

The Mental Health Index by LifeWorks™

Special edition:
Spotlight on addictions

Australia | May 2021



Table of contents

1	May 2021 highlights	3			
	Nearly one-third of Australians that use alcohol have increased their consumption since the pandemic	3			
2	The Mental Health Index™	6			
	Mental Health Index™ sub-scores	7			
	Optimism	8			
	General psychological health	9			
	Financial risk	10			
3	Mental Health Index™ (regional)	11			
	Demographics	12			
	Employment	12			
	Emergency savings	12			
4	Mental Health Index™ (industry)	14			
5	The Mental Stress Change score	15			
6	Mental Stress Change (percentages)	16			
	Demographics	17			
	Geography	17			
	Employment	17			
7	The Mental Stress Change (industry)	19			
8	Spotlight	20			
	Substance use	20			
	Effect of the COVID-19 pandemic on substance use	27			
	Treatment for substance use	29			
	Impact on work and personal life	32			
	Spending on drugs or alcohol	35			
	Reasons for alcohol or drug use	37			
	Reducing substance use	38			
	Employer resources for substance abuse	40			
	Concern about drinking or drug use of someone in the household	41			
9	Overview of the Mental Health Index by LifeWorks™	42			
	Methodology	42			
	Calculations	42			
	Additional data and analyses	42			

May 2021 highlights

Key insight: Nearly one-third of Australians that use alcohol have increased their consumption since the pandemic

The May 2021 Mental Health Index report is a special issue, focusing on substance use.

Drug use among Australians has increased since the pandemic

- More than one-quarter (26%) of Australians report an increase in drug use since the onset of the pandemic and this group is among those with the least favourable mental health score (-29.5) as well as the least favourable isolation score (-40.7).
- Nearly half (48 per cent) would prefer to use drugs less than they currently do.
- One-third (33 per cent) would prefer to use drugs less than they currently do.

Substance use affects both job and home-related tasks and responsibilities

- More than one in five (21%) indicate that alcohol or drugs have made it difficult to complete job-related tasks and responsibilities.
- People who use medications more than prescribed are nearly six times more likely to report difficulty completing job-related tasks and responsibilities at least once per week than those who use their medication as prescribed.

Nearly one-third of Australians that use alcohol have increased their consumption since the pandemic

- Nearly one-third (28 per cent) of alcohol users have increased their consumption since the onset of the pandemic and this group is among those with the least favourable mental health score (-22.7) as well as the least favourable isolation score (-27.2).
- 10% of alcohol users consume 15 or more drinks per week compared to 2% in the pre-2020 benchmark.
- Nearly one-third (30 per cent) would prefer to drink less than they currently do.
- Household income is strongly related to alcohol use: 36% of households with an income of less than \$30,000 report using alcohol at least once per week compared to 54% of households with an income of more than \$150,000.
- People without emergency savings are more than twice as likely to report that their drinking has increased compared to those with emergency savings.

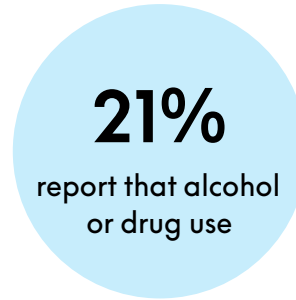
- 14% miss work or call in sick at least once per week due to alcohol or drug use.
- People missing work due to substance use have significantly lower mental health scores than those who do not miss work.

Full-time post-secondary students continue to struggle

- For the fifth consecutive month, full-time post-secondary students have the lowest mental health score (-19.8).
- Students are nearly two and one-half times more likely than non-students to regularly use more medication than prescribed or to use in ways that are not prescribed.
- Students using drugs or alcohol are twice as likely to report getting treatment for an alcohol or drug problem than non-students.

Parents report more substance use than non-parents and indicate an impact on their work and home lives

- Parents are nearly twice as likely as non-parents to use medical cannabis, recreational cannabis, and to vape than those who are not parents.
- Parents are two and one-half times more likely than non-parents to report regularly using more prescription drugs than prescribed.
- Parents are twice as likely as non-parents to report an increase in drug use.
- Parents using drugs or alcohol are nearly three times more likely than non-parents to report getting treatment for an alcohol or drug problem.



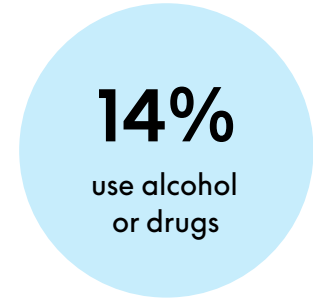
has had a negative
impact on their job



on drugs or alcohol



once per week due to
alcohol or drug use



because of stress over
money/finances

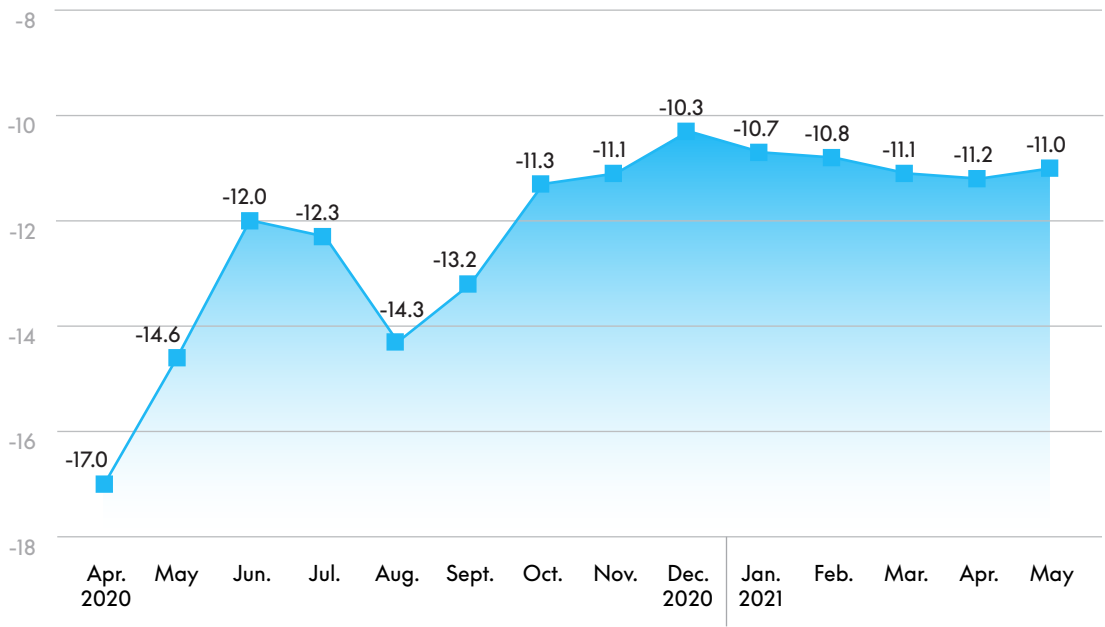
- Parents who report using drugs or alcohol are nearly four times as likely than non-parents to report calling in sick or being unable to go to work because of alcohol or drug use.
- Parents using drugs or alcohol are more than three times as likely than non-parents to report that alcohol or drug use has made it difficult to complete home or family-related tasks and responsibilities.
- Parents who report using drugs or alcohol are three times more likely than non-parents to report spending money on alcohol or drugs instead of needed items.
- Parents are twice as likely as non-parents to report concern about the drinking or drug use of someone else in their household than non-parents.

Support for substance use

- Among people who report receiving treatment, 33% report using their employer's insurance program to get their treatment, followed by 20% using the Employee Assistance Program (EAP), and 16% using a private rehabilitation program.
- More than one-third do not know whether their employer offers any resources and a further twelve per cent think that their employer does but are not sure what is offered.

The Mental Health Index™

The Mental Health Index (MHI) is a measure of deviation from the benchmark¹ of mental health and risk. **The overall Mental Health Index for May 2021 is -11.2 points.** An 11-point decrease from the pre-COVID-19 benchmark reflects a population whose mental health is similar to the most distressed one per cent of the benchmark population.



¹ The benchmark reflects data collected in 2017, 2018 and 2019.

MHI Current Month
May 2021

-11.0

April 2021

-11.2

Mental Health Index™ sub-scores

The lowest Mental Health Index™ sub-score is for the risk measure of depression (-11.8), followed by anxiety (-11.7), work productivity (-11.6), isolation (-11.5), optimism (-11.1), and general psychological health (-4.4). The best sub-score, and the only measure above the benchmark is financial risk (1.6).

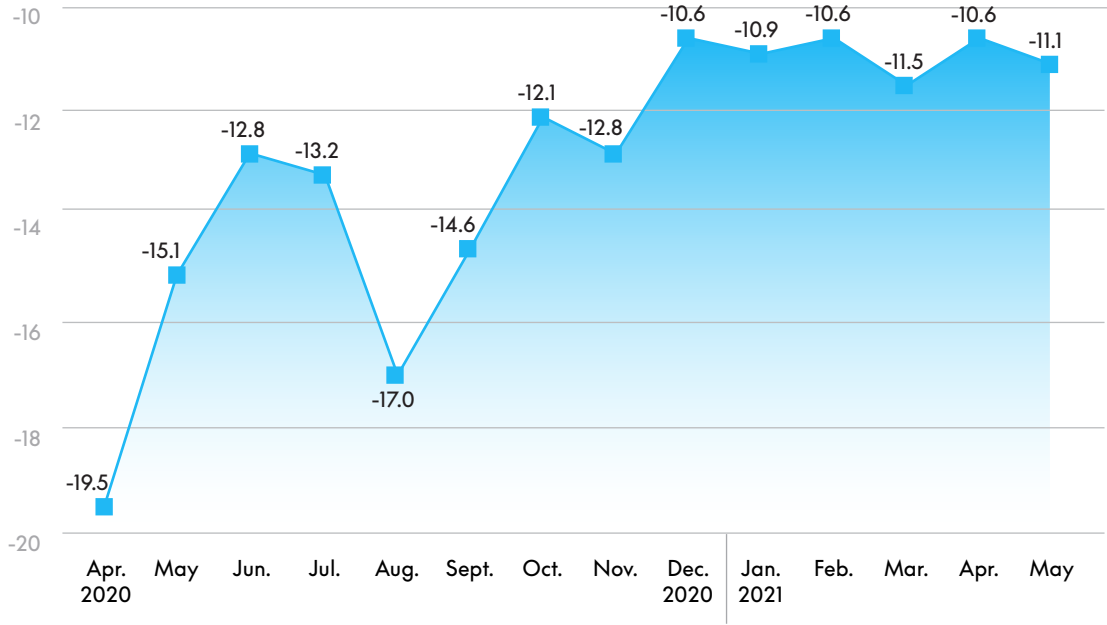
- Depression, optimism, and work productivity scores declined from April 2021 results.
- With a 1.2-points increase, the isolation score has the greatest improvement from the prior month.
- The financial risk score remains equal to April 2021 with a score of 1.6 points; it continues to be above the pre-2020 benchmark.

Mental Health Index™ Sub-scores ² 2021	May	April
Depression	-11.8	-11.5
Anxiety	-11.7	-12.2
Work productivity	-11.6	-10.7
Isolation	-11.5	-12.6
Optimism	-11.1	-10.6
Psychological health	-4.4	-4.9
Financial risk	1.6	1.6

² The demographic breakdown of sub-scores is available upon request.

Optimism

Similar to other mental health sub-scale scores, optimism scores from April to June 2020 improved. Following declines in July and August 2020, improvement reached a peak in December 2020 (-10.6). Despite stable scores from December to April 2021, the optimism score remains 11-points below the pre-2020 benchmark.

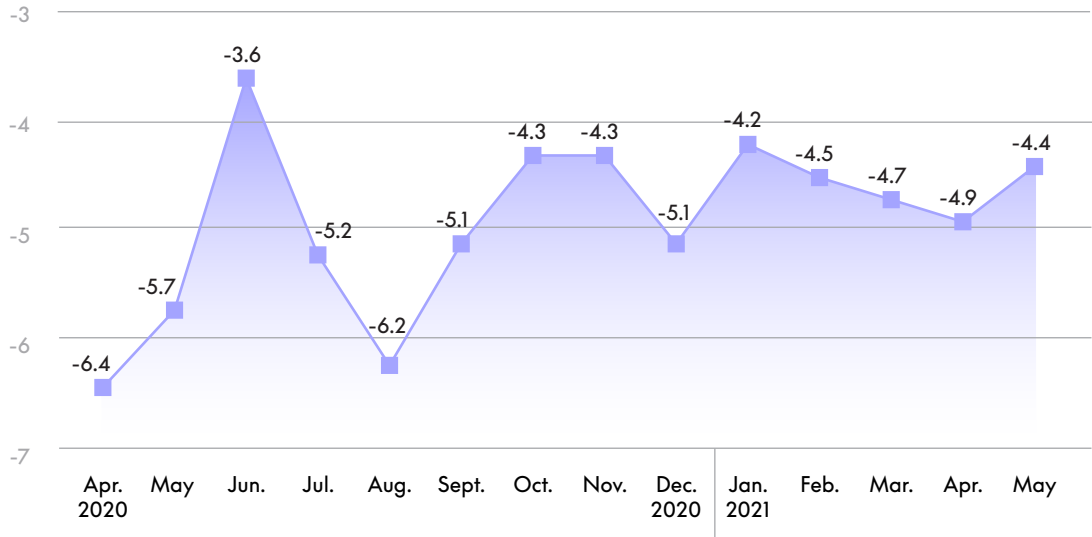


General psychological health

Early in the pandemic, psychological health shifted upwards and downwards several times.

