health Index™ reflects no change, positive scores reflect improvement, and negative scores reflect decline.**

A Mental Stress Change score is also reported given that increasing and prolonged mental stress is a potential contributor to changes in mental health. It is reported separately and is not part of the calculation of the Mental Health Index™. The Mental Stress Change score is calculated as (Percentage reporting less mental stress + Percentage reporting the same level of mental stress * 0.5) * -1 + 100. The data compares the current to the prior month. **A Mental Stress Change score of 50 reflects no change in mental stress from the prior month. Scores above 50 reflect an increase in mental stress and scores below 50 reflect a decrease in mental stress.** The range is from zero to 100. A succession of scores over 50, month over month, reflects high risk.



The Mental Health Index™

The Mental Health Index™ (MHI) is a measure of deviation from the benchmark³ of mental health and risk.



The overall Mental Health Index™ declined by 8 points compared to the benchmark. Such a change is statistically significant and unprecedented in the three years when the benchmark data was being collected. The current score of 67 is equivalent to the seventh percentile of the benchmark.

The lowest scores are for those who were recently employed but are not currently, compared to those currently employed, for those who identify as female compared to male, and for the younger the age groups.

The neutral to positive score for psychological health suggests that the Mental Health Index™ may be currently be situational. The positive score for financial risk suggests that the anxiety related to finances is, at this point, more a fear than a result of the actual depletion of savings.

³ The benchmark reflects data collected in 2017, 2018 and 2019.
⁴ The demographic breakdown of sub-scores are available upon request.

**Employment status**

Employed currently	-7.5
Employed within the past six months but not currently	-13.7

Age group

Age 20-29	-15.2
Age 30-39	-12.7
Age 40-49	-10.3
Age 50-59	-5.6
Age 60-69	0.7

Number of children

No children in household	-7.0
1 child	-11.0
2 children	-11.0
3 children or more	-9.6

Region

Northeast	-9.4
Midwest	-7.7
South	-7.0
West	-8.5

Gender

Male	-6.1
Female	-9.8

Income

Household Income <\$30K/annum	-15.8
\$30K to <\$60K/annum	-10.5
\$60k to <\$100K	-7.2
\$100K to \$150k	-5.2
\$150k and over	-1.2

Number of adults in household

One adult in household	-9.9
2 adults	-6.3
3 adults	-9.5
4 adults	-13.1
5 adults or more	-8.3

Numbers highlighted in **orange** are the most negative scores in the group.

Numbers highlighted in **green** are the least negative scores in the group.

Available upon request:

Industry scores
Specific cross-correlational and custom analyses



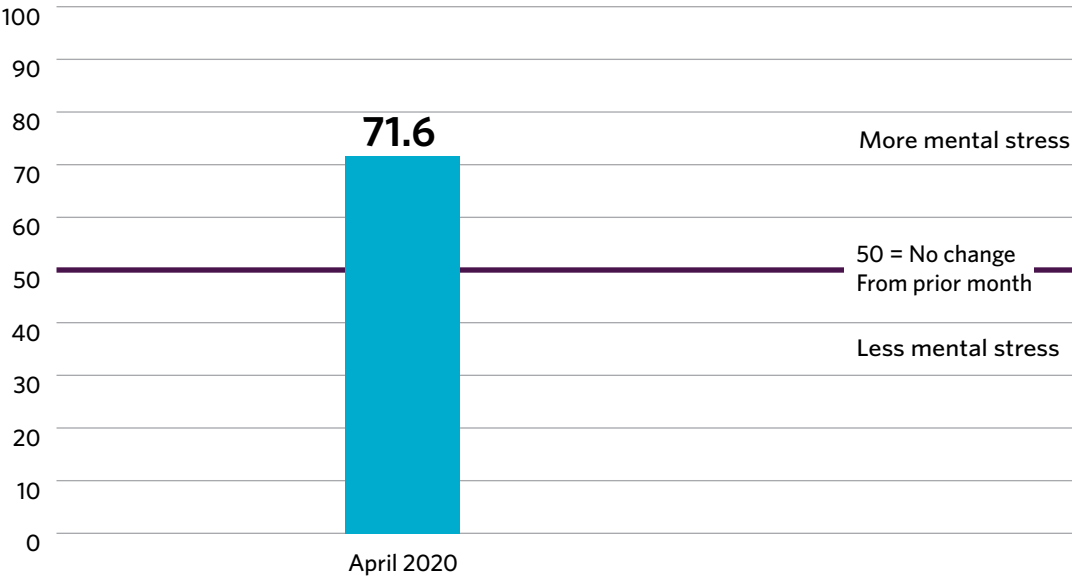
The Mental Stress Change Score

The Mental Stress Change Score (MStressChg) is a measure of the level of reported mental stress, compared to the prior month.

