

# The Mental Health Index™ report

United Kingdom, March 2021

## Mental health one year into the COVID-19 pandemic



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## Commentary: Mental health during the pandemic

Mental health has long been recognized as a driver of health, engagement and productivity. Since the first case of COVID-19 was recorded in the United Kingdom in January 2020, it has been **more than one year marked by relentless and unpredictable change**. The importance of mental health, resilience and wellbeing has been magnified as the COVID-19 pandemic, social and economic crises have affected British citizens to an extent that will be felt for generations.

Without question, the events of this past year have challenged us to become more empathetic, flexible and digitally capable. The importance of mental health and awareness of its influences has never been greater. The **Mental Health Index™ (MHI) provides critical insight into the mental health status of the working population and how that population is faring during these unprecedented times.**

The April 2020 MHI showed the extraordinary impact of the pandemic, with a massive decline in all areas of mental health and work productivity. In the early stages of the pandemic people found themselves trying to make sense of their new world. Frontline workers, health organizations and health officials went into overdrive with one goal in mind – saving lives by containing the spread of COVID-19. We saw people managers extending themselves, out of necessity, to manage business changes as well as the anxiety of their teams, and their personal situations. Subsequently we saw the mental health of managers impacted to the extent that their mental health is now lower than that of non-managers. As well, we saw more managers than non-managers considering leaving their jobs due to increased work stress. With this, the concern for business is clear, particularly as leaders continue to be needed more than ever as we “re-open” and redefine our businesses and workplaces.

When we consider the events that followed the start of the COVID-19 pandemic, it is unsurprising that we have had to shift our way of thinking, working and living. A year defined by loss, disruption, and change has resulted in **an exponential rise in burnout risk among the working population.**



Experiencing extraordinary levels of job loss and economic burden, women have been one of the hardest hit groups during the pandemic. **Within a year, we have reversed three decades of advances in women's labour-force participation as many have been forced to exit the workforce to better manage their childcare responsibilities.**<sup>1</sup> In addition to women, parents, post-secondary students, those with reduced income, and those without a cushion of emergency savings, are among those whose mental health has shown the greatest decline throughout the past year.

We have seen many of our most loved neighbourhood corner shops and restaurants close while others struggle to survive. We have also seen the rise of the new digital economy, with almost all businesses adapting to new consumer behaviours by undergoing a digital transformation.

Given the extraordinary global focus and unprecedented collaborations, we have seen **vaccine development move at record speed**, with five vaccines approved for use worldwide and more than 150 different vaccines in trials and pre-clinical development.

Beyond the economic and health crises of the pandemic that have led to profound change for Britons, **social justice issues dominated headlines in 2020**, calling attention to systemic racial inequalities, including the significant rise in anti-Asian racism and increased focus on the Black Lives Matter movement.

At this point, we see continued frustration and disruption. The disruption, change and loss has continued for a full year, and will continue beyond. Most agree that the post-pandemic period will not look the same as the pre-pandemic world, and the longer-term impact on our collective mental health remains unclear. The length of time that we have been under undue stress is itself the greatest risk at this point, threatening to further deteriorate our mental health unless there is a significant and appropriate focus on mental health. While this risk is very real, new strengths have emerged. Many businesses have focused more than ever on the mental health of their people - all their people, not just a few - destigmatizing mental health issues, showing empathy and promoting resources. The MHI has shown that employees who have this experience with their employers have better mental health scores. This is a strong and positive point of evidence that the significant risks we still face do not necessarily define our future.

<sup>1</sup> <https://blogs.lse.ac.uk/businessreview/2020/11/02/covid-19-hurt-womens-employment-the-hardest/>



## Key findings from April 2020 to March 2021

- **March 2021 marks 12 consecutive months of diminished mental health.** Since April, the general psychological health of Britons has declined from its pre-2020 benchmark.
- **Mental stress** has increased for 12 consecutive months. More people have reported increased versus decreased levels of mental stress from month to month.
- **Finances and isolation** are the strongest drivers of mental health. People without emergency savings, in particular, continue to experience lower mental health.
- **Gender disparity** is clear with women consistently having indications of significantly poorer mental health and more mental stress than men.
- **Age disparity** is apparent as mental health scores have consistently shown to improve with age.
- **Anxieties about personal life** overtake concerns about finances and work life later in the pandemic. Britons are having difficulty adapting to their new routines because of restrictions and isolation.
- **Young people** are changing their priorities to focus on mental health. Priorities vary across generations with individuals between 20 and 29, nearly twice as likely to report wanting to focus on their mental health compared to those over 60.
- **Children's mental health** is a concern for parents of both young and adult children.
- **Parents** continue to have less favourable mental health scores than non-parents.
- **People with reduced salary or reduced hours** since the pandemic have poorer mental health and more mental stress than those who have lost their jobs and those with no change to their employment.
- **Employer support** is highly correlated with mental health. An individual's perception of how well their employer has addressed the mental health of employees has a strong link to their mental health.
- **Work productivity** has been impacted. Employees are finding it more difficult to feel motivated to work and to concentrate on work.



- **Career change** is on the minds of many Britons. Approximately one-quarter are considering a change despite their employers handling the pandemic well.
- **Stigma** continues to be an issue. Britons are concerned that their career would be at risk if their employer was aware that they had a mental health issue. In particular, this is observed among younger people.
- **Concern for co-workers** as Britons are seeing the impact of the pandemic on others, including their co-workers' mental health.
- **Health and safety** have been handled well by the majority of organizations, according to their employees.
- **Physical and mental healthcare** access has diminished during the pandemic. The leading reasons for avoiding care is not wanting to visit a provider in-person or not making healthcare a priority.
- **Spending habits** are unlikely to return to pre-pandemic behaviour. Concerns over safety, job security and financial risk will change spending habits after the pandemic.
- **Brand loyalty** is dependent on the treatment of customers and response to social justice issues.



## March highlights

### **March 2021 marks 12 consecutive months of diminished mental health among Britons.**

The current state of mental health is thirteen points below the pre-pandemic benchmark and indicates that the working population is as distressed as the most distressed one percent of working Britons prior to 2020.

### **The proportion of individuals reporting more stress than the prior month (22 per cent) is slightly lower than the prior month,**

while the proportion of individuals reporting less mental stress is only seven per cent. The majority (71 per cent) indicate the same level of stress compared to the prior month, however, given the escalation in stress each month since the pandemic, this reflects an elevated level of cumulative stress for this group as well. With recent increases in variant cases in many regions of the country, and the resulting restrictions, this strain will likely continue until a sufficient proportion of the UK population is vaccinated.

### **General psychological health is near its lowest point since the start of the pandemic,**

indicating that people's perception of their overall mental health status is declining. In March 2021, the psychological health score is nearly 4-points below the score at the start of the MHI.

**Regional differences are evident in the mental health scores to date.** Since the launch of the MHI, Scotland has had the highest mental health scores while Northern Ireland has had the lowest.

Finances have been shown to be a leading driver of mental health. **People without emergency savings are more than twice as likely as those with emergency savings to report a negative impact on their mental health.**

Managers are 30 per cent more likely than non-managers to report a negative impact on their mental health yet they are 50 per cent more likely than non-managers to report an improved relationship with their leader.

In September 2020, we reported that twenty-six per cent of people were less willing to access physical healthcare during the pandemic. Six months later, **the same percentage (26 per cent) are less willing to access physical healthcare and this group has the poorest mental health score (-25.4).** Nearly one-third (30 per cent) of those who are unsure or less willing to access

A positive score on the Mental Health Index™ indicates better mental health in the overall working population, compared to the benchmark period of 2017 to 2019. A higher positive score reflects greater improvement. A negative Mental Health Index™ score indicates a decline in mental health compared to the benchmark period. The more negative the score, the greater the decline. A score of zero indicates mental health that is the same as it was in the benchmark period.

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physical healthcare report that the reason they are not willing to access physical healthcare is that they do not want to visit a provider in-person while over one-quarter (26 per cent) report that accessing physical healthcare is not a priority for them.

Also, in September, we reported that twenty-two per cent of people were **less willing to access mental healthcare during the pandemic**. Currently, that figure has fallen slightly to twenty per cent. This group has the least favourable mental health score (-27.6) and the primary reason for avoiding care is that accessing mental healthcare is not a priority for them.