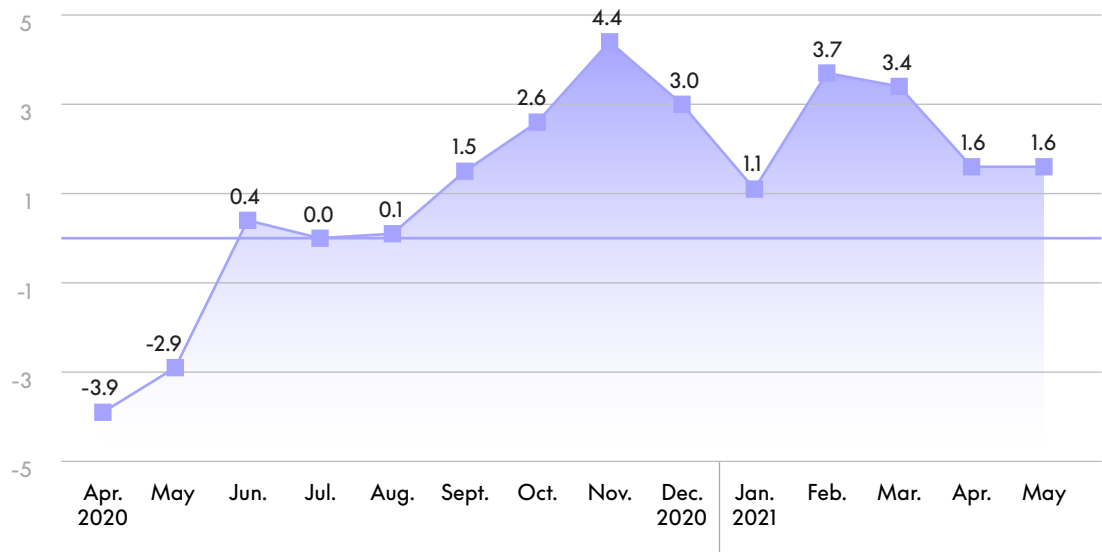
More recently, there has been a slightly decreasing trend in psychological health from January 2021 to April 2021. In May, there was an improvement in psychological health bringing the score to -4.4.

Despite periodic improvements in June 2020, October 2020 and January 2021, the psychological health of Australians has been strained. After three months of decline, from February to April 2021, the psychological health improved modestly but remains more than 4-points below the pre-2020 benchmark.



Financial risk

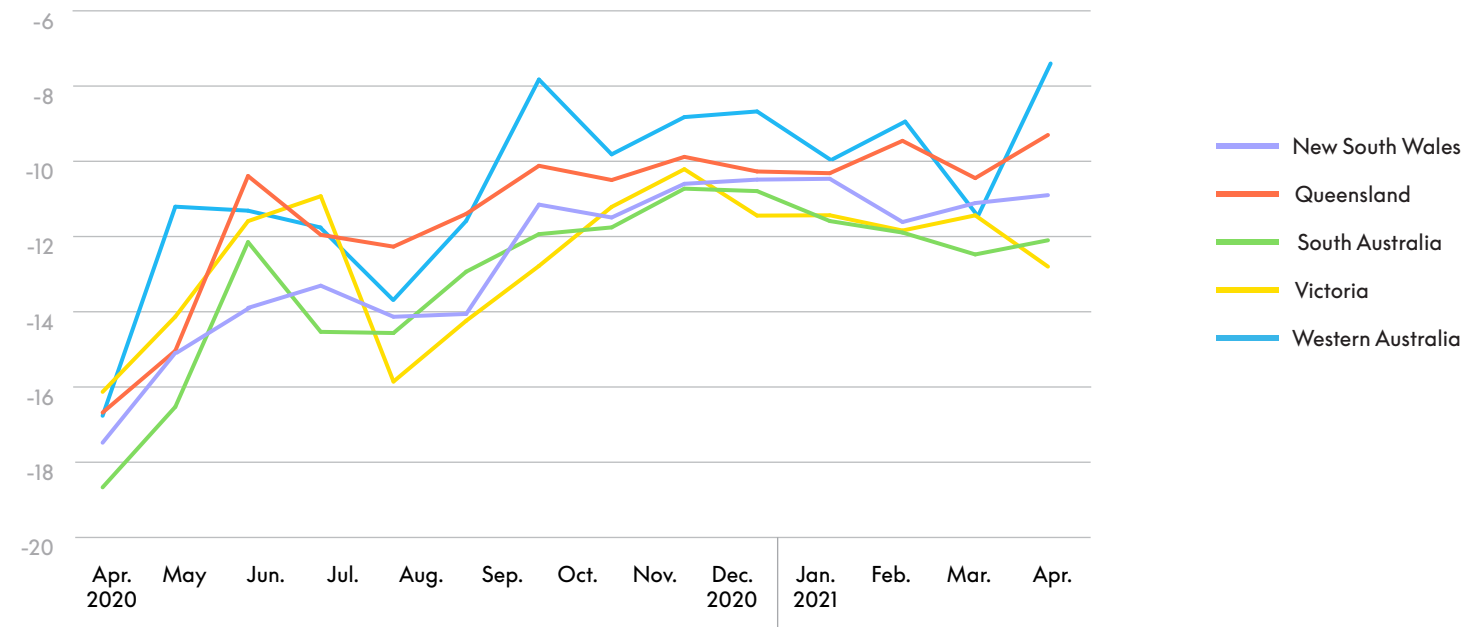
The financial risk continues to be the strongest sub-scale despite a significant decline from November 2020 to January 2021. With a 2.7-point increase, the financial risk score in February 2021 had the greatest improvement from the prior month. However, a slight decline in financial risk score is observed in March 2021 (3.4) followed by a more significant decline in April 2021 (1.6). The financial risk score in May 2021 remains unchanged from the prior month. Overall, financial risk has improved 5.5 points since April 2020 and remains above the pre-2020 benchmark.



Mental Health Index™ (regional)

State mental health scores since April 2020 showed general improvement through July; however, all Australian regions showed declines from July to August 2020. Mental health scores across all regions showed a general increase in September but since October, scores by state have fluctuated between -12.0 and -9.0.

- With a 4.0-point increase in May, the strongest mental health scores are observed in Western Australia.
- Driven by a 1.3-point decrease from April to May, Victoria has the lowest mental health score (-12.8).



Demographics

- Since the start of the MHI, women have had a significantly lower mental health score than men. In May 2021, the mental health score of women is -13.3 compared to -7.8 for men.
- In each of the past fourteen months, mental health scores have improved with age.
- Differences in mental health scores between people with and without children have been seen since the launch of the Index in April 2020. More than one year later, this pattern continues with a lower score for those with at least one child (-12.0) compared to those without children (-10.4).

Employment

- Overall, eight per cent of respondents are unemployed³ and fourteen per cent report reduced hours or reduced salary.
- Individuals reporting reduced salary compared to the prior month have the lowest mental health score (-25.7), followed by those reporting fewer hours than the prior month (-19.7) and those not currently employed (-18.3).
- Managers have a lower mental health score (-10.8) than non-managers (-10.3).
- Individuals working for organizations with 5,001-10,000 employees have the highest mental health score (-6.4).
- Respondents working for companies with 51-100 employees have the lowest mental health score (-15.4).

Emergency savings

- People without emergency savings continue to experience a lower score in mental health (-24.5) than the overall group. Individuals with emergency savings have a mental health score of -5.5.

3 MHI respondents who have been employed in the past six months are included in the poll.

Employment status	May 2021	April 2021
Employed (no change in hours/salary)	-8.4	-8.6
Employed (fewer hours compared to last month)	-19.7	-17.6
Employed (reduced salary compared to last month)	-25.7	-24.9
Not currently employed	-18.3	-20.7
Age group	May 2021	April 2021
Age 20-29	-18.7	-19.9
Age 30-39	-15.4	-15.0
Age 40-49	-11.8	-11.5
Age 50-59	-7.7	-7.8
Age 60-69	-3.0	-2.9
Number of children	May 2021	April 2021
No children in household	-10.4	-10.8
1 child	-12.0	-11.3
2 children	-12.0	-12.7
3 children or more	-11.9	-11.3

Region	May 2021	April 2021
New South Wales	-10.9	-11.1
Victoria	-12.8	-11.4
Queensland	-9.3	-10.4
South Australia	-12.1	-12.5
Western Australia	-7.4	-11.5
Gender	May 2021	April 2021
Men	-7.8	-8.7
Women	-13.3	-13.1
Household income	May 2021	April 2021
<\$30K/annum	-26.4	-26.3
\$30K to <\$60K/annum	-15.1	-13.2
\$60K to <\$100K	-13.7	-15.0
\$100K to <\$150K	-6.7	-6.9
\$150K or more	-3.3	-3.8

Employer size	May 2021	April 2021
Self-employed/sole proprietor	-11.1	-10.6
2-50 employees	-10.5	-9.9
51-100 employees	-15.4	-16.1
101-500 employees	-8.9	-8.8
501-1,000 employees	-11.4	-12.3
1,001-5,000 employees	-8.9	-10.3
5,001-10,000 employees	-6.4	-6.0
More than 10,000 employees	-7.2	-9.2
Manager	May 2021	April 2021
Manager	-10.8	-9.4
Non-manager	-10.3	-11.3

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:

Specific cross-correlational and custom analyses

Mental Health Index™ (industry)

For the fifth consecutive month, full-time post-secondary students have the lowest mental health score (-19.8). This score continues to be significantly lower than the next lowest score: individuals in Wholesale Trade (-16.2).

Individuals employed in Public Administration (-4.8), Finance and Insurance (-5.9), and Administrative and Support services (-7.9) have the highest mental health scores this month.

Individuals employed in Arts, Entertainment and Recreation, Transportation and Warehousing, and Finance and Insurance have seen the greatest improvement in mental health since last month.

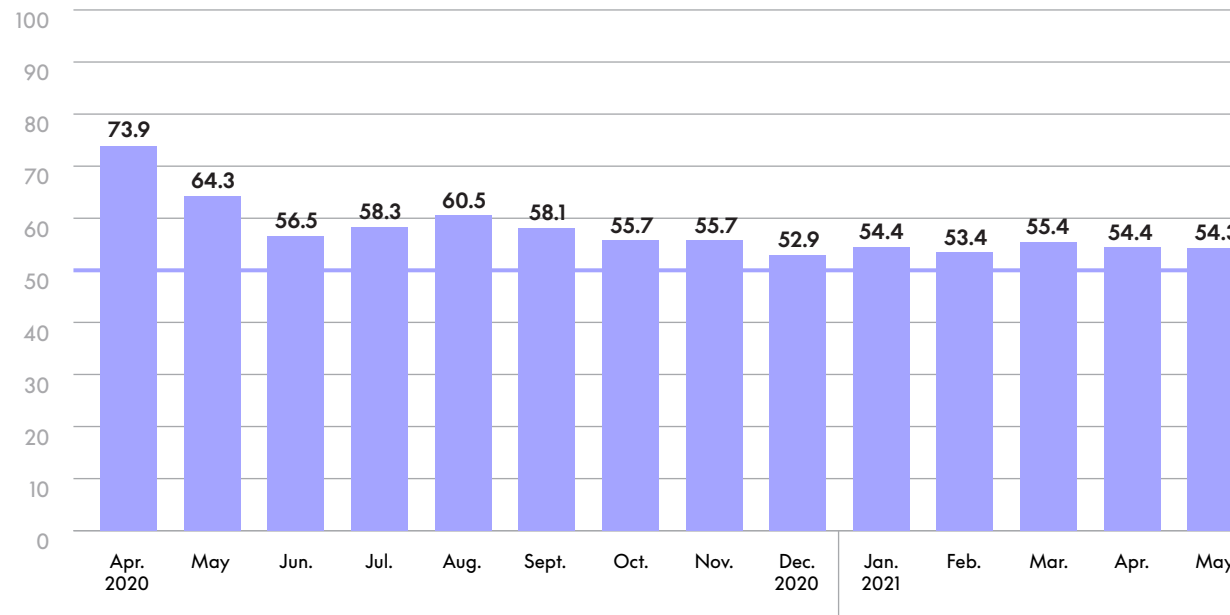
Changes from the prior month are shown in the table.

Industry	May 2021	April 2021	Change
Arts, Entertainment and Recreation	-12.0	-18.4	6.4
Transportation and Warehousing	-9.1	-14	5.0
Finance and Insurance	-5.9	-9.5	3.6
Public Administration	-4.8	-8.0	3.2
Wholesale Trade	-16.2	-18.5	2.3
Administrative and Support services	-7.9	-9.3	1.5
Retail Trade	-13.4	-14.1	0.7
I am a student	-19.8	-20.2	0.4
Food Services	-12.0	-12.0	0.0
Educational Services	-11.8	-11.4	-0.4
Health Care and Social Assistance	-9.1	-8.7	-0.5
Construction	-10.3	-9.3	-1.1
Other	-14.3	-12.8	-1.6
Manufacturing	-12.2	-10.1	-2.1
Professional, Scientific and Technical Services	-11.6	-8.2	-3.4

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. **The Mental Stress Change score for May 2021 is 54.3.** This reflects a net increase in mental stress compared to the prior month.