Mental Stress Change	
Current Month April 2020	71.6

The Mental Stress Change score for April 2020 is 71.6. This reflects a significant increase in mental stress compared to the prior month.

There is a greater increase in mental stress for those who identify as female compared to male, those with more children, those in the Northeastern states, and those in a middle-income bracket.



**Employment status**

Employed currently	71.3
Employed within the past six months but not currently	74.9

Age group

Age 20-29	70.7
Age 30-39	72.9
Age 40-49	72.8
Age 50-59	72.1
Age 60-69	70.2

Number of children

No children in household	71.0
1 child	72.8
2 children	73.2
3 children or more	75.0

Region

Northeast	73.5
Midwest	71.1
South	71.1
West	71.2

Gender

Male	68.4
Female	74.5

Income

Household Income <\$30K/annum	68.8
\$30K to <\$60K/annum	71.5
\$60k to <\$100K	73.3
\$100K to <\$150K	70.4
\$150K and over	72.0

Number of adults in household

One adult in household	70.9
2 adults	72.0
3 adults	70.0
4 adults	75.1
5 adults or more	71.7

Numbers highlighted in **orange** are the most negative scores in the group.

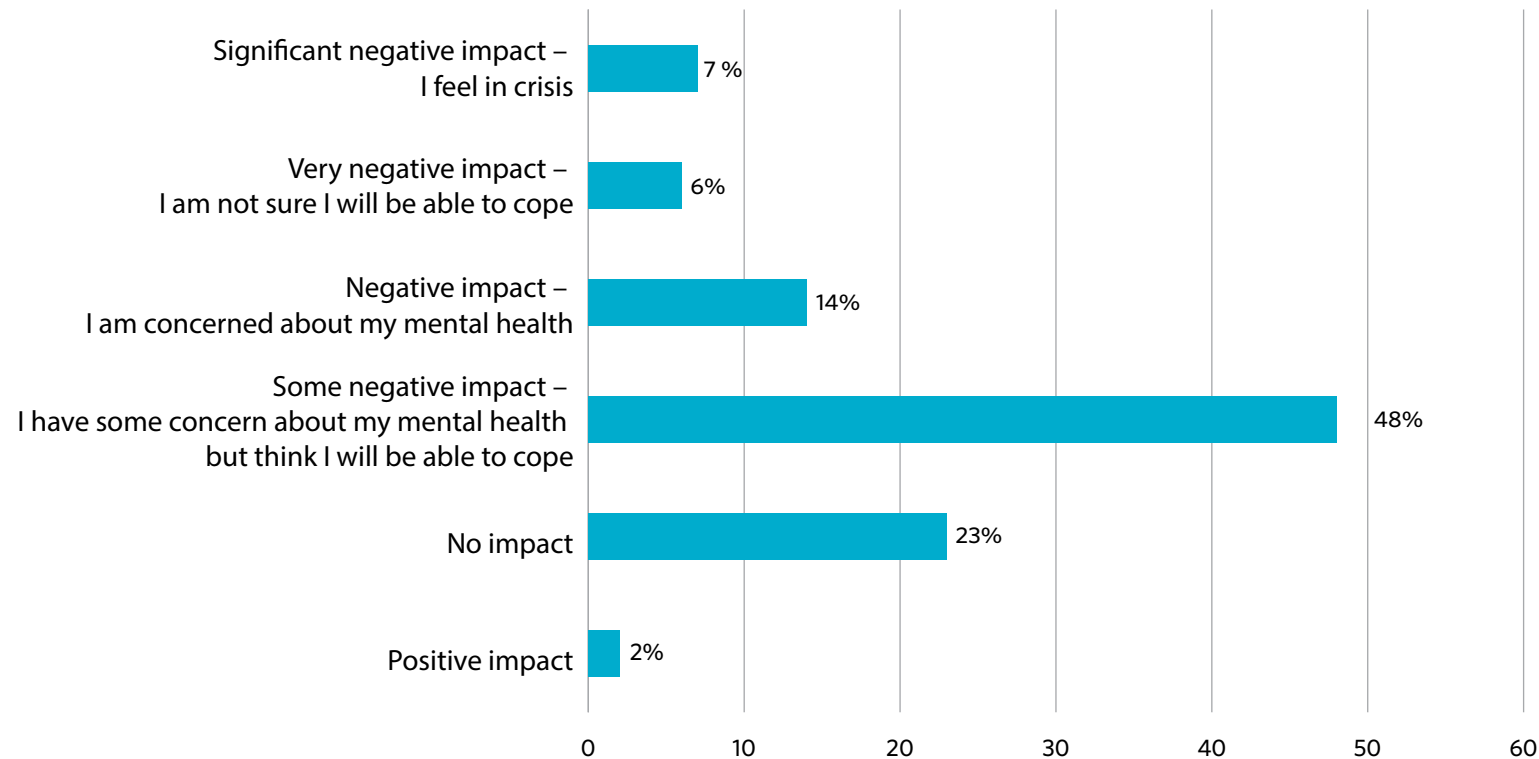
Numbers highlighted in **green** are the least negative scores in the group.