In December, Forbes magazine noted that the pandemic has brought about the greatest work from home experiment in history.<sup>2</sup> Post-pandemic work from home policies is expected to be reconsidered as some employers consider partial or fully remote workforces. **Nearly two-thirds (65 per cent) report wanting the flexibility to work from home once the pandemic is over, yet only forty-two per cent believe that their employer will give them the option to choose whether they work from home.**

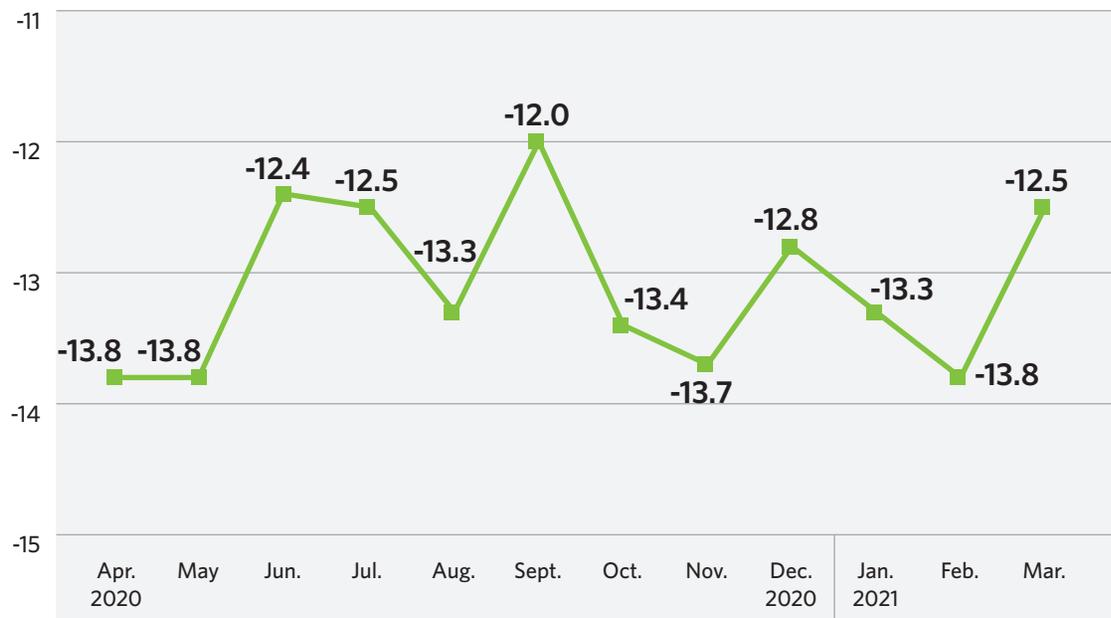
<sup>2</sup> Why Has The Great Work-From-Home Experiment Been So Successful?, Forbes, [https://www.forbes.com/sites/forbes\\_techcouncil/2020/12/11/why-has-the-great-work-from-home-experiment-been-so-successful/?sh=75366d3c28c7](https://www.forbes.com/sites/forbes_techcouncil/2020/12/11/why-has-the-great-work-from-home-experiment-been-so-successful/?sh=75366d3c28c7), 2020.



# The Mental Health Index™

The Mental Health Index™ (MHI) is a measure of deviation from the benchmark<sup>3</sup> of mental health and risk. **The overall Mental Health Index™ for March 2021 is -13 points.** A 13-point decrease from the pre-COVID-19 benchmark reflects a population whose mental health is similar to the most distressed first per cent of the benchmark population.

Current month March 2021:	<b>-13</b>	February 2021:	-14
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March marks the 12<sup>th</sup> consecutive month in which the Mental Health Index™ reflects strained mental health in the British population.

<sup>3</sup> The benchmark reflects data collected in 2017, 2018 and 2019.



## Mental Health Index™ sub-scores

The lowest Mental Health Index™ sub-score is for the risk measure of optimism (-16.5), followed by depression (-14.5), anxiety (-14.5), work productivity (-11.5), isolation (-11.5), and general psychological health (5.8). The risk measure with the best mental health score, and the only measure above the benchmark is financial risk (6.2).

- Work productivity, anxiety and depression scores have seen the greatest improvements from the prior month, increasing 1.9 points over February. In spite of this significant increase, scores remain significantly lower than the pre-pandemic benchmark.
- Financial risk is the only sub-score to decline in March, declining 0.4 points to 6.2. Despite a slight decline, the financial risk score continues to be the strongest of all sub-scores and is above the pre-2020 benchmark.

MHI sub-scores <sup>4</sup>	March 2021	February 2021
Optimism	-16.5	-18.1
Depression	-14.5	-16.4
Anxiety	-14.5	-16.4
Work productivity	-11.5	-13.4
Isolation	-11.5	-13.1
Psychological health	-5.8	-6.3
Financial risk	6.2	6.6

<sup>4</sup> The demographic breakdown of sub-scores are available upon request.



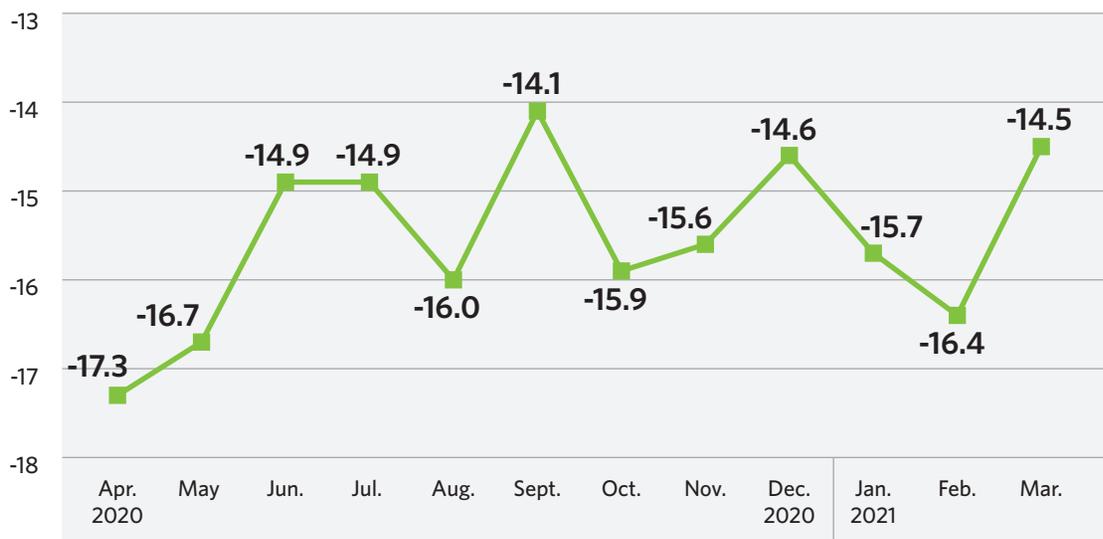
### Depression



### Depression

At the launch of the MHI in April 2020, depression was the lowest recorded sub-score. While improvements were observed through July and again, hitting a peak in September, scores remain significantly lower than benchmark. Despite a 1.9-point improvement from February to March, the depression score remains nearly 15-points below benchmark.

### Anxiety

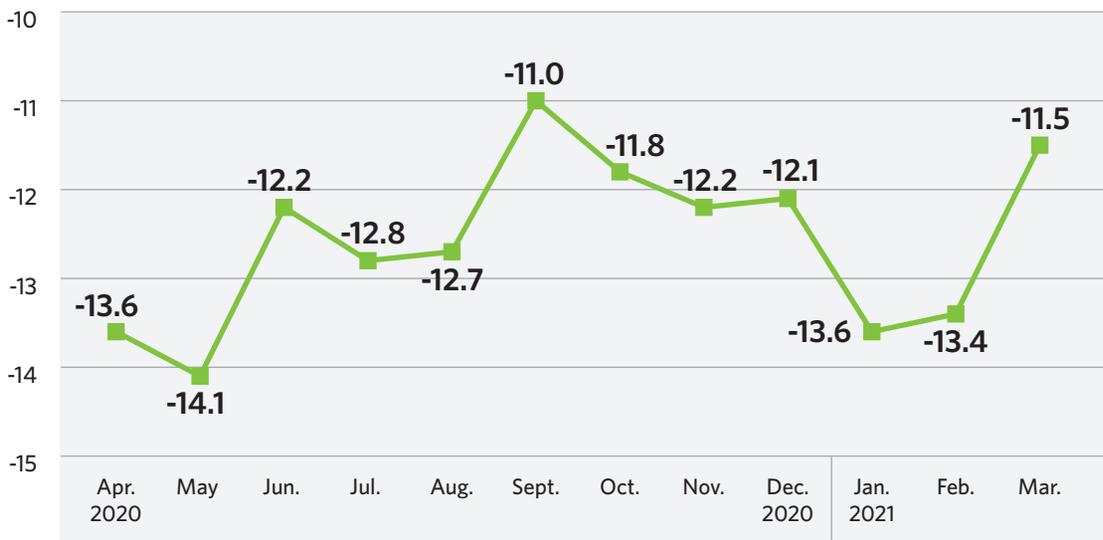


### Anxiety

Second to depression in April 2020, anxiety was more than 17-points below the pre-2020 benchmark. While increases were observed from April to July, the score has been inconsistent since then, marked by peaks and declines through February. In March 2021, the score improved 1.9-points over February, however, continues to reside well-below the benchmark at -14.5.