The current score indicates that 17 per cent of the population is experiencing more mental stress compared to the prior month, with 9 per cent experiencing less. A continued increase in mental stress since April 2020 indicates a significant accumulation of strain in the Australian population.



- ▲ More mental stress
- 50 = No change from prior month
- ▼ Less mental stress

MStressChg Current
Month—May 2021

54.3

MStressChg
April 2021

54.4

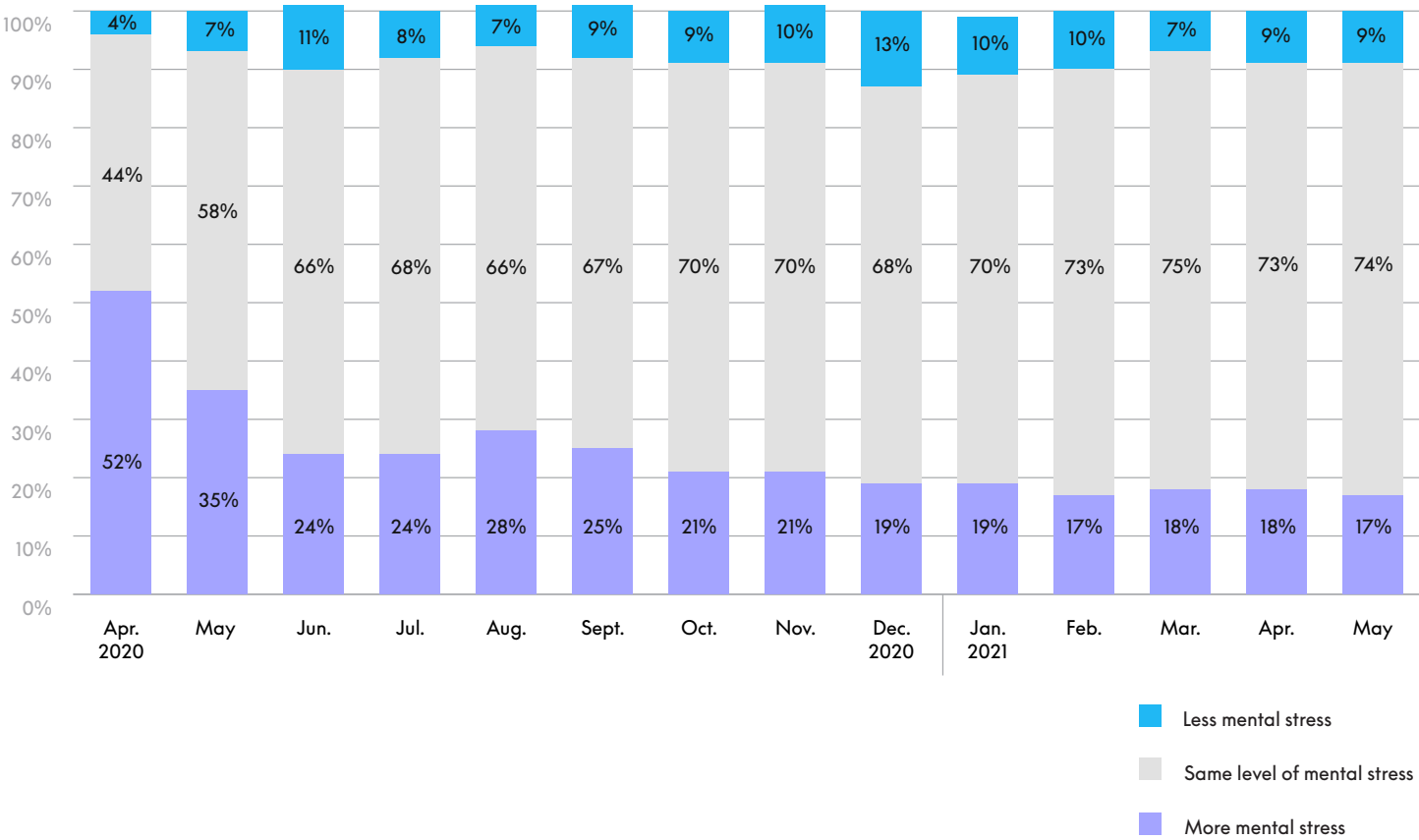
Mental Stress Change (percentages)

Mental Stress Change tracks stress changes each month. The percentages of those experiencing more stress, the same level of stress, and less stress for each month of the survey are shown in the graph.

For more than one year, the percentage of those experiencing more mental stress than the previous month has steadily decreased; however, the data showing this decline is too insignificant to lower the overall Mental Stress Change score to below 50 (the level at which stress is lower than the previous month). As the proportion of individuals reporting the same level of stress or more stress than the previous month continues to outweigh the proportion reporting less mental stress, the population will continue to feel the effects of significantly increased stress and will not be able to reach a more sustainable and healthy level of stress.

In April 2020, 52 per cent of individuals reported an increase in mental stress. Those reporting increased month-over-month mental stress reduced to 17 per cent in May 2021, while 74 per cent of respondents report the same level of mental stress and only 9 per cent report a decrease in mental stress.

Mental Stress Change by month



Demographics

- Since the start of the MHI in April 2020, younger people are experiencing a greater increase in mental stress month over month, when compared to older respondents.
- Since April 2020, females have had larger increases in mental stress compared with males. In May 2021, the mental stress change score of women is 54.7 compared to 53.6 for men.

Geography

- The greatest increase in month-over-month stress is for respondents living in Victoria (55.3), followed by Queensland (54.8), New South Wales (54.2), and South Australia (53.2).
- Respondents living in Western Australia, where the increase in mental stress was less, still had a relevant increase.

Employment

- The greatest increase in mental stress is seen in employed people with reduced salary (66.7), followed by employed people with reduced hours (62.7), unemployed people (53.9), and employed people with no change to salary or hours (52.6).
- Managers have a greater increase in mental stress (56.3) than non-managers (52.7).

Employment status	May 2021	April 2021
Employed (no change in hours/salary)	52.6	53.0
Employed (fewer hours compared to last month)	62.7	59.6
Employed (reduced salary compared to last month)	66.7	63.4
Not currently employed	53.9	54.7
Age group	May 2021	April 2021
Age 20-29	56.6	58.2
Age 30-39	57.6	56.1
Age 40-49	54.6	56.1
Age 50-59	51.3	50.7
Age 60-69	51.1	51.2
Number of children	May 2021	April 2021
No children in household	53.2	52.9
1 child	55.7	55.9
2 children	56.1	57.1
3 children or more	57.1	59.4

Region	May 2021	April 2021
New South Wales	54.2	54.5
Victoria	55.3	53.4
Queensland	54.8	53.5
South Australia	53.2	57.4
Western Australia	51.1	55.3
Gender	May 2021	April 2021
Men	53.6	52.8
Women	54.7	55.5
Household income	May 2021	April 2021
<\$30K/annum	60.4	56.5
\$30K to <\$60K/annum	53.9	57.3
\$60K to <\$100K	55.7	55.9
\$100K to <\$150K	53.6	54.1
\$150K or more	52.4	50.0

Employer size	May 2021	April 2021
Self-employed/sole proprietor	58.2	54.6
2-50 employees	52.7	54.8
51-100 employees	55.7	55.7
101-500 employees	51.9	55.6
501-1,000 employees	52.2	51.3
1,001-5,000 employees	57.2	52.7
5,001-10,000 employees	56.7	50.9
More than 10,000 employees	52.8	55.5
Manager	May 2021	April 2021
Manager	56.3	56.2
Non-manager	52.7	53.3

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:

Specific cross-correlational and custom analyses

The Mental Stress Change (industry)

Mental Stress Change scores for individuals employed in Arts, Entertainment and Recreation (47.6), Administrative and Support services (48.3), and Transportation and Warehousing (49.0) are reporting less than the prior month.

Individuals working in Wholesale Trade have the most significant increase in mental stress (61.3), followed by individuals employed in Retail Trade (58.9), and Food Services (58.7).

Mental Stress changes from the last two months are shown in the table.

Industry	May 2021	April 2021
Arts, Entertainment and Recreation	47.6	62.0
Administrative and Support services	48.3	51.9
Transportation and Warehousing	49.0	53.5
Finance and Insurance	50.0	57.0
Construction	51.1	48.8
Health Care and Social Assistance	53.3	53.0
Educational Services	54.0	52.8
Public Administration	54.5	55.6
Professional, Scientific and Technical Services	55.7	55.7
Other	55.7	55.4
Manufacturing	56.5	49.2
I am a student	57.4	54.5
Food Services	58.7	51.7
Retail Trade	58.9	57.5
Wholesale Trade	61.3	60.3

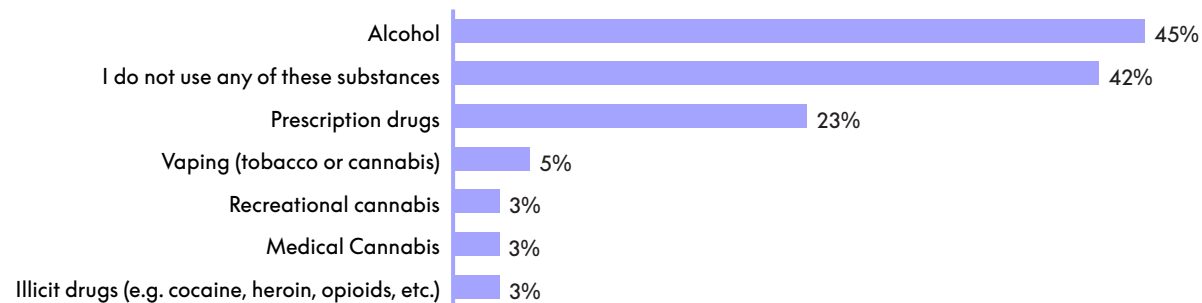
Spotlight

Substance use

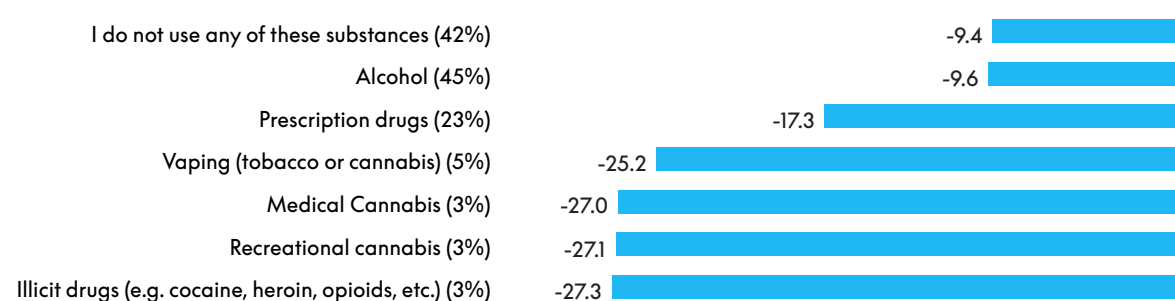
The COVID-19 pandemic impact on mental health has been definitively shown by the Mental Health Index. For this month's report, respondents were asked about their substance use since the onset of the pandemic.

- Nearly half (45 per cent) of people use alcohol at least once every week (occasional drinkers are not considered in this proportion), twenty-three per cent use prescription drugs, five per cent vape, and three per cent each use medical and recreational cannabis.
- Forty-two per cent report not using any substances and this group has the highest mental health score (-9.4).
- Household income is strongly related to alcohol use. Thirty-six per cent of households with an income of less than \$30,000 report using alcohol compared to fifty-four per cent of households with an income of more than \$150,000.
- Parents are nearly twice as likely to use medical cannabis, recreational cannabis, and to vape than to non-parents.
- Respondents between 30 and 59 are more than twice as likely to report using recreational cannabis compared to those under 30 or 60 and over.
- Managers are more than twice as likely as non-managers to use medical cannabis, recreational cannabis, or to vape.