Available upon request:

Industry scores
Specific cross-correlational and custom analyses



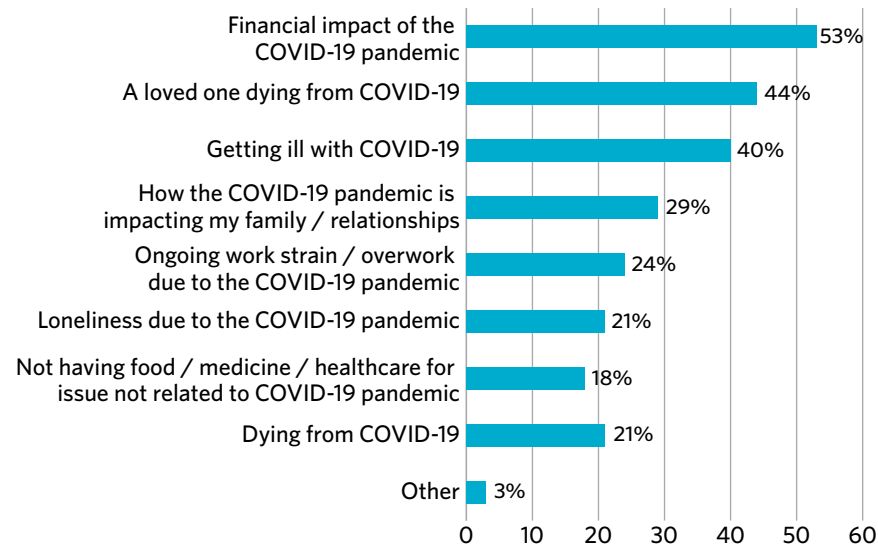
The impact of the COVID-19 pandemic



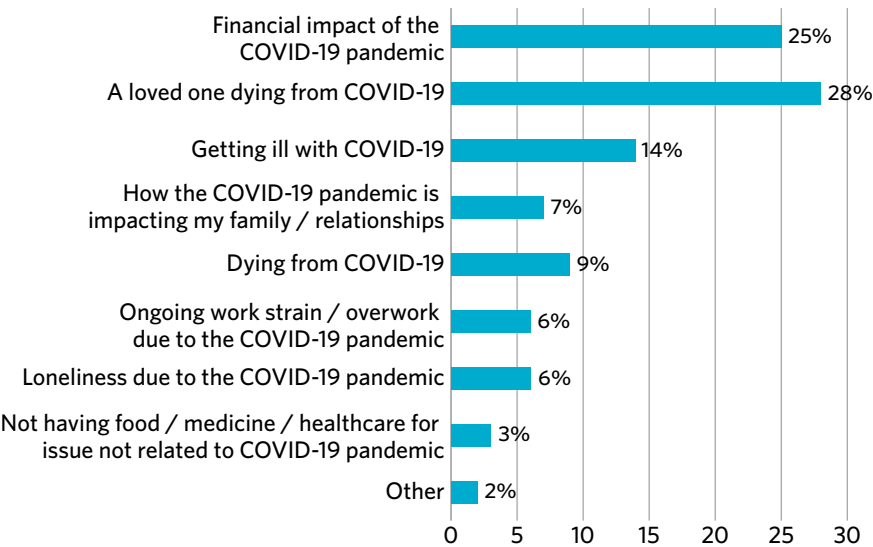
A significant majority (75 per cent) indicate that the COVID-19 pandemic specifically is negatively impacting their mental health. About half of the total (48 per cent) believe that although they feel this impact, they also feel that they will be able to cope. Another 27 per cent indicate greater concern, with half of those indicating a very negative impact or crisis.