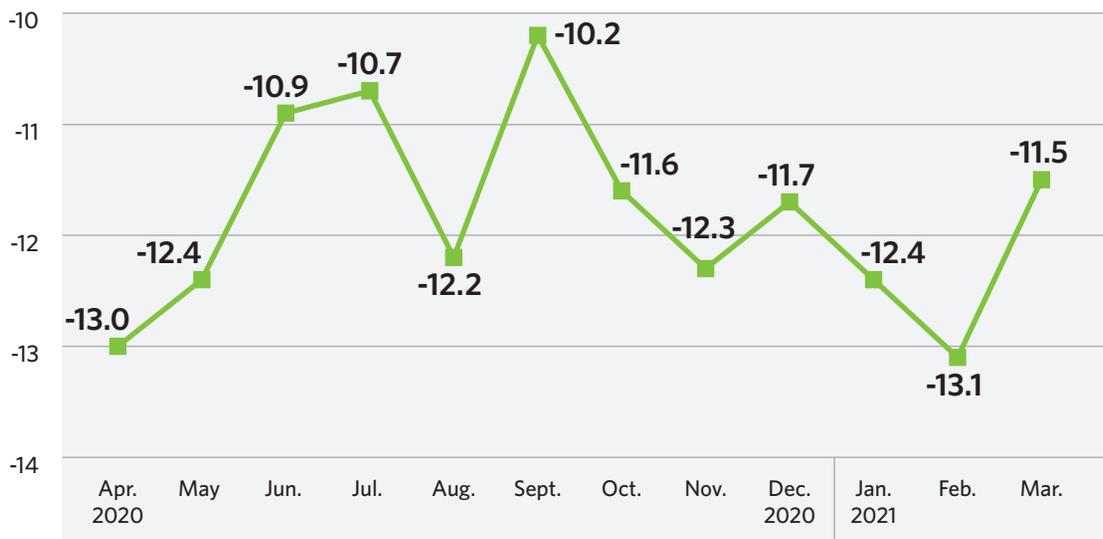
### Work productivity



### Work productivity

The mental health of Britons is substantially affecting their productivity at work. At the launch of the MHI in April 2020, the work productivity score was nearly 14-points below the benchmark. Despite improvements, including a peak in September (-11.0), scores generally declined through January, equal to the April 2020 score (-13.6). In March 2021, the work productivity score (-11.5) remains notably below the pre-2020 benchmark.

### Isolation

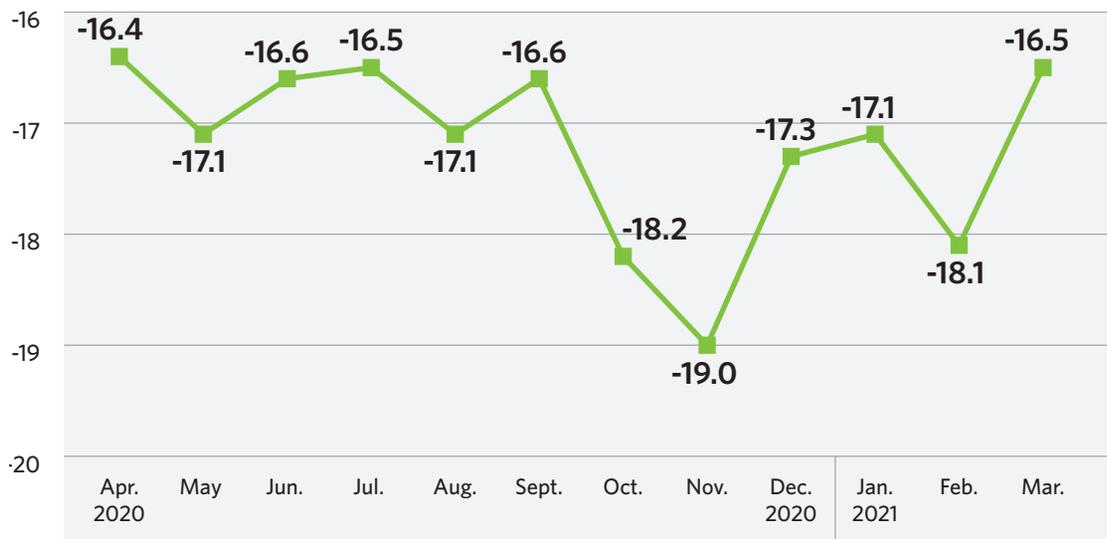


### Isolation

Isolation scores have been inconsistent from April 2020 to March 2021. Since its peak in September (-10.2), the isolation score has declined to the lowest point in February 2021 (-13.1). In March, the isolation score is nearly 12-points below the pre-2020 benchmark despite an increase of 1.6-points over February.



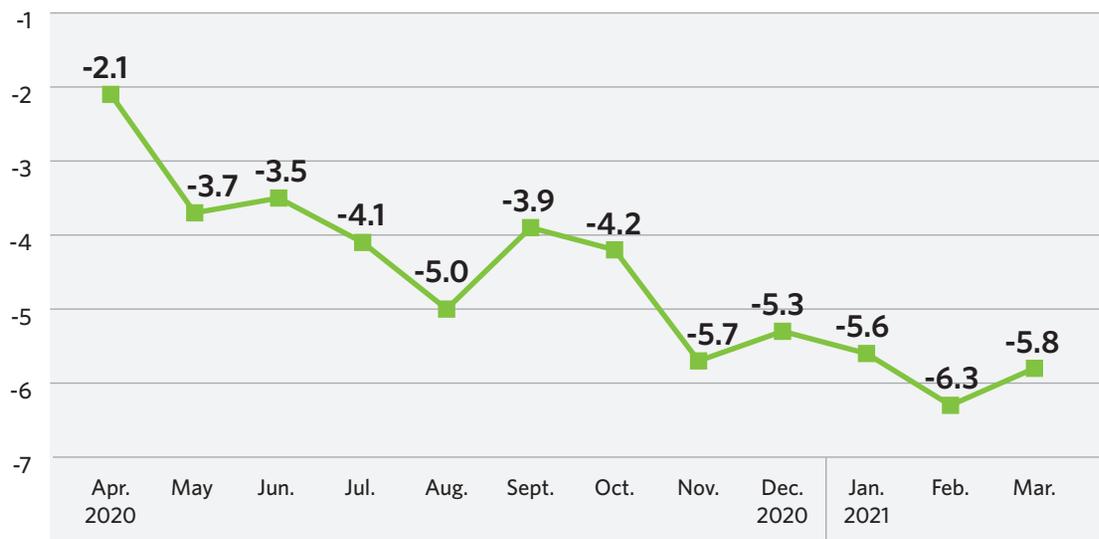
### Optimism



### Optimism

Optimism scores since April have remained significantly below the benchmark. From April to September, scores fluctuated modestly. In September and October, the score dropped sharply to its lowest point, -19.0. Optimism scores have improved to -16.5 in March, nearly equal to the score at launch of the MHI in April 2020, however, remains well below the pre-2020 benchmark.