Type of substances use



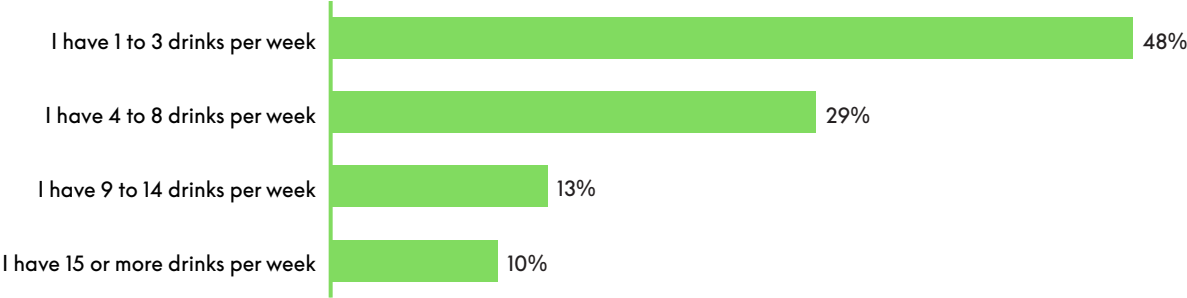
MHI score by type of substance use



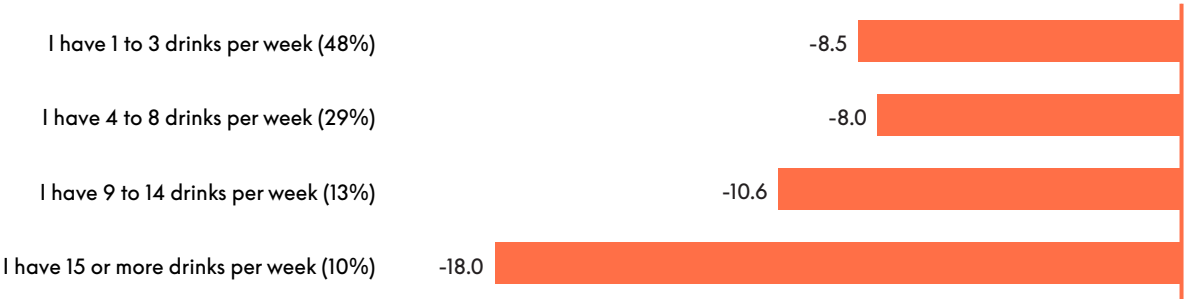
Alcohol use

- Nearly half (48 per cent) of the people who use alcohol consume 1 to 3 drinks per week.
- Ten per cent of people consume 15 or more drinks per week compared to 2% in the pre-2020 benchmark.
- The least favourable mental health score is among ten per cent of people who consume 15 or more drinks per week (-18.0).
- Men are nearly twice as likely as women to consume 9 or more drinks per week.
- Respondents over 40 are more than four times likely to consume 15 or more drinks per week than those under 40.

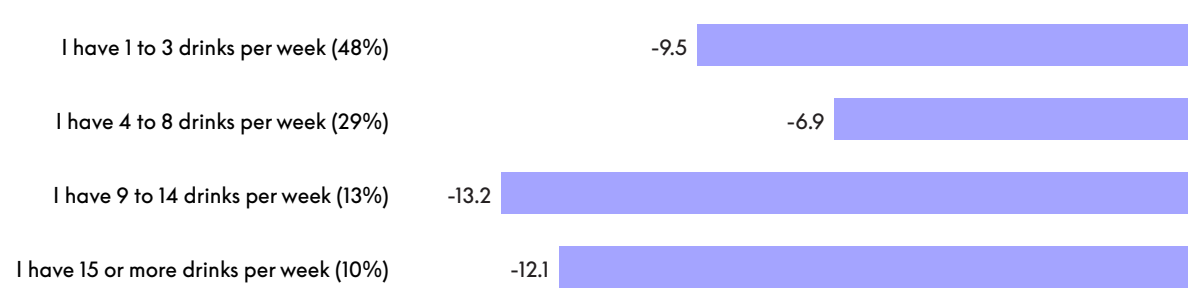
Number of alcoholic drinks consumed per week



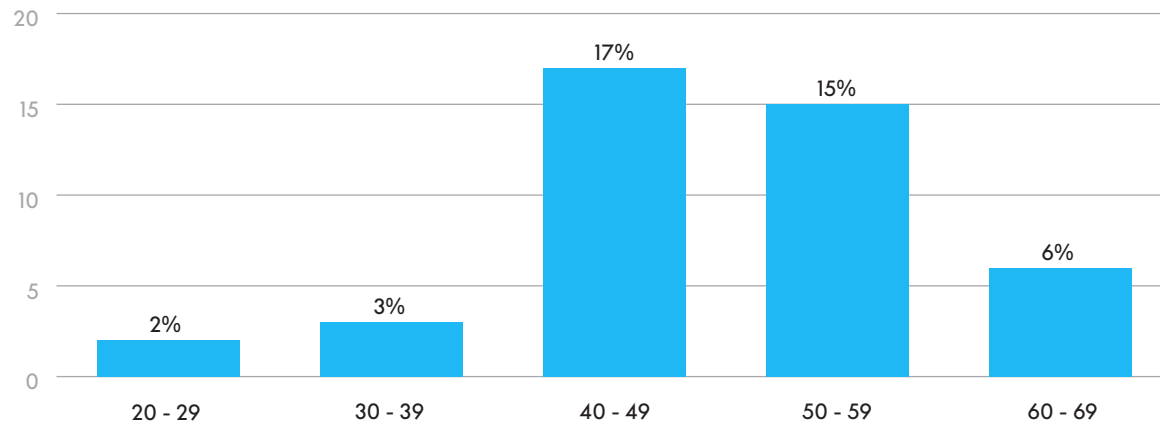
MHI score by number of alcoholic drinks consumed per week



Isolation score by number of alcoholic drinks consumed per week



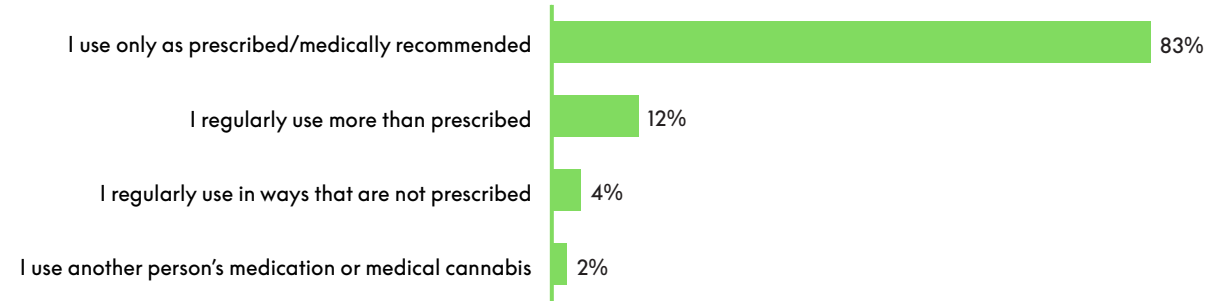
Consumption of 15 or more alcoholic drinks per week by age



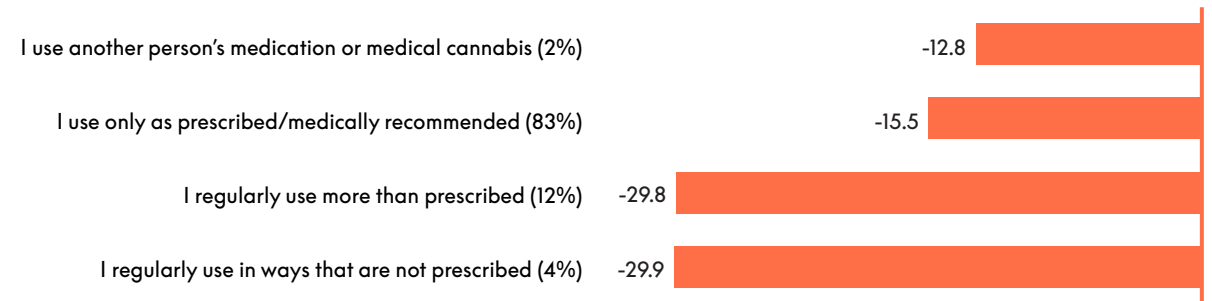
Prescription drugs and medical cannabis

- Eighty-three per cent of people use prescription drugs or medical cannabis as prescribed.
- Twelve per cent of people regularly use prescription drugs or medical cannabis more than prescribed and four per cent use these substances in ways that are not prescribed.
- Students are more than two and one-half times more likely than non-students to regularly use more than prescribed or to use in ways that are not prescribed.
- Parents are two and one-half times more likely than non-parents to report regularly using more than prescribed.

Use of prescription drugs or medical cannabis



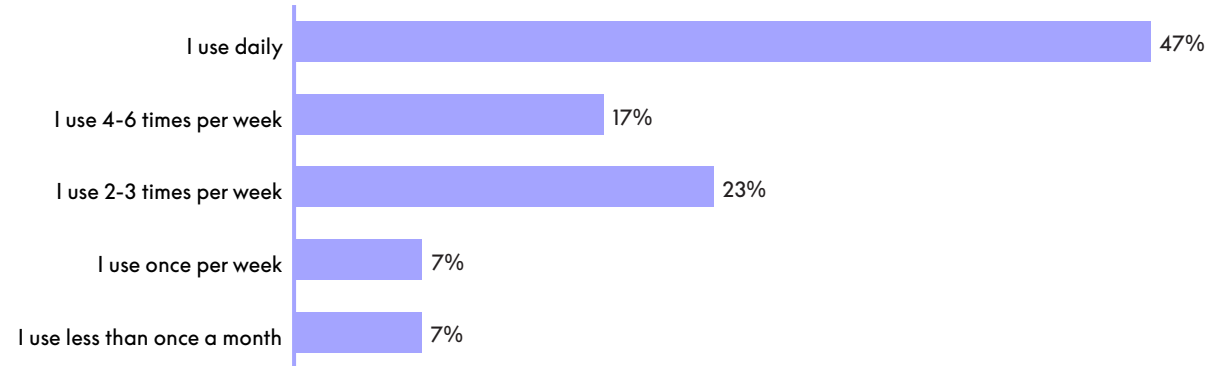
MHI score by use of prescription drugs or medical cannabis



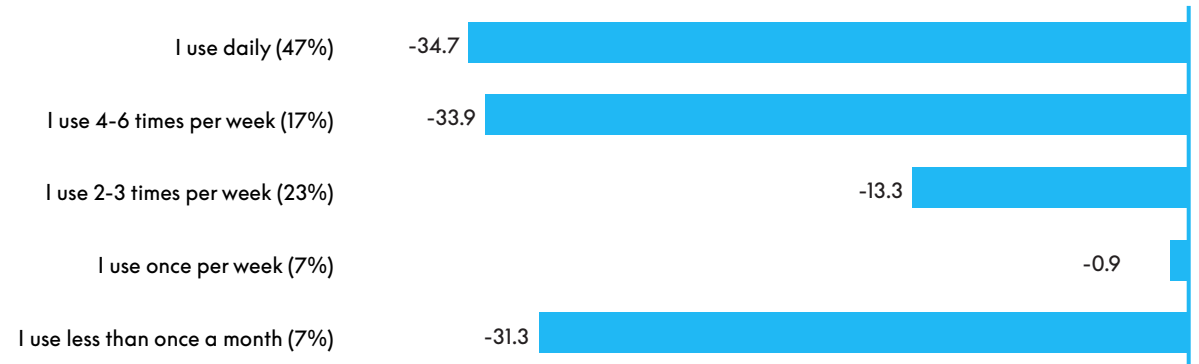
Recreational cannabis

- Among the three per cent of respondents who are recreational cannabis users, nearly half (47 per cent) report using recreational cannabis daily, followed by twenty-three per cent who use it 2-3 times per week, and seventeen per cent that use 4-6 times per week.
- The least favourable mental health score is among forty-seven per cent of people who use recreational cannabis daily (-20.4).

Use of recreational cannabis



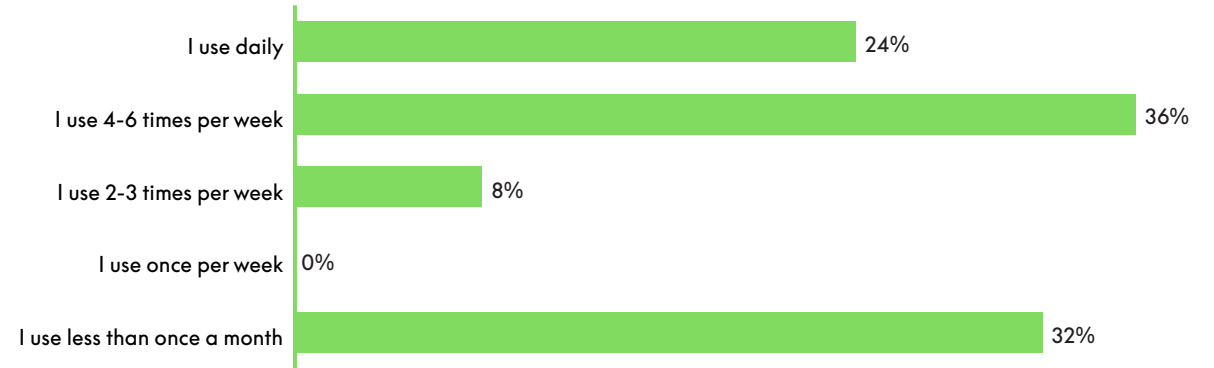
MHI score by use of recreational cannabis



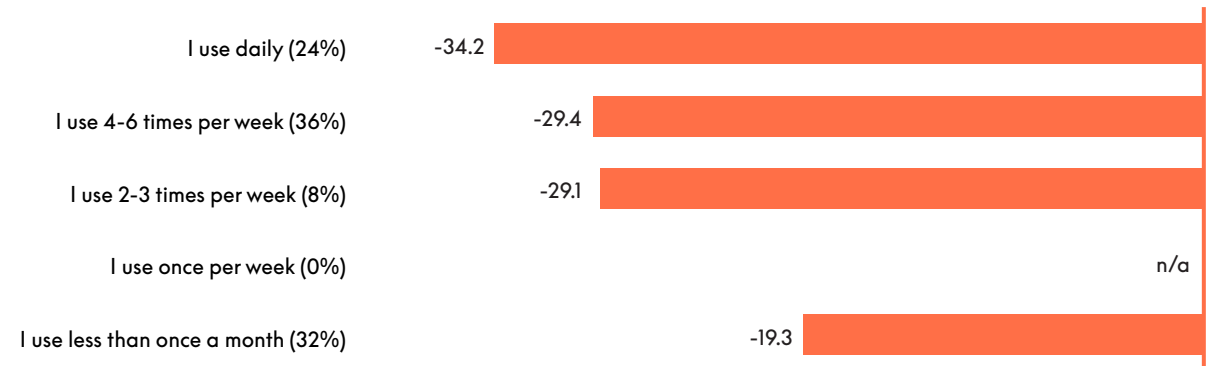
Illicit drugs

- Among the three per cent of respondents who report using illicit drugs, more than one-third (36 per cent) report using 4-6 times per week, thirty-two per cent use less than once per month and twenty-four per cent use daily.
- Nearly one-third report using illicit drugs less than once per month and while they have the most favourable mental health score (-19.3), it is more than eight points below the overall population (-11.0).
- Those who use illicit drugs daily have the worst mental health score (-34.2), more than twenty points below the overall average.