**Contributors to the mental health impact of the COVID-19 pandemic
(multiple selections)**



**The single greatest contributor to the mental health
impact of the COVID-19 pandemic**

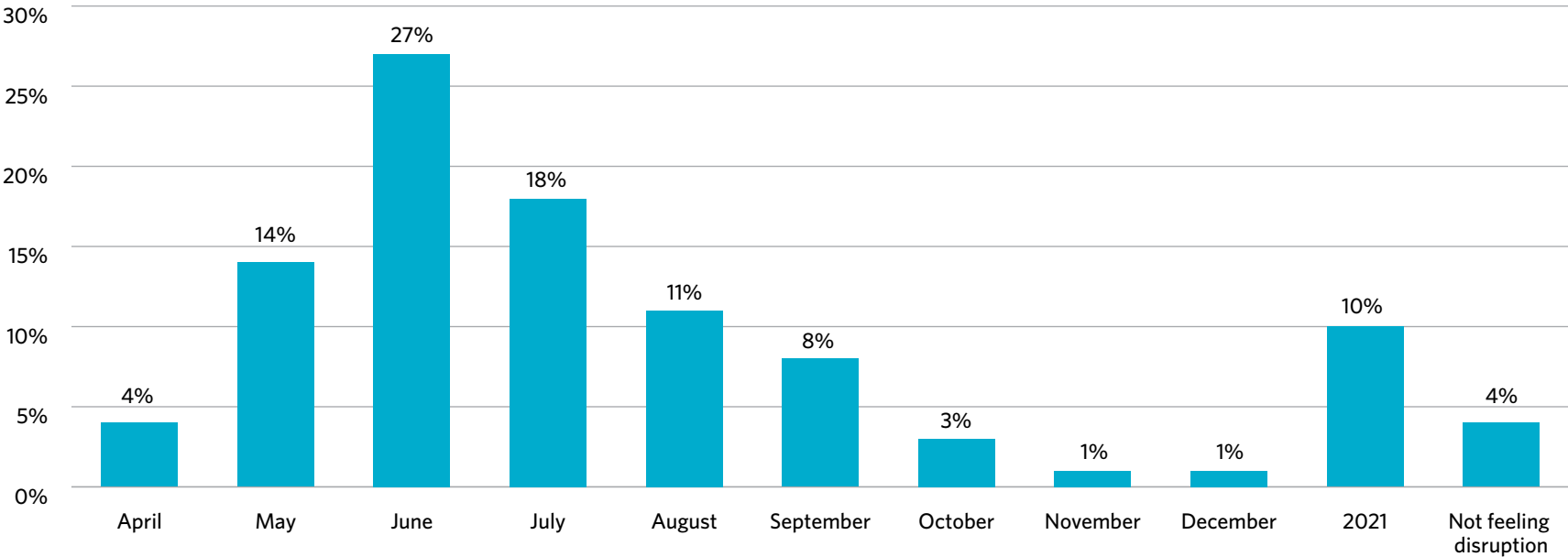


With respect to the COVID-19 pandemic, the most prevalent concern, and the top concern impacting mental health, is related to finances. Fear of the death of a loved one, fear of getting ill, concern regarding the impact of the pandemic on family/relationships, and work strain/overwork due to the pandemic, follow.