### General psychological health

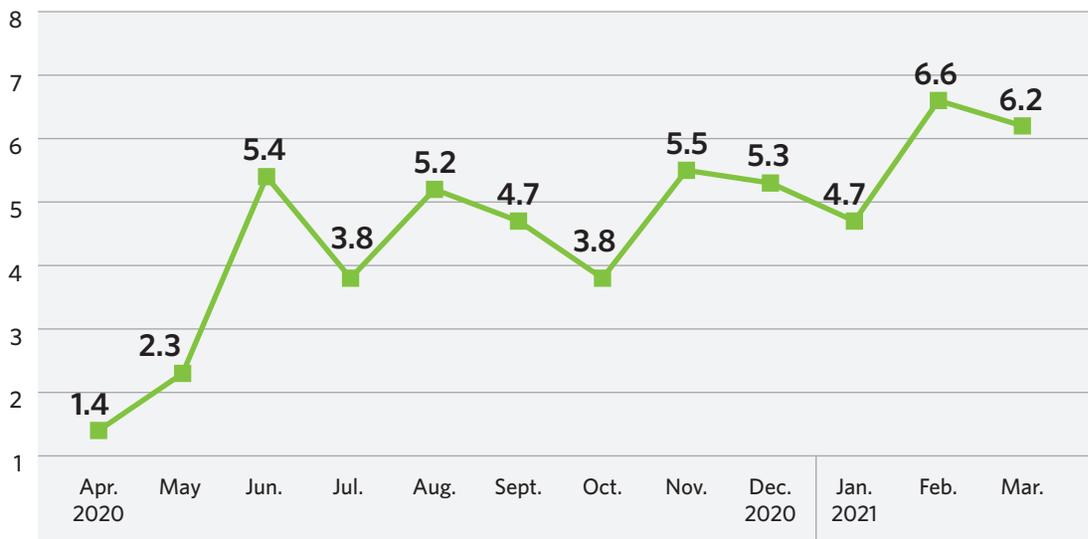


### General psychological health

Despite some months of modest improvement, the psychological health of Britons has declined since April 2020. In March 2021, the psychological health score is nearly 4-points below the score at the start of the MHI.



### Financial risk



### Financial risk

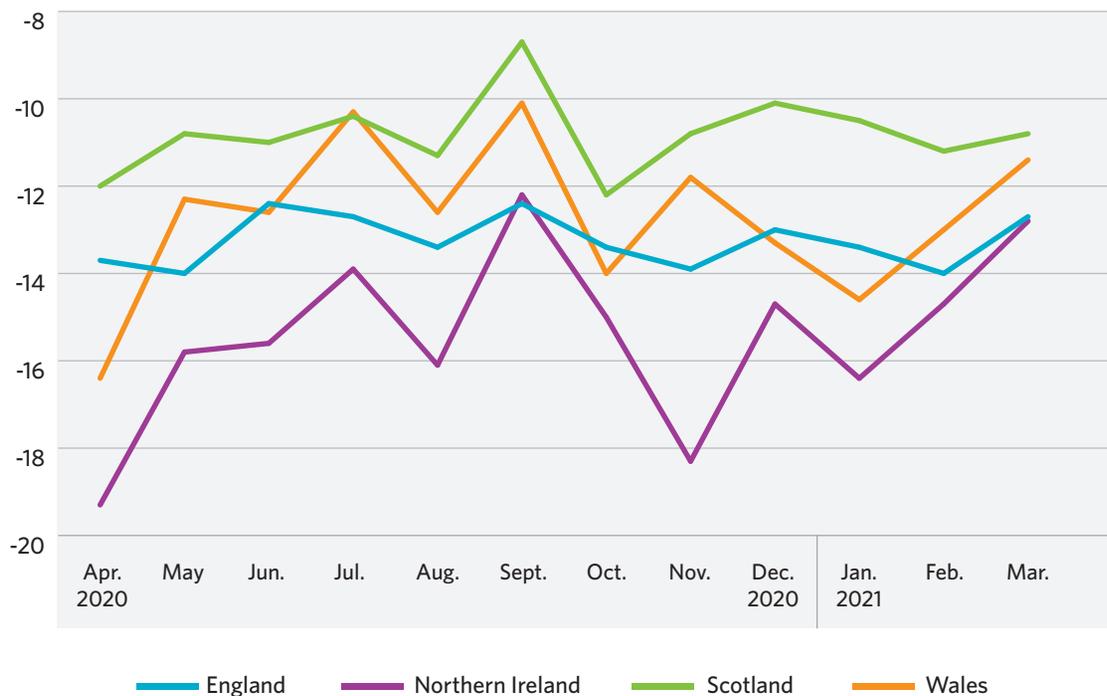
The financial risk score of Britons remains the strongest of all mental health sub-scales. Since the launch of the Index in April 2020, the financial risk score has been above the pre-2020 benchmark. Despite some months of modest fluctuation, the financial risk score in March 2021 remains strong, nearly 5-points above the score one year ago.



# Mental Health Index™ (regional)

Regional mental health scores since April have been inconsistent from month-to-month. However, since the launch of the MHI, Scotland has had the highest mental health scores while Northern Ireland has had the lowest.

UK regional Mental Health Index™ scores





## Demographics

- Since the start of the MHI, we have found that women have significantly lower mental health scores than men. In March 2021, the mental health score of women is -15.0 compared to -10.4 for men.
- In twelve consecutive months of MHI results, we have observed that mental health scores have improved with age.
- We have seen differences in mental scores between those with and without children since April. March 2021 continues this trend with a lower score for those with at least one child (-15.4) compared to those without children (-11.0).

## Employment

- Overall, four per cent of respondents are unemployed and seventeen per cent report reduced hours or reduced salary.
- Individuals reporting reduced salary when compared to the prior month have the lowest mental health score (-19.9), followed by those who report fewer hours when compared to the prior month (-19.0), and those not currently employed (-17.1).
- Non-managers have lower mental health scores (-13.2) compared to managers (-11.1).
- Self-employed/sole proprietors have the highest mental health score (-10.7).
- Respondents who report working for companies with 501-1,000 employees have the lowest mental health score (-15.7).

## Emergency savings

- Those without emergency savings continue to experience a lower score in mental health (-27.8) than the overall group. Individuals with an emergency fund have a mental health score of -7.7.



Employment status	Mar. 2021	Feb. 2021
<b>Employed (no change in hours/salary)</b>	<b>-10.8</b>	<b>-11.9</b>
Employed (fewer hours compared to last month)	-19.0	-20.6
<b>Employed (reduced salary compared to last month)</b>	<b>-19.9</b>	<b>-18.3</b>
Not currently employed	-17.1	-16.8

Age group	Mar. 2021	Feb. 2021
<b>Age 20-29</b>	<b>-20.6</b>	<b>-21.2</b>
Age 30-39	-17.8	-19.5
Age 40-49	-13.8	-15.0
Age 50-59	-10.5	-10.5
<b>Age 60-69</b>	<b>-4.9</b>	<b>-7.7</b>

Number of children	Mar. 2021	Feb. 2021
<b>No children in household</b>	<b>-11.0</b>	<b>-12.4</b>
1 child	-13.4	-15.0
2 children	-16.7	-17.3
<b>3 children or more</b>	<b>-19.8</b>	<b>-19.9</b>

Region	Mar. 2021	Feb. 2021
England	-12.7	-14.0
<b>Northern Ireland</b>	<b>-12.8</b>	<b>-14.7</b>
<b>Scotland</b>	<b>-10.8</b>	<b>-11.2</b>
Wales	-11.4	-13.0

Gender	Mar. 2021	Feb. 2021
<b>Men</b>	<b>-10.4</b>	<b>-11.4</b>
<b>Women</b>	<b>-15.0</b>	<b>-16.6</b>

Income	Mar. 2021	Feb. 2021
<b>Household Income &lt;£15K/annum</b>	<b>-22.9</b>	<b>-23.0</b>
£15K to <£30K/annum	-17.3	-18.3
£30k to <£60K	-12.3	-13.3
£60k to <£100K	-8.1	-10.1
<b>£100K and over</b>	<b>-1.8</b>	<b>-4.6</b>

Employer size	Mar. 2021	Feb. 2021
<b>Self-employed/sole proprietor</b>	<b>-10.7</b>	<b>-10.9</b>
2-50 employees	-11.3	-12.2
51-100 employees	-14.9	-16.4
101-500 employees	-11.5	-13.6
<b>501-1,000 employees</b>	<b>-15.7</b>	<b>-17.0</b>
1,001-5,000 employees	-13.8	-13.0
5,001-10,000 employees	-11.3	-15.6
More than 10,000 employees	-11.6	-13.7

Manager	Mar. 2021	Feb. 2021
<b>Manager</b>	<b>-11.1</b>	<b>-13.5</b>
<b>Non-manager</b>	<b>-13.2</b>	<b>-13.8</b>

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 Health Index™ (industry)

Full-time post-secondary students have the lowest mental health score (-24.9) in March 2021. This score is significantly lower than the next lowest scores, among individuals employed in Wholesale Trade (-18.8), and Food Services (-17.7). Individuals employed in Real Estate, Rental and Leasing (-4.2), Other Services (except Public Administration) (-7.7), and Manufacturing (-7.8) have the most favourable mental health scores in March. Individuals employed in the Administrative and Support services, Information and Cultural Industries, 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 below:**

Industry	March 2021	February 2021	Change
Administrative and Support services	-13.4	-20.7	7.3
Information and Cultural Industries	-11.4	-18.1	6.7
Finance and Insurance	-8.4	-12.2	3.7
Utilities	-15.6	-18.9	3.3
Construction	-12.6	-15.9	3.3
Educational Services	-12.6	-14.3	1.7
Arts, Entertainment and Recreation	-16.1	-17.7	1.6
Professional, Scientific and Technical Services	-9.6	-11.1	1.5
Retail Trade	-15.6	-17.1	1.4
Transportation and Warehousing	-12.7	-13.7	1.0
Manufacturing	-7.8	-8.7	0.8
Food Services	-17.7	-18.3	0.5
Other services (except Public Administration)	-7.7	-7.8	0.1
Other	-10.3	-10.3	0.0
Health Care and Social Assistance	-15.6	-15.6	-0.1
Public Administration	-12.3	-12.0	-0.3
I am a student	-24.9	-24.2	-0.7
Wholesale Trade	-18.8	-17.5	-1.3
Real Estate, Rental and Leasing	-4.2	0.4	-4.6

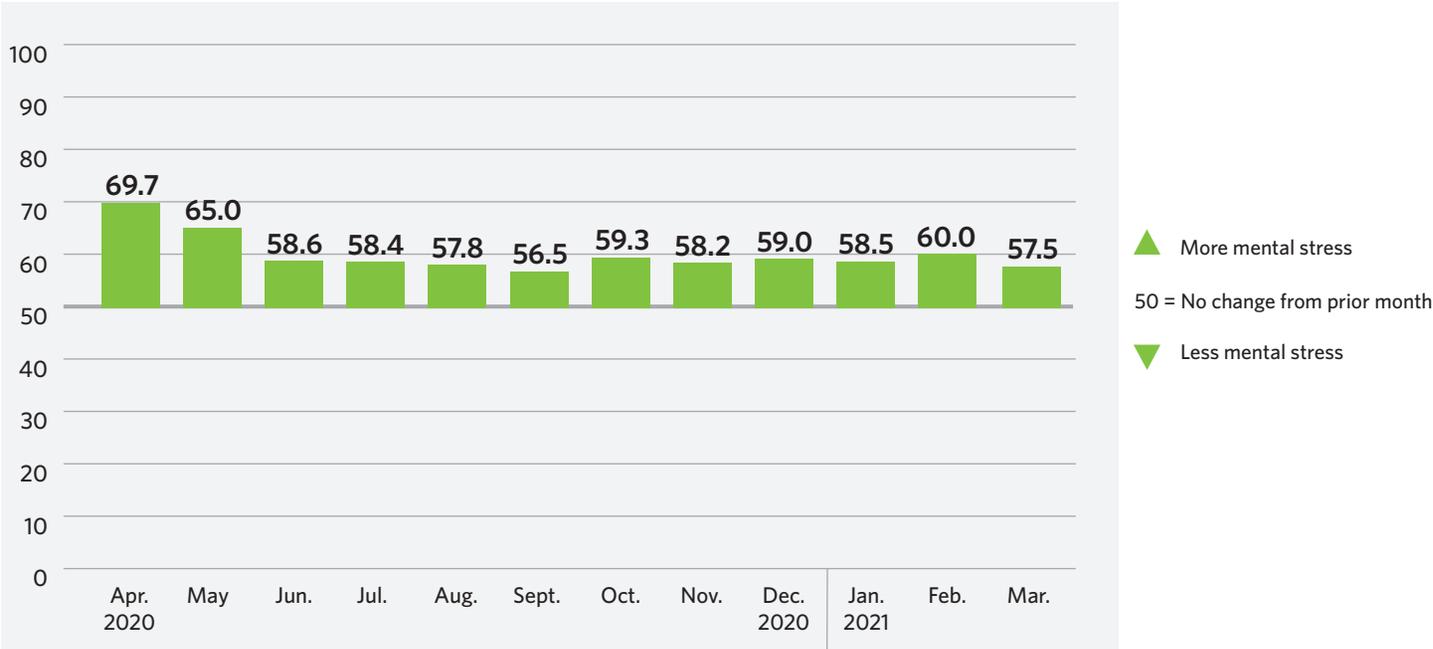


# The Mental Stress Change score

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 March 2021 is 57.5.** This reflects a net increase in mental stress compared to the prior month. The MStressChg score had been declining (meaning those surveyed reported less mental stress) month over month through September 2020, then increased in October. Since October, scores have fluctuated between 58 and 60. The score in March 2021 is 2.5-points lower than the prior month.

The current score indicates that 22 per cent of the population is experiencing more mental stress compared to the prior month, with 7 per cent experiencing less. A continued increase in mental stress over twelve months of the MHI indicates a significant accumulation of strain in the British population.

Current month March 2021:	<b>57.5</b>	February 2021:	60.0
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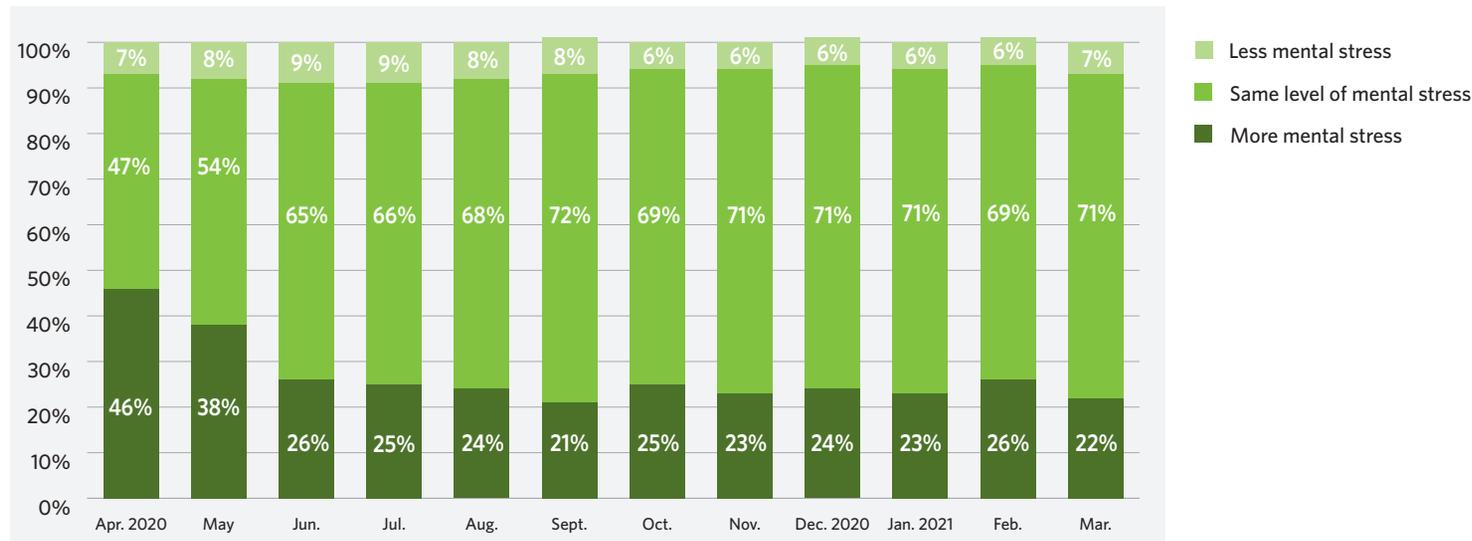
# Mental Stress Change (percentages)

Mental Stress Change tracks everyone’s 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.

Over twelve months of the MHI, 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 significantly 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, 46 per cent of individuals reported an increase in mental stress. While those reporting increased month-over-month mental stress decreased to 22 per cent in March 2021, 71 per cent of respondents report the same level of mental stress and only 7 per cent report a decrease in mental stress.

## Mental Stress Change by month





## Demographics

- In twelve consecutive months of MHI results, we have observed that younger respondents are experiencing a greater increase in mental stress compared to older respondents.
- Since the start of the MHI, we have found that women have larger increases in mental stress than men. In March 2021, the mental stress change score of women is 59.2 compared to 56.0 for men.

## Geography

- The greatest increase in month-over-month stress is for respondents living in Wales (59.3), followed by England (57.5), Scotland (57.2), and Northern Ireland (54.4).

## Employment

- The greatest increase in mental stress is seen in employed people with fewer hours (62.3), followed by employed people with reduced salary (61.1) compared to unemployed people (57.0) and employed people with no change to salary or hours (56.6).
- A nearly equal increase in stress is reported by managers (57.8) and non-managers (57.1).



Employment status	Mar. 2021	Feb. 2021
<b>Employed</b> (no change in hours/salary)	56.6	58.1
<b>Employed (fewer hours compared to last month)</b>	62.3	67.5
Employed (reduced salary compared to last month)	61.1	66.3
Not currently employed	57.0	59.3
Age group	Mar. 2021	Feb. 2021
Age 20-29	56.1	63.4
<b>Age 30-39</b>	61.1	61.5
Age 40-49	60.2	62.6
Age 50-59	56.3	57.3
<b>Age 60-69</b>	53.2	57.4
Number of children	Mar. 2021	Feb. 2021
<b>No children in household</b>	55.9	59.0
1 child	58.9	60.9
2 children	61.7	62.9
<b>3 children or more</b>	63.3	63.0
Region	Mar. 2021	Feb. 2021
England	57.5	59.9
<b>Northern Ireland</b>	54.4	59.1
Scotland	57.2	61.3
<b>Wales</b>	59.3	59.8

Gender	Mar. 2021	Feb. 2021
<b>Men</b>	56.0	57.6
<b>Women</b>	59.2	62.8
Income	Mar. 2021	Feb. 2021
<b>Household Income &lt;£15K/annum</b>	63.3	64.8
£15K to <£30K/annum	59.2	61.7
£30k to <£60K	57.4	60.5
£60k to <£100K	55.2	58.7
<b>£100K and over</b>	54.5	53.9
Employer size	Mar. 2021	Feb. 2021
Self-employed/sole proprietor	56.2	61.6
2-50 employees	57.4	58.9
<b>51-100 employees</b>	60.4	61.2
<b>101-500 employees</b>	54.0	58.5
501-1,000 employees	58.4	59.9
1,001-5,000 employees	56.4	60.2
5,001-10,000 employees	55.8	60.3
More than 10,000 employees	60.3	61.6
Manager	Mar. 2021	Feb. 2021
<b>Manager</b>	57.8	60.5
<b>Non-manager</b>	57.1	59.7

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:**  
 Specific cross-correlational and custom analyses



## The Mental Stress Change (industry)

Mental Stress Change scores for individuals employed in Real Estate, Rental and Leasing (52.9), Manufacturing (53.9), and Other Services (except Public Administration) (54.0) declined less sharply than the previous month.

Individuals working in Wholesale Trade have the most significant increase in mental stress (64.8), followed by individuals employed in Utilities (61.9), and Arts, Entertainment and Recreation (61.0).

**Mental Stress changes from the last two months are shown in the table below:**

Industry	March 2021	February 2021
Real Estate, Rental and Leasing	52.9	48.5
Manufacturing	53.9	57.0
Other services (except Public Administration)	54.0	59.3
Other	54.1	56.0
Information and Cultural Industries	54.8	64.6
Administrative and Support services	55.0	64.1
Transportation and Warehousing	55.1	57.6
Public Administration	56.5	60.4
Retail Trade	57.1	60.6
I am a student	57.1	63.2
Professional, Scientific and Technical Services	57.9	56.5
Educational Services	58.0	62.7
Finance and Insurance	58.2	59.0
Food Services	59.5	67.5
Health Care and Social Assistance	60.6	62.0
Construction	60.7	59.6
Arts, Entertainment and Recreation	61.0	62.5
Utilities	61.9	70.5
Wholesale Trade	64.8	57.9



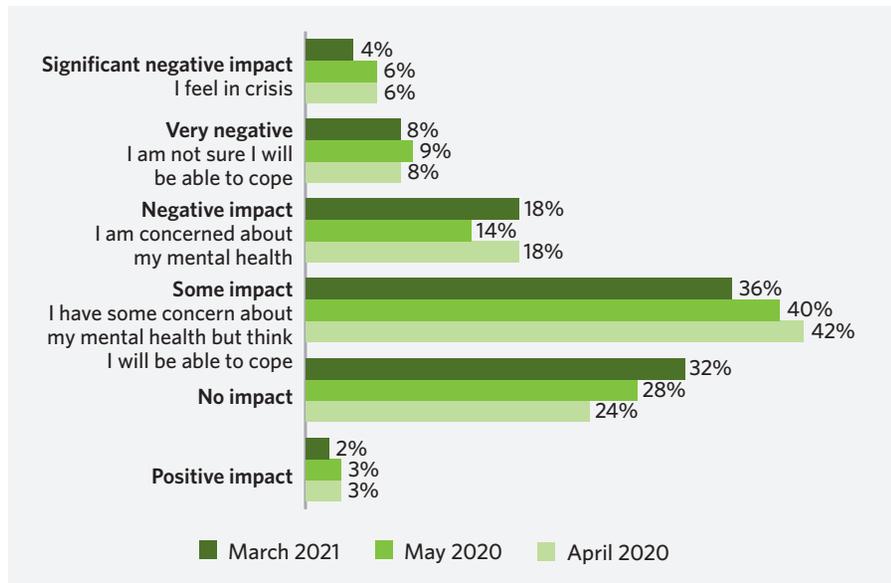
# Spotlight

## The COVID-19 pandemic impact on mental health

Since the first case of COVID-19 was reported in January 2020, the impact of the pandemic on mental health has been widely reported. In April 2020, at the launch of the Mental Health Index™, we asked people to indicate the impact of the pandemic on their mental health. We asked the same question in May 2020 and nearly one year later, in March 2021, we reintroduced this question.

- Nearly one-third (32 per cent) reported a negative or significant impact in April 2020; in March 2021, thirty per cent report a negative or significant impact on their mental health.
- The proportion of people reporting that they feel in crisis has declined from 6 per cent in April 2020 to 4 per cent in March 2021.
- In all three reporting periods, the lowest mental health scores are observed among people reporting a significant impact on their mental health, followed by those reporting very negative and negative impacts.

Impact of the COVID-19 pandemic on mental health

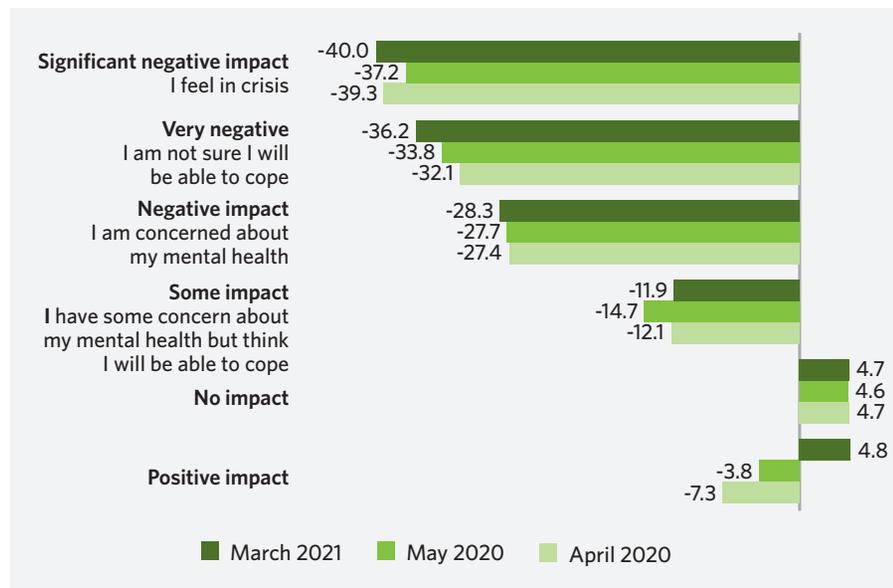




In March 2021:

- People without emergency savings are more than twice as likely as those with emergency savings to report a negative impact on their mental health.
- Parents are 60 per cent more likely than non-parents to report a negative impact on their mental health.
- Individuals under 50 are nearly twice as likely as those over 50 to report a negative impact on their mental health.
- Managers are 30 per cent more likely than non-managers to report a negative impact on their mental health

### MHI score by impact of the COVID-19 pandemic on mental health





## Accessing healthcare during the COVID-19 pandemic

The emphasis on self-care for both physical and mental health conflicts with behaviour during the pandemic. Mitigating the risk factors associated with poor outcomes in virus patients requires a focus on healthy lifestyle and care management for existing conditions. Moreover, coping with prolonged and repeated restrictions, changes and isolation needs mental resilience.

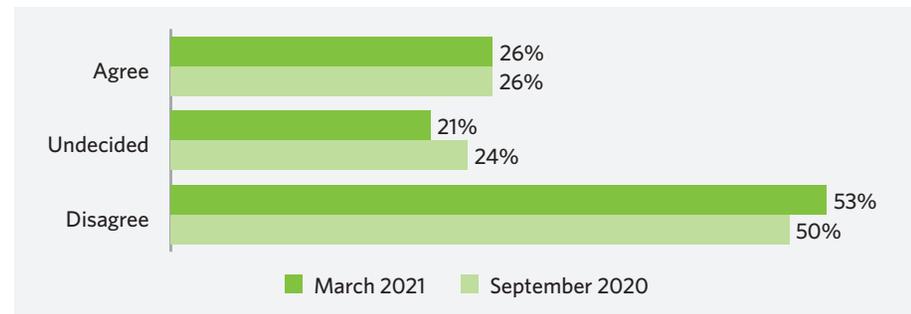
In September 2020, we reported that twenty-six per cent of people were less willing to access physical healthcare and that twenty-two per cent of people were less willing to access mental healthcare during the pandemic.

### Willingness to access physical healthcare

Respondents were asked about their willingness to engage in physical healthcare during the COVID-19 pandemic. Data from March 2021 is consistent with the results collected in September 2020.

- More than half (53 per cent) are willing to access physical healthcare during the pandemic and this group has the most favourable mental health score (-4.1).
- More than one-quarter (26 per cent) are less willing to access physical healthcare during the pandemic and this group has the least favourable mental health score (-25.4).

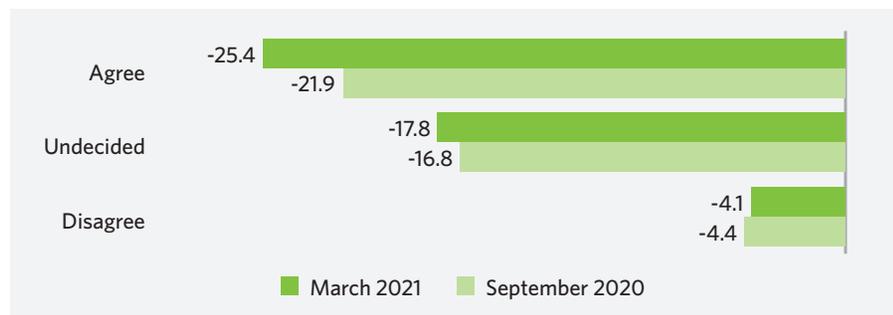
COVID-19 has made me less willing to access physical healthcare





- The mental health score of individuals who are less willing to access physical healthcare has declined from September (-21.9) to March (-25.4).
- Parents are sixty per cent more likely than non-parents to report being less willing to access physical healthcare.
- Individuals under 50 are seventy-five per cent more likely than those over 50 to report being less willing to access physical healthcare.

**MHI score by agreement that COVID-19 has made me less willing to access physical healthcare**

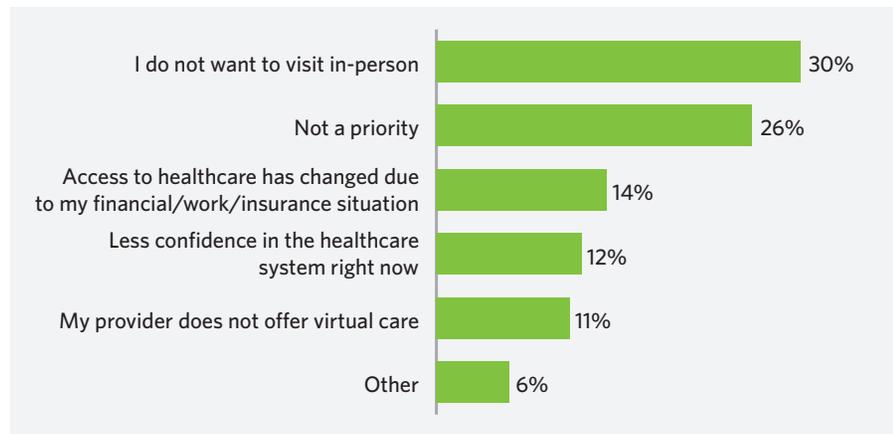




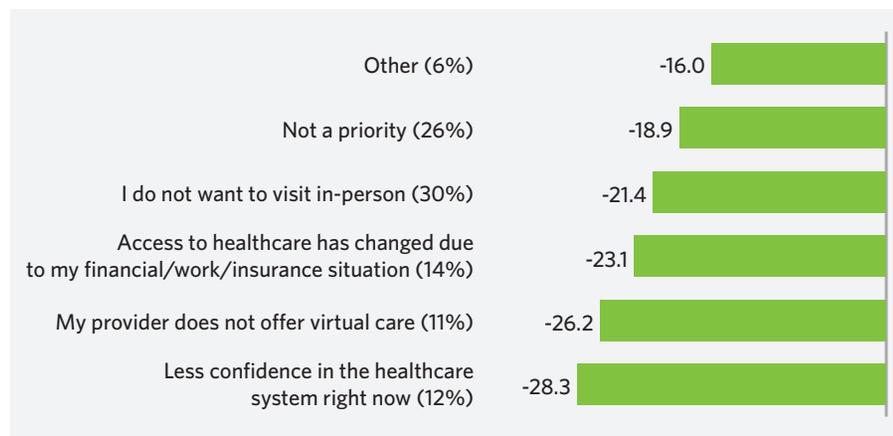
Nearly one-third (30 per cent) report that the reason they are not willing to access physical healthcare is that they do not want to visit a provider in-person.

- Twenty-six per cent of those who are less willing or undecided about accessing physical healthcare report that their physical healthcare is not a priority at this time.
- Employees working fewer hours are nearly twice as likely as those with no change to salary or hours to report that their provider does not offer virtual care and thus, they do not seek physical healthcare.

### Reasons why individuals are not willing to access physical healthcare



### MHI score by reasons why individuals are not willing to access physical healthcare



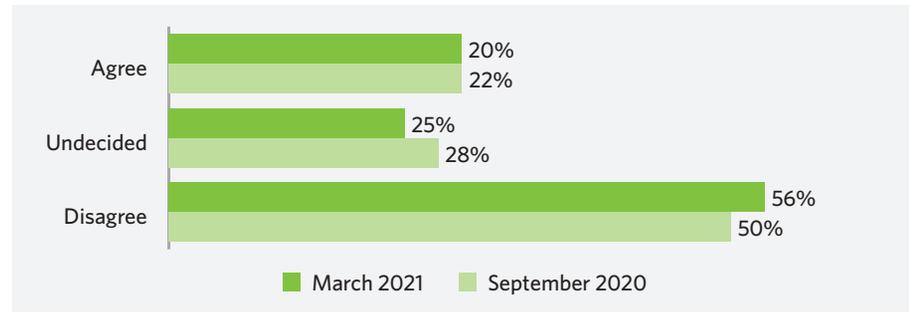


### Willingness to access mental healthcare

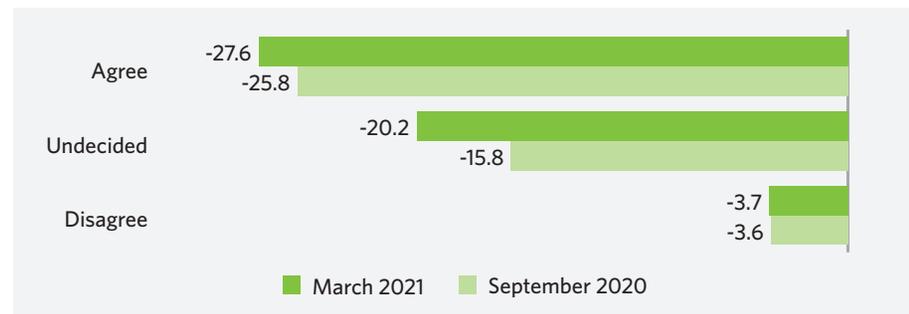
Like physical healthcare, respondents were asked about their willingness to engage in mental healthcare during the COVID-19 pandemic. Data from March 2021 is compared to results collected in September 2020.

- Nearly sixty per cent (56 per cent) are willing to access mental healthcare, a result higher than reported in September 2020 (50 per cent).
- Twenty per cent are less willing to access mental healthcare and this group has the least favourable mental health score (-27.6).
- The mental health score of individuals who are less willing to access mental healthcare has declined significantly from September (-25.8) to March (-27.6).
- Parents are nearly twice as likely as non-parents to report being less willing to access mental healthcare.
- Individuals under 50 are over twice as likely as those over 50 to report being less willing to access mental healthcare.
- Employees with reduced salary or fewer hours are nearly fifty per cent more likely than those with no change to salary or hours to report being less willing to access mental healthcare.

### COVID-19 has made me less willing to access mental healthcare



### MHI score by agreement that COVID-19 has made me less willing to access mental healthcare

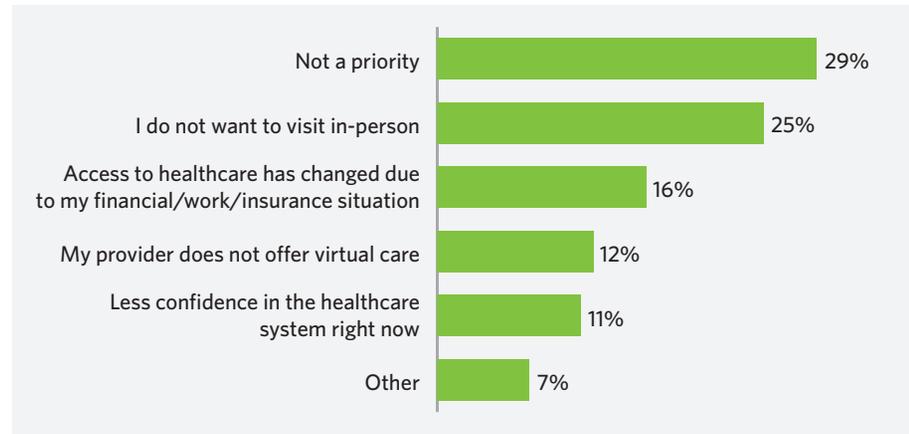




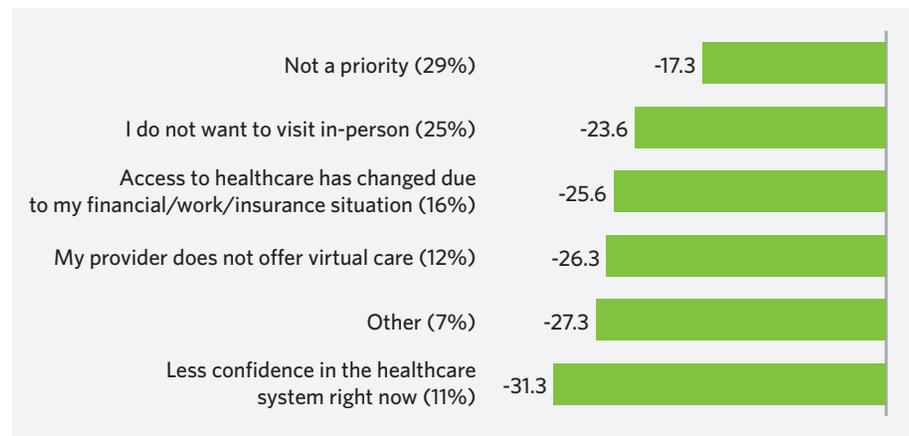
Nearly thirty per cent (29 per cent) report that the reason they are not willing to access mental healthcare is that it is not a priority for them.

- A further twenty-five per cent report that they do not want to visit a mental healthcare provider in-person.
- Parents are more than twice as likely as non-parents to report that their access to healthcare has changed due to their financial/work/insurance situation and this is a reason for not accessing care.
- Employees with reduced salary or fewer hours are more than sixty per cent more likely than those with no change to salary or hours to report that their access to healthcare has changed.

### Reasons why individuals are not willing to access mental healthcare



### MHI score by reasons why individuals are not willing to access mental healthcare





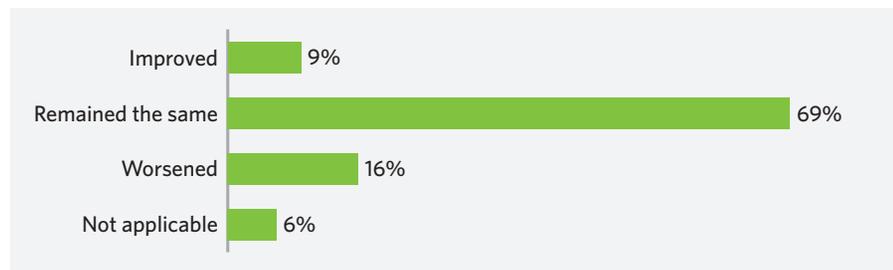
## Workplace relationships

### Relationships with work peers

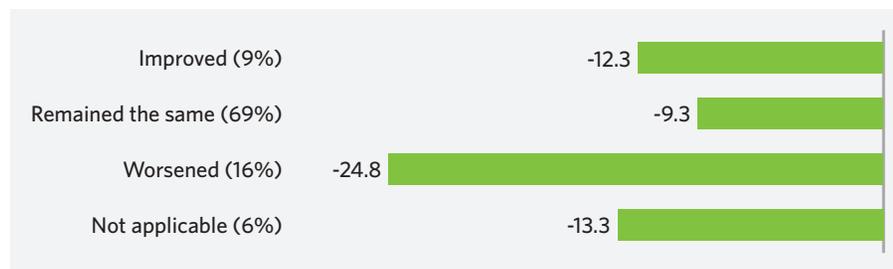
In response to the COVID-19 pandemic, remote work, workplace health and safety practices, personal, family, and job responsibilities have significantly reshaped the workplace since 2020. Interactions between peers and managers have changed because of these necessary shifts. Respondents were asked about whether their workplace relationships have changed since the pandemic.

- Nearly seventy per cent (69 per cent) report that relationships with their work peers have remained unchanged since before the pandemic and this group has the most favourable mental health score (-9.3).
- Sixteen per cent report that relationships with their peers worsened and this group has the least favourable mental health score (-24.8).
- Managers are fifty per cent more likely to report improved peer relationships compared to non-managers; however, managers are also thirty per cent more likely to report worsened peer relationships compared to non-managers.

### State of relationships with work peers compared to before the pandemic



### MHI score by state of relationships with work peers compared to before the pandemic



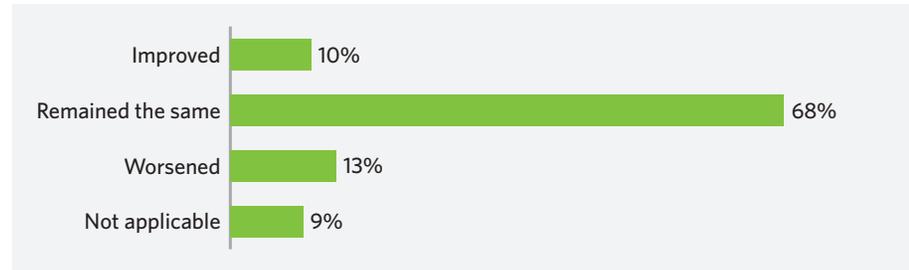


### Employee-manager relationship

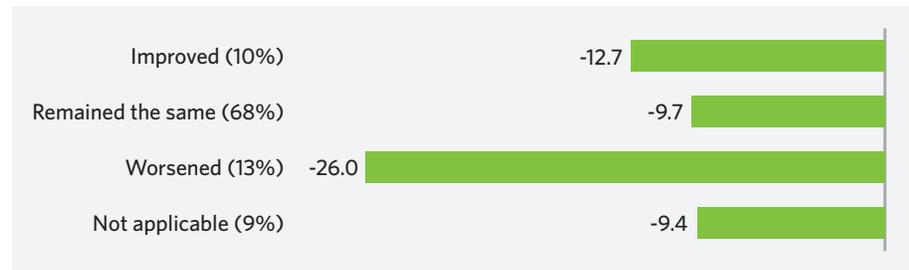
In February 2021, we reported on the status of employee-manager relationships since the COVID-19 pandemic. Like February results (83 per cent), an overwhelming percentage of people report the relationship with their manager remains unchanged and those who have a worsened relationship with their manager have the least favourable mental health score.

- Nearly seventy per cent (68 per cent) report no change to the relationship with their manager compared to before the pandemic.
- Nearly an equal percentage report a worsening (13 per cent) or an improvement (10 per cent) in the relationship with their manager.
- The least favourable mental health score (-26.0) is observed among the thirteen per cent of people who report a worsened relationship with their manager since the pandemic.
- Parents are more than sixty per cent more likely than non-parents to report an improved relationship with their manager.
- Managers are fifty per cent more likely than non-managers to report an improved relationship with their leader.

### State of employee-manager relationship compared to before the pandemic



### MHI score by state of employee-manager relationship compared to before the pandemic





## Post-