Use of illicit drugs



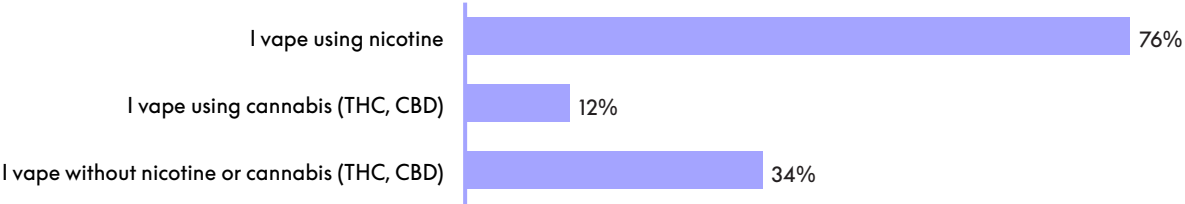
MHI score by use of illicit drugs



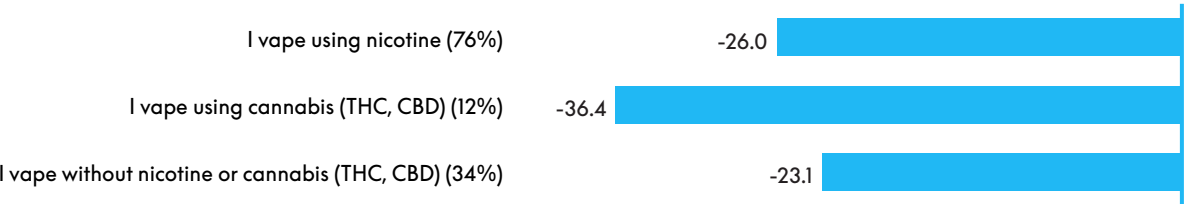
Vaping

- Five per cent report vaping.
- More than three-quarters (75%) vape nicotine, thirty-four per cent vape without nicotine or cannabis, and twelve per cent vape using cannabis.

Vape substance



MHI score by vape substance



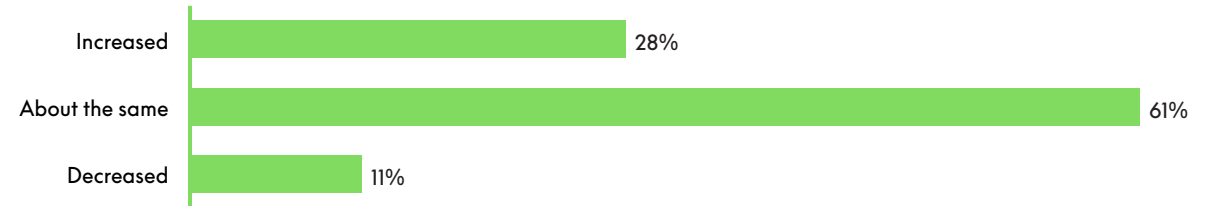
Effect of the COVID-19 pandemic on substance use

Change in alcohol use

Respondents who use alcohol were asked about how their alcohol use has changed since the onset of the pandemic.

- Nearly thirty per cent have increased their alcohol use since the onset of the pandemic and this group has the least favourable mental health score (-22.7) as well as the least favourable isolation score (-27.2). Both scores are significantly below the overall Australian mental health score for May 2021 (-11.0).
- Nearly two thirds (61 per cent) report that their alcohol use has not changed since the onset of pandemic and this group has the most favourable mental health score (-3.9).
- People without emergency savings are more than twice as likely than those with emergency savings to report that their drinking has increased.

Change in alcohol use since the onset of the pandemic



MHI score by change in alcohol use since the onset of the pandemic

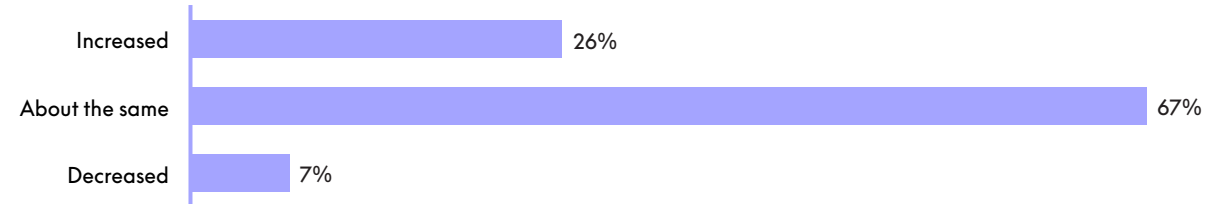


Change in drug use

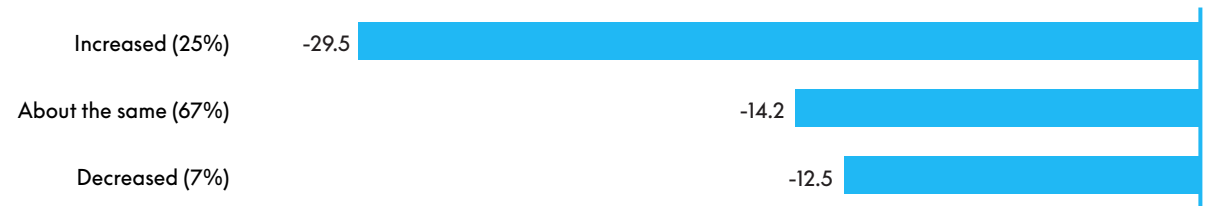
Respondents who use prescription drugs, recreational or medical cannabis, or illicit drugs were asked about how their drug use has changed since the onset of pandemic.

- More than one-quarter (26 per cent) report an increase in drug use since the onset of the pandemic and this group has the least favourable mental health score (-29.5) as well as the least favourable isolation score (-40.7).
- Two-thirds (67 per cent) report that their drug use has not changed since the onset of pandemic and this group has the most favourable mental health score (-14.2) apart from seven per cent of people reporting a decrease in their drug use (-12.5).
- Individuals working fewer hours or with reduced salary are twice as likely to report an increase in drug use compared to those with no change to salary or working hours.
- Parents are twice as likely to report an increase in drug use compared to non-parents.

Change in drug use since the onset of the pandemic



MHI score by change in drug use since the onset of the pandemic



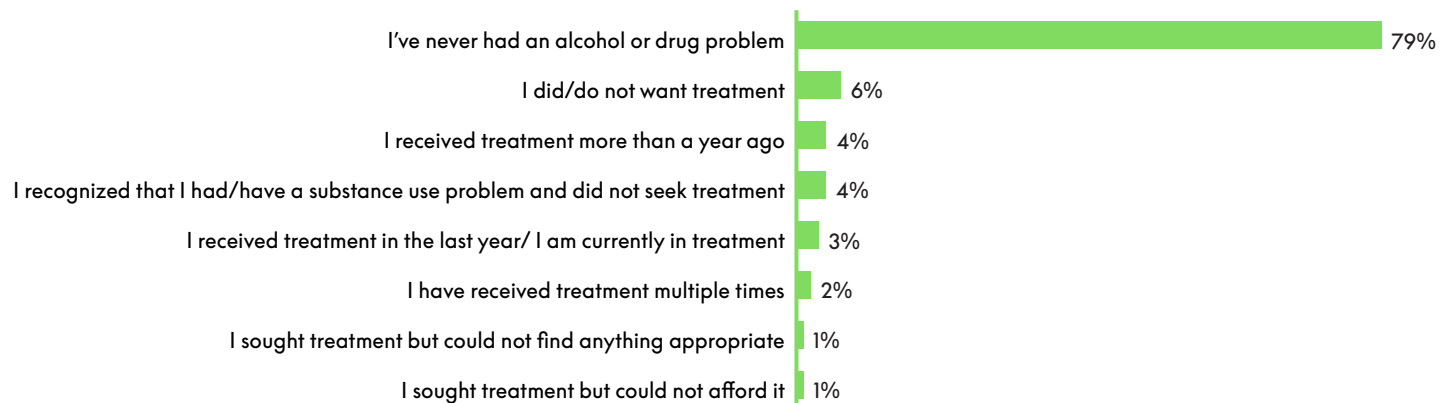
Treatment for substance use

Respondents were asked if they have sought or received treatment for substance use.

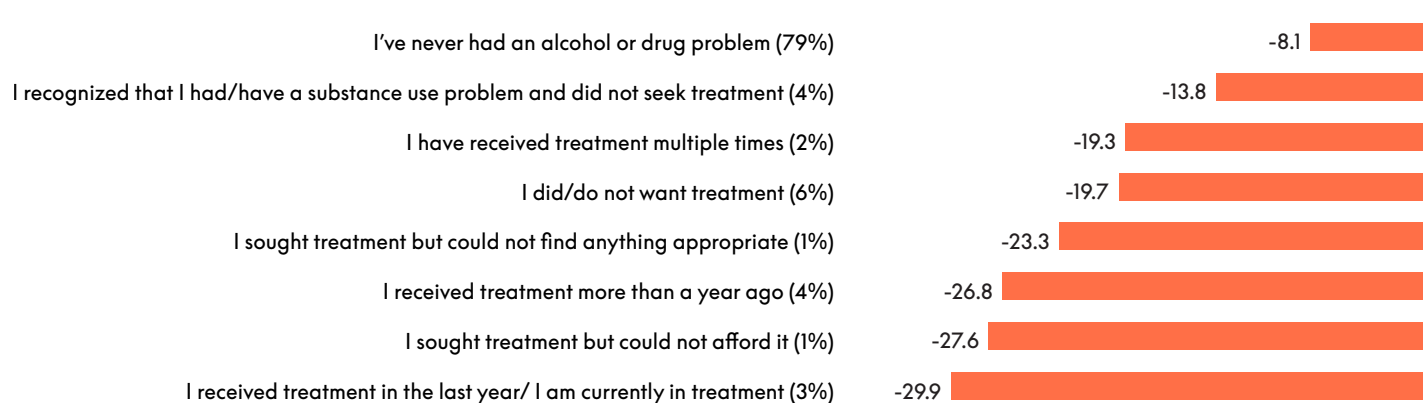
Treatment for alcohol/drug use

- Seventy-nine per cent of Australians report not having a drug or alcohol problem, and this group has the most favourable mental health score (-8.1).
- Six per cent do not want treatment and five per cent received treatment more than one year ago.
- The lowest mental health score is among three per cent of people who received treatment in the last year or who are currently in treatment (-29.9).
- Students using drugs or alcohol are twice as likely to report getting treatment for an alcohol or drug problem than non-students.
- Parents using drugs or alcohol are nearly three times more likely to report getting treatment for an alcohol or drug problem than non-parents.

Seeking or receiving treatment for an alcohol or drug problem



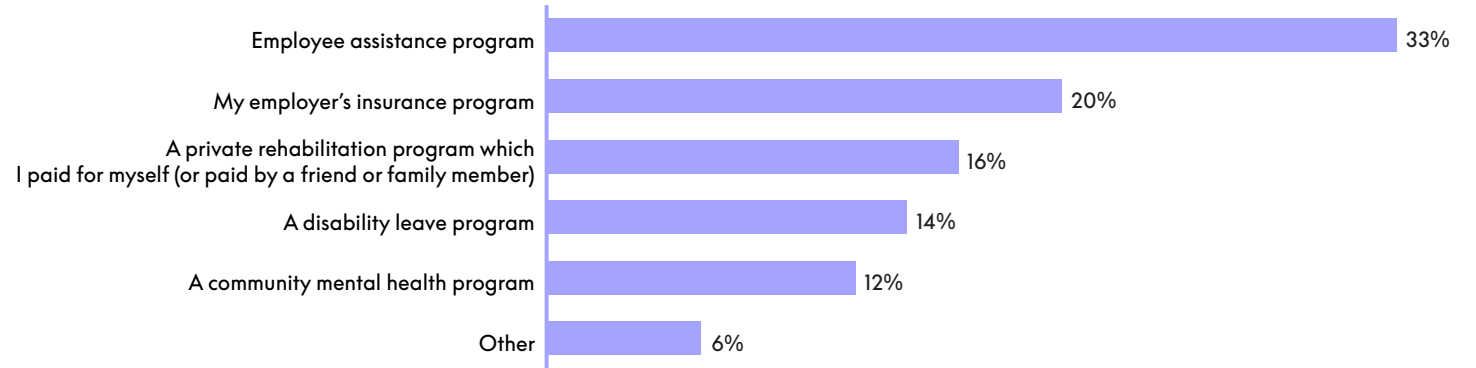
MHI score by seeking or receiving treatment for an alcohol or drug problem



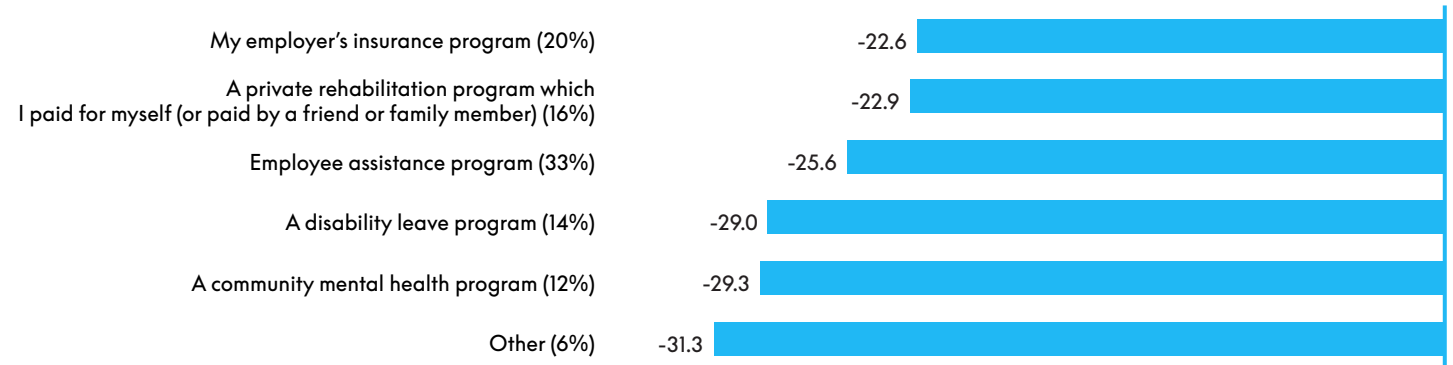
Source of most recent treatment

Among people who report receiving treatment, one-third report using their employer's insurance program to get their treatment, followed by twenty per cent using the Employee Assistance Program (EAP), and sixteen per cent using a private rehabilitation program.

Source of most recent treatment program



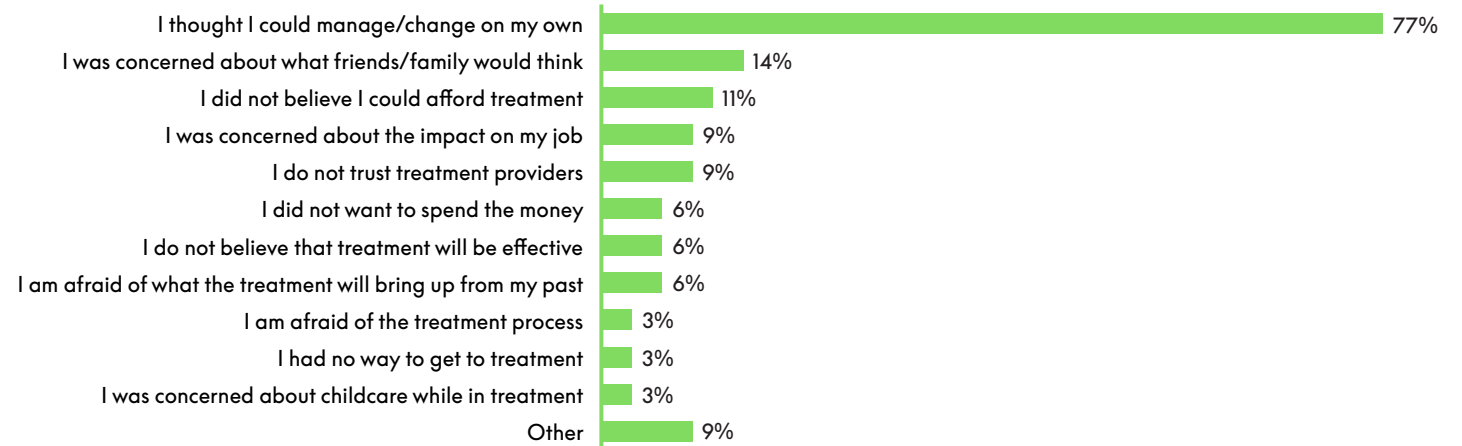
MHI score by source of most recent treatment program



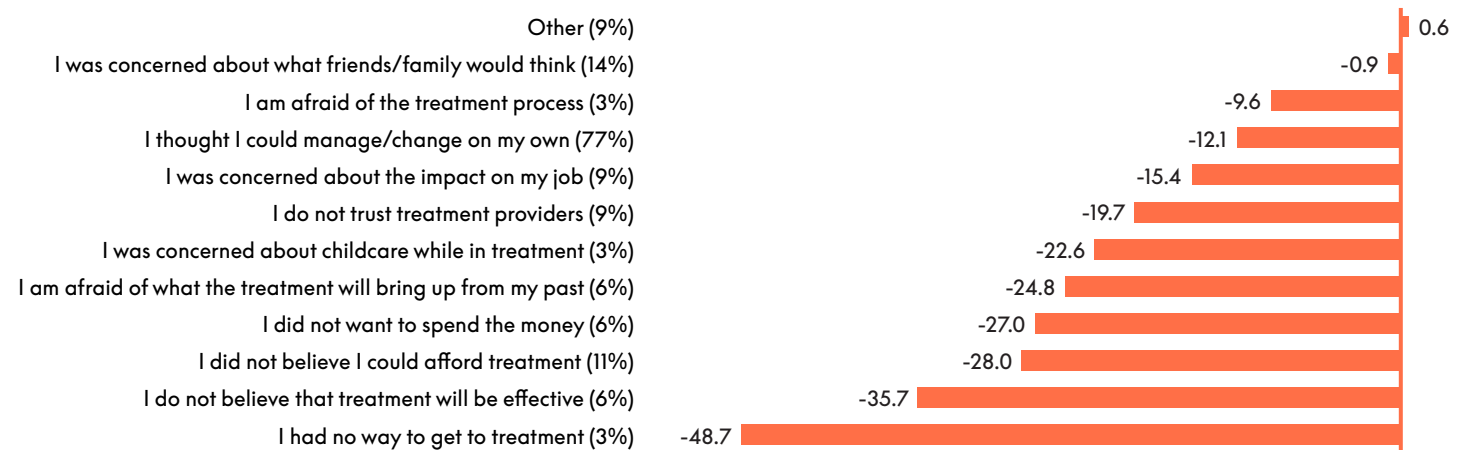
Reasons for not seeking treatment

- Among people acknowledging an alcohol or drug problem, more than three-quarters (77 per cent) think they could self-manage or change on their own, fourteen per cent were concerned about what their friends/family would think, and eleven per cent could not afford treatment.
- Three per cent of people who had no way to get to treatment have the least favourable mental health score (-48.7).

Reason for not seeking treatment



MHI score by reasons for not seeking treatment



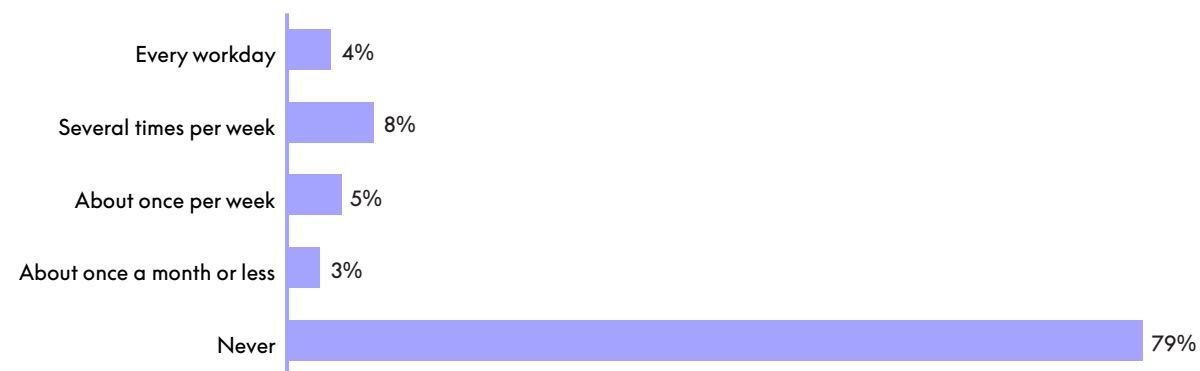
Impact on work and personal life

Those reporting that they use alcohol or drugs were asked if their usage impacted their ability to complete work tasks or responsibilities, caused absence from work, or impacted their ability to complete tasks or responsibilities at home.

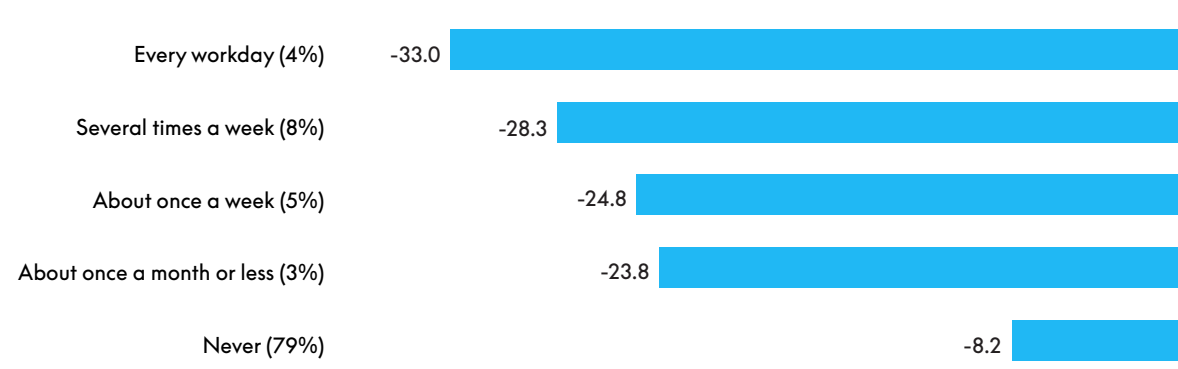
Impact of alcohol or drugs on job-related tasks and responsibilities

- Nearly eighty (79 per cent) of the total population have never had difficulties completing job-related tasks and responsibilities at work because of alcohol or drug use and this group has the most favourable mental health score (-8.2).
- More than one in five reports that alcohol or drugs have made it difficult to complete job-related tasks and responsibilities.
- People who use medications more than prescribed are nearly six times more likely to report difficulty completing job-related tasks and responsibilities at least once per week than those who use their medication as prescribed.

How often alcohol or drugs have made it difficult to complete job-related tasks and responsibilities



MHI score by how often alcohol or drugs have made it difficult to complete job-related tasks and responsibilities



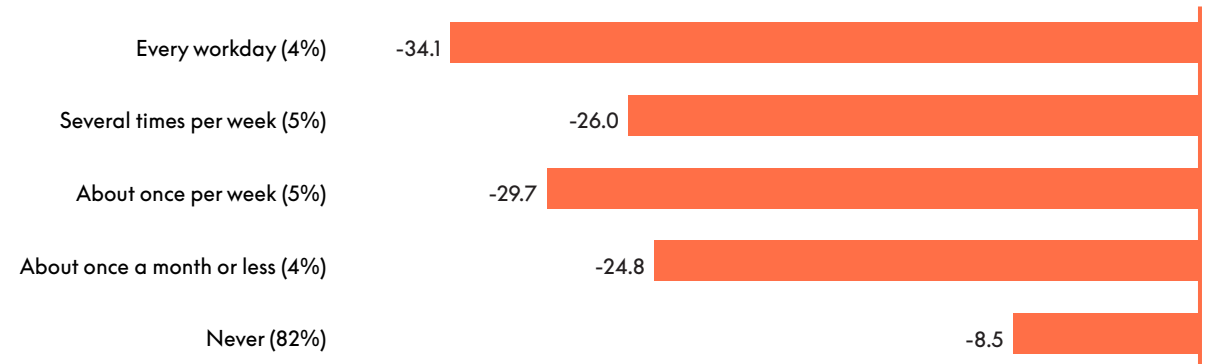
Impact of alcohol or drugs on absenteeism

- Eighty-two per cent of the population have never missed work due to alcohol or drug use and this group has the most favourable mental health score (-8.5).
- Fourteen per cent miss work or call in sick at least once per week due to alcohol or drug use.
- People missing work have significantly lower mental health scores; four per cent who miss work every workday because of alcohol or drug use have the least favourable mental health score (-34.1), followed by five per cent who miss work once per week (-29.7), and five per cent who miss work several times per week (-26.0).
- Parents who report using drugs or alcohol are nearly four times more likely than non-parents to report calling in sick or being unable to go to work because of alcohol or drug use at least once per week.

Absenteeism due to alcohol or drug use



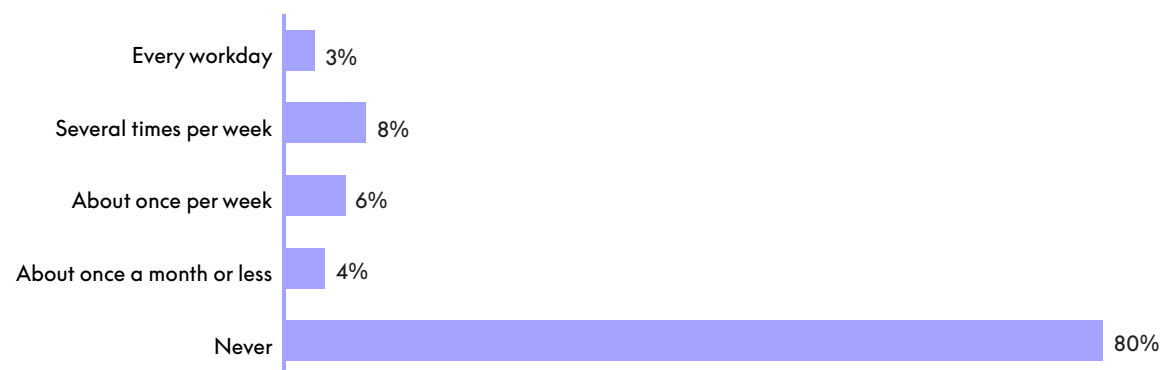
MHI score by absenteeism due to alcohol or drug use



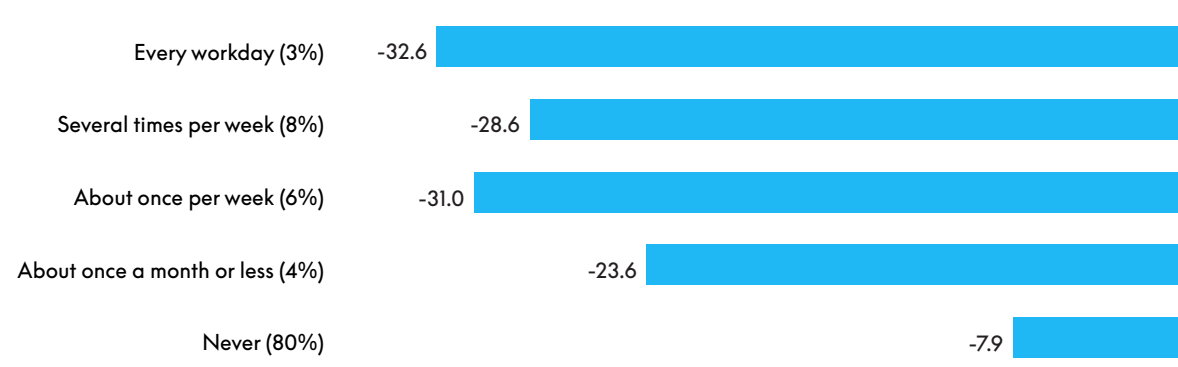
Impact of alcohol or drugs on home or family-related tasks and responsibilities

- Eighty per cent have never had difficulties with home or family-related tasks and responsibilities due to alcohol or drug use and this group has the most favourable mental health score (-7.9).
- One in five reports that alcohol or drugs have had an impact on home or family-related tasks and responsibilities.
- Three per cent of people who have difficulty with home or family-related tasks and responsibilities every day has the least favourable mental health score (-32.6).
- Individuals working fewer hours or with reduced salary are more than three times as likely to report that alcohol or drug use has made it difficult to complete home or family-related tasks and responsibilities at least once per week.
- Parents using drugs or alcohol are more than three times as likely than non-parents to report that alcohol or drug use has made it difficult to complete home or family-related tasks and responsibilities at least once per week.
- Managers are four times more likely than non-managers to report that alcohol or drug use has made it difficult to complete home or family-related tasks and responsibilities at least once a week.

Impact of alcohol or drug use on home or family-related tasks and responsibilities



MHI score by impact of alcohol use or drug on home or family-related tasks and responsibilities



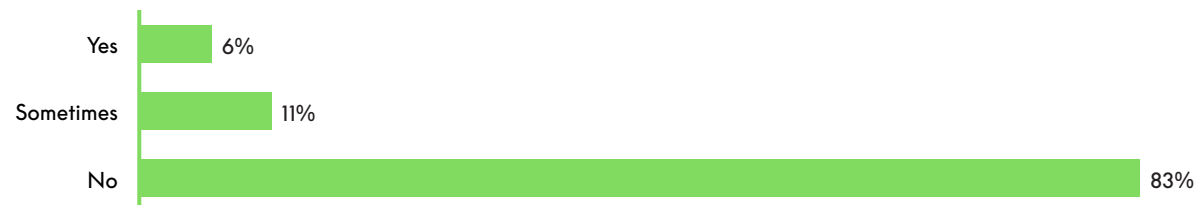
Spending on drugs or alcohol

Respondents reporting use of any type of substance were asked whether they have spent money on drugs or alcohol that was needed for something else (e.g., rent, food). This group was also asked whether they regretted the amount of money spent on alcohol or drugs.

Spending on drugs or alcohol instead of essentials

- Eighty-three per cent have never spent money on alcohol or drugs that was needed for something else, and this group has the most favourable mental health score (-8.5).
- Seventeen per cent spent money on alcohol or drugs that was needed for something else.
- Parents who report using drugs or alcohol are three times more likely than non-parents to report spending money on alcohol or drugs instead of needed items.
- People without emergency savings are nearly three times more likely than those with emergency savings to report spending money on alcohol or drugs instead of needed items.
- Managers are four and one-half times more likely than non-managers to report spending money on alcohol or drugs instead of needed items.

Spending money on alcohol or drugs that is needed for something else



MHI score by spending money on alcohol or drugs that is needed for something else



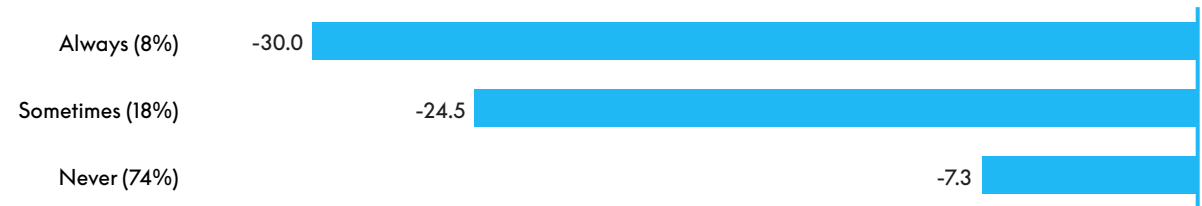
Regret over spending on drugs or alcohol

- Seventy-four per cent report that they never regret spending money on drugs or alcohol and this group has the most favourable mental health score (-7.3).
- More than one-quarter (26 per cent) report regret over their spending on drugs or alcohol.
- Parents are more than twice as likely as non-parents to regret spending money on drugs or alcohol.
- People without emergency savings are twice as likely as those with emergency savings to regret spending money on drugs or alcohol.
- Managers are more than twice as likely as non-managers to regret spending money on drugs or alcohol.

Regret over spending on alcohol or drugs



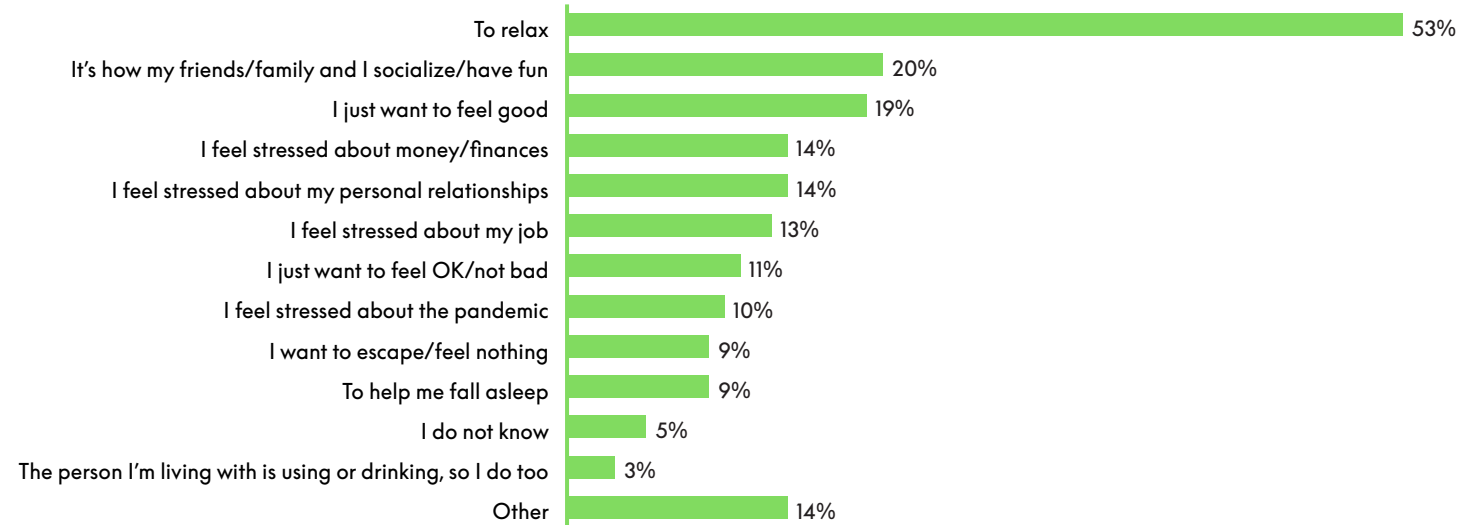
MHI score by regret over spending on alcohol or drugs



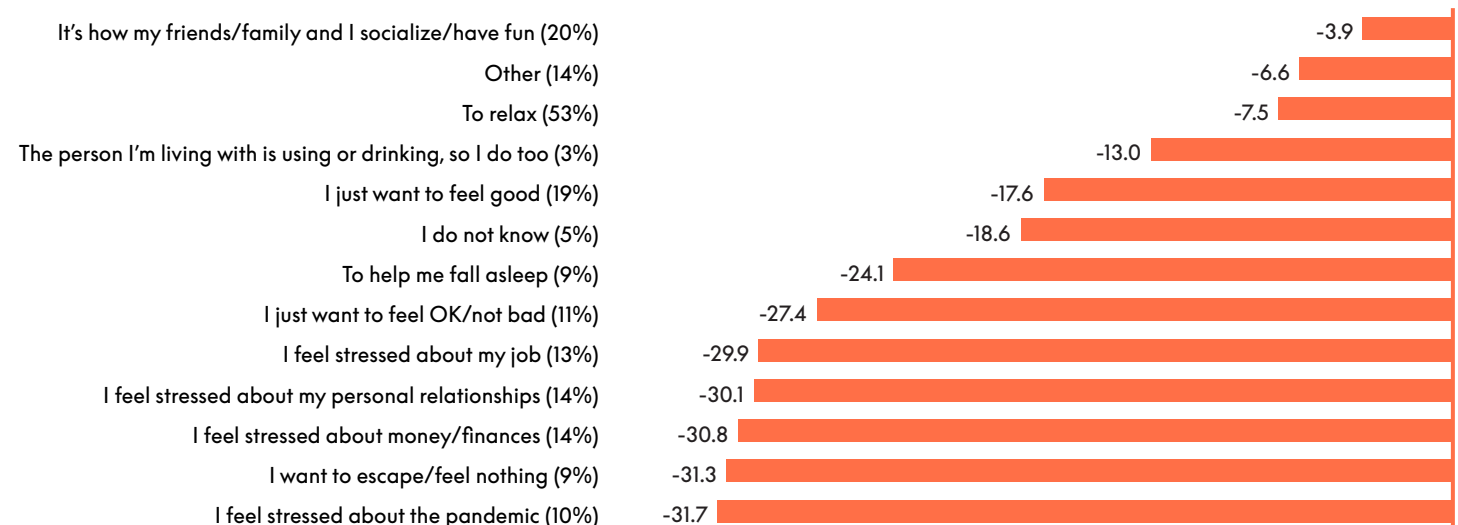
Reasons for alcohol or drug use

- Among those who consume alcohol or drugs, more than half (53 per cent) use alcohol or drugs to relax, twenty per cent use alcohol or drugs to socialize with friends/family, and nineteen per cent use alcohol or drugs to feel good.
- Ten per cent report that stress about the pandemic is the reason they use alcohol or drugs, and this group has the least favourable mental health score (-31.7).

Reason for use of alcohol or drugs



MHI score by reasons for use of alcohol or drugs



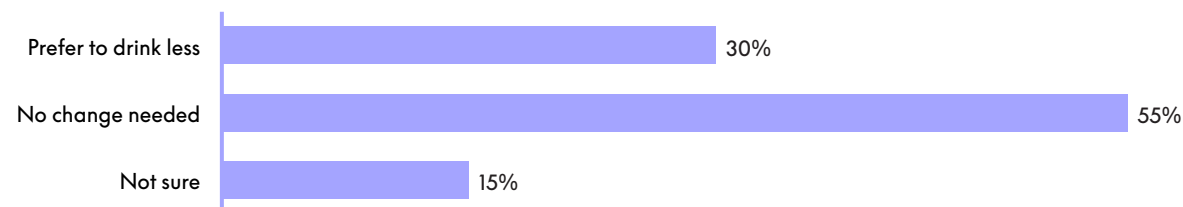
Reducing substance use

Reducing alcohol use

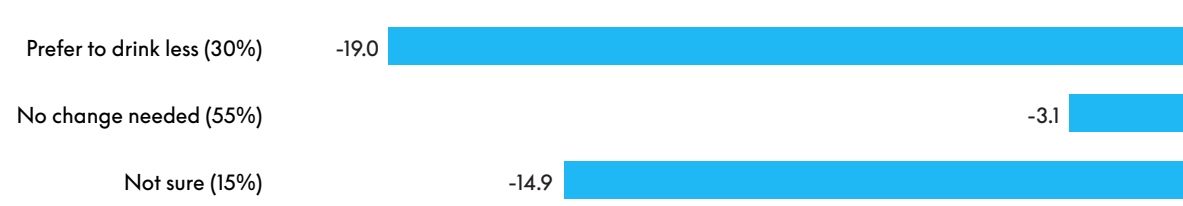
Respondents who use alcohol were asked whether they would prefer to drink less than they currently do.

- Nearly one-third (30 per cent) would prefer to drink less than they currently do, and this group has the least favourable mental health score (-19.0).
- More than half (fifty-five per cent) report that they do not need to change their alcohol use and this group has the most favourable mental health score (-3.1).
- As the number of drinks per week increases, so does the percentage of people reporting that they want to drink less. Fifty-seven per cent of people that consume 15 or more drinks per week would prefer to drink less compared to twenty-one per cent that consume 1-3 drinks per week.

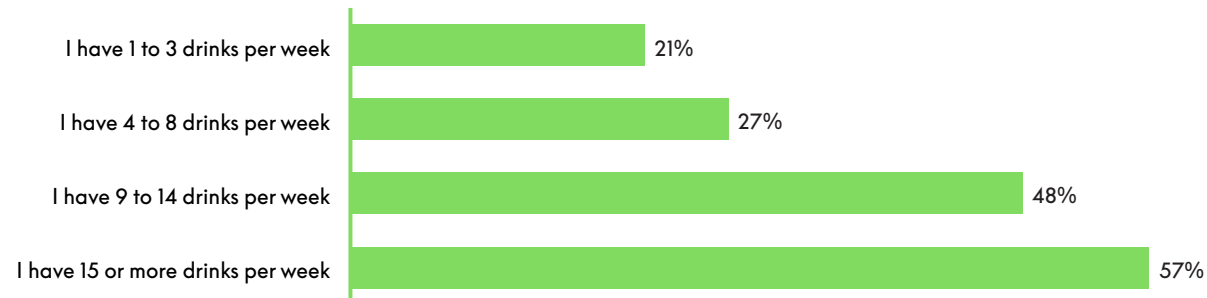
I would prefer to drink less than I currently do



MHI score by I would prefer to drink less than I currently do



I would prefer to drink less



Reducing drug use

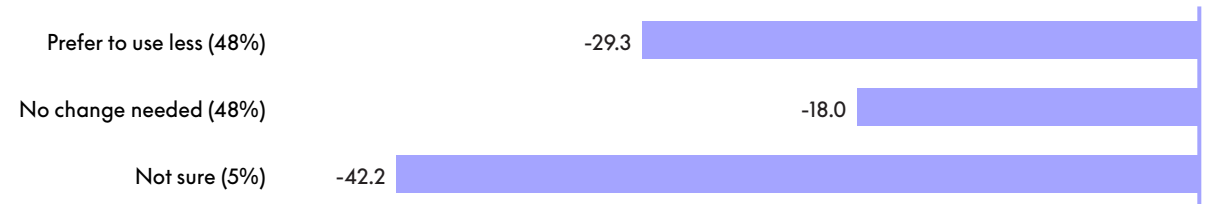
Respondents who use recreational cannabis at least once per week or who use illicit drugs were asked whether they would prefer to use less than they currently do.

- Nearly half (48 per cent) would prefer to use drugs less than they currently do.
- Nearly half (48 per cent) indicate that they do not need to change their drug use and this group has the most favourable mental health score (-18.0), although it remains significantly below the overall mental health score (-11.0).
- Those who use recreational cannabis 4-6 times per week are most likely to want to use less than they do compared to other users.

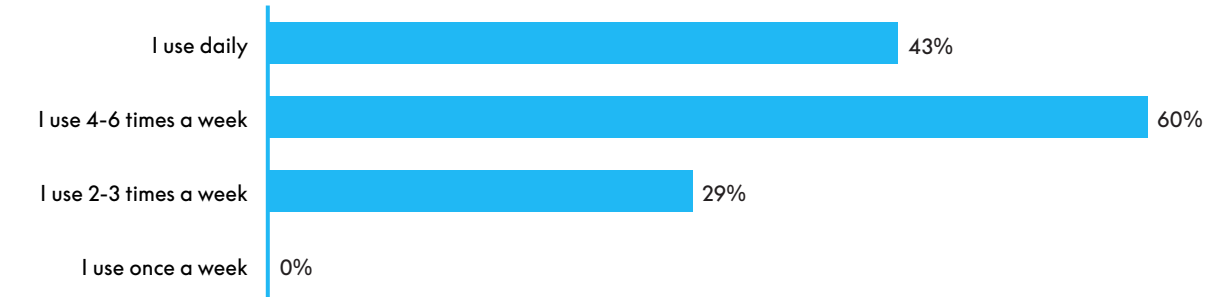
I would prefer to use drugs less than I currently do



MHI score by I would prefer to use drugs less than I currently do



I would prefer to use drugs less than I currently do

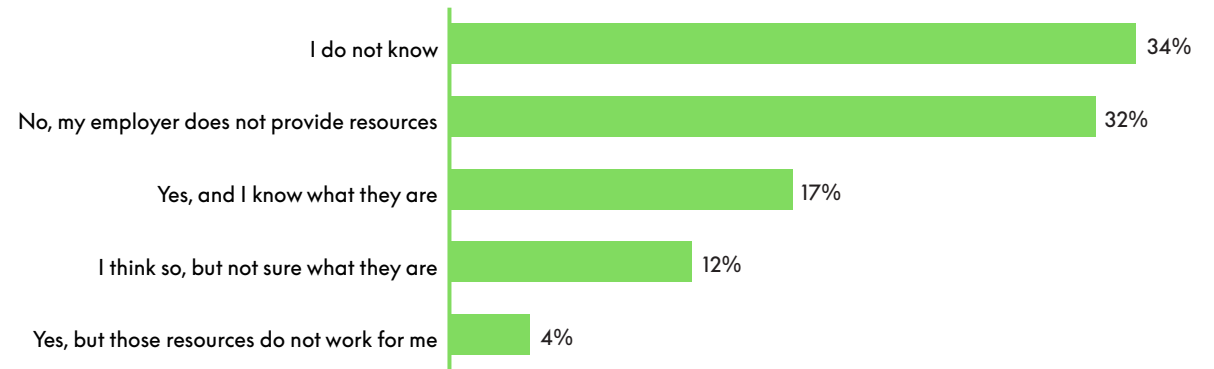


Employer resources for substance abuse

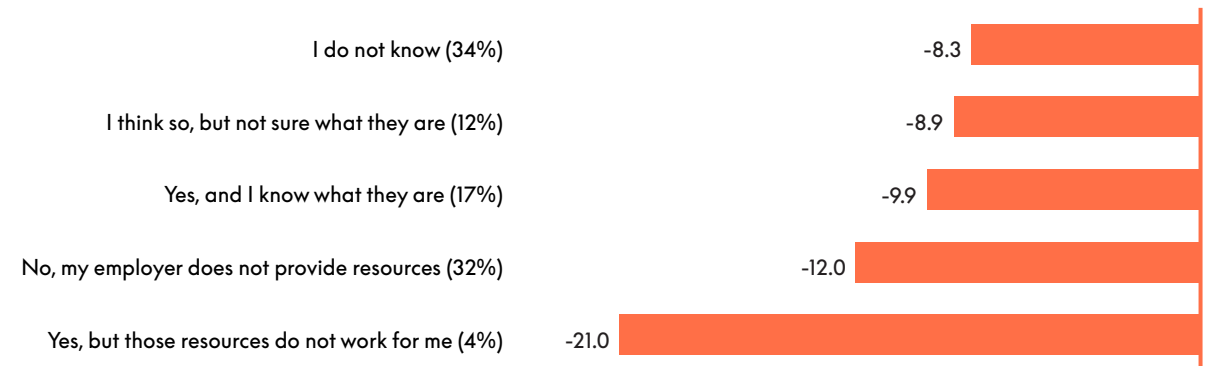
Respondents were asked whether their employer has resources to help with problem drinking or drug use.

- More than one-third do not know whether their employer offers any resources and a further twelve per cent think that their employer does but are not sure what is offered.
- The least favourable mental health score is among four per cent who report that their employer does provide resources, but they do not work for them (-21.0).
- Parents are three and one-half times more likely to report that employer-provided resources do not work for them than non-parents.
- Managers are four times more likely to report that employer-provided resources do not work for them than non-managers.

Employer resources to help with problem drinking or drug use



MHI score by employer resources to help with problem drinking or drug use



Concern about drinking or drug use of someone in the household

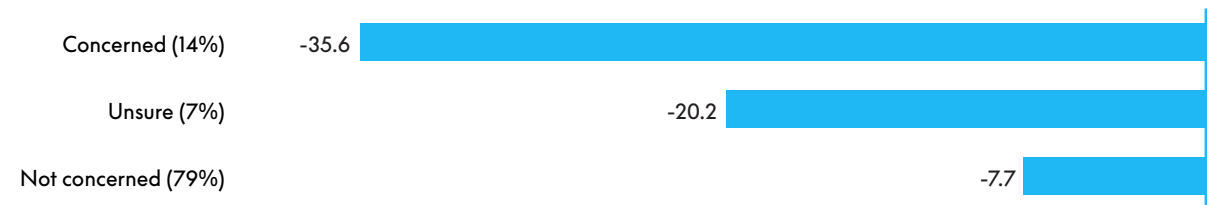
Respondents were asked if they were concerned about the drinking or drug use of someone in their household.

- Nearly eighty per cent (79 per cent) have no concerns and this group has the highest mental health score (-7.7)
- Fourteen per cent of people are concerned about the drinking or drug use of someone in their household and this group has the least favourable mental health score (-35.6), a figure more than twenty-five points below the overall average (-11.0).
- Parents are twice as likely to report concern about the drinking or drug use of someone else in their household than non-parents.

Concern about drinking or drug use of someone in the household



MHI score by concern about drinking or drug use of someone in the household



Overview of the Mental Health Index by LifeWorks™

The mental health and wellbeing 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 each geography compared to benchmarks collected in 2017, 2018 and 2019. The increases and decreases in the MHI are intended to predict cost and productivity risks and inform the need for investment in mental health support by business and government.

The Mental Health Index™ report has three parts:

1. The overall Mental Health Index™ (MHI), which is a measure of change compared to the benchmark of mental health and risk.
2. A Mental Stress Change (MStressChg) score, which measures the level of reported mental stress compared to the prior month.
3. A spotlight section that reflects the specific impact of current issues in the community.

Methodology

Data for this report is collected through an online survey of 1,000 Australians who are living in Australia and are currently employed or who were employed within the prior six months. Participants are selected to be representative of the age, gender, industry, and geographic distribution in Australia. The same respondents take part each month to remove a sampling bias. Respondents are asked to consider the prior two weeks when

answering each question. The Mental Health Index™ is published monthly starting in April 2020. Benchmark data was collected in 2017, 2018 and 2019. Data for the current report was collected between April 24 to May 6, 2021.

Calculations

To create the Mental Health Index™, the first step leverages a response scoring system turning individual responses to each question into a point value. Higher point values are associated with better mental health and less mental health risk. Everyone's scores are added and then divided by a 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 comprises data from 2017, 2018 and 2019. This was a period of relative social stability and steady economic growth. **The change compared 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 (percentage reporting less mental stress + percentage reporting the same level of mental stress * 0.5) * -1 + 100. The score reflects a comparison of 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.

Additional data and analyses

Demographic breakdown of sub-scores, and specific cross-correlational and custom analyses, are available upon request. Benchmarking against the national results or any sub-group is available upon request. Contact MHI@lifeworks.com



About LifeWorks

LifeWorks is a global leader in delivering technology-enabled solutions that help clients support the total wellbeing of their people and build organizational resiliency.

By improving lives, we improve business. Our solutions span employee and family assistance, health and wellness, recognition, pension and benefits administration, retirement and financial consulting, actuarial and investment services. LifeWorks employs approximately 7,000 employees who work with some 24,000 client organizations that use our services in more than 160 countries. LifeWorks is a publicly traded company on the Toronto Stock Exchange (TSX: LWRK).

For more information, visit:

 [LifeWorks.com](https://www.lifeworks.com)

 twitter.com/LifeWorks

 linkedin.com/company/lifeworks