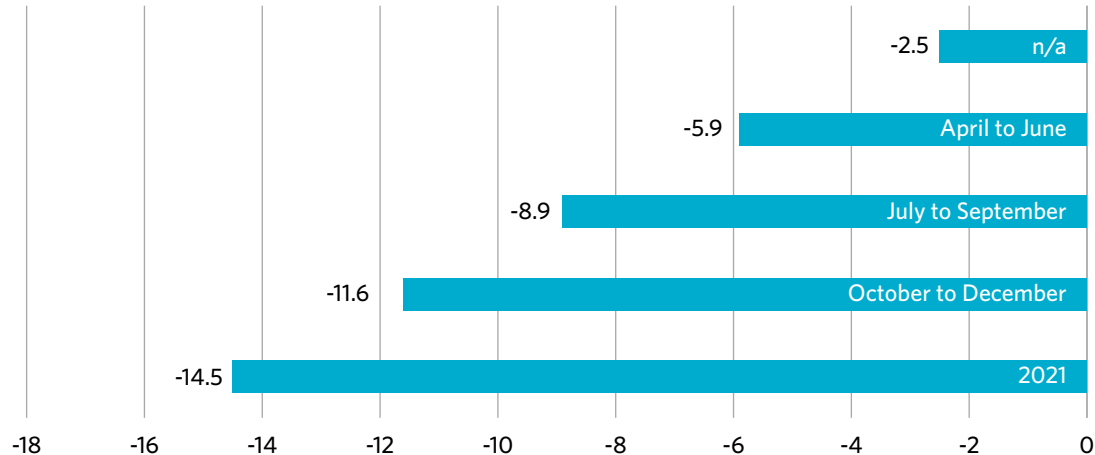
When considering the number one concern, fear of the death of a loved one is a greater concern than finances.



Belief: When the personal disruption from the pandemic will be over



Mental Health Index™ by expected end of disruption



As of April 2020, the most prevalent belief is that the personal disruption as a result of the pandemic, will last until June 2020. The longer the disruption is believed to last, the lower the Mental Health Index™ score.

[The full MHI report](#)
[Regional Comparison](#)

For a comparison of MHI for Australia, Canada, the United Kingdom and the United States, click the button.



Implications

The current scores for The Mental Health Index™ is a clear warning regarding the mental health impact of the pandemic. The Index shows a significant decrease in the mental health of Americans. We also see a significant increase in mental stress compared to the prior month and a definitive link to issues related to the COVID-19 pandemic. While the physical health risk of COVID-19 is the focus of much attention, the mental health impact requires similar attention and action. Well after the risk of infection reduces, the mental health impact may remain. This has implications for the quality of life of individuals, the stability of families, the risk of health and disability costs for organizations as well as the level of participation in the economy, which is a concern for government, given its impact on the speed of economic recovery.

To address this situation, action is required on at least three levels:

- **Individuals** need to attend to the impact of the pandemic on their mental health. While some strain would be expected as a result of such a massive change, feeling overwhelmed and unable to cope, or feeling stuck and unable to adapt, are clear warning signs requiring support from a trusted confidante or a counselling professional.
- **Business** needs to attend to the risk among employees. The Mental Health Index™ measures the mental health risk and status of the working population. The current scores suggest a risk to the longer-term well-being of employees, which may impact business productivity, health costs and disability absence. Business would do well to increase the focus on mental health through communication that increases the awareness of mental health warning signs, campaigns to reduce the stigma of seeking mental health support, and the promotion of health plan and public resources.
- **Governments** need to attend to the mental health of the population. A population under strain is less likely to participate fully in the economy. The current focus on health and safety needs to expand to include a significant focus on mental health. This should include clear messages regarding coping strategies and the promotion of public resources.

The Mental Health Index™ is published monthly, and measures trends over time.

Morneau Shepell is the leading provider of technology-enabled HR services that deliver an integrated approach to employee well-being through our cloud-based platform. Our focus is providing world-class solutions to our clients to support the mental, physical, social and financial well-being of their people. By improving lives, we improve business. Our approach spans services in employee and family assistance, health and wellness, recognition, pension and benefits administration, retirement consulting, actuarial and investment services. Morneau Shepell employs approximately 6,000 employees who work with some 24,000 client organizations that use our services in 162 countries. Morneau Shepell is a publicly traded company on the Toronto Stock Exchange (TSX: MSI).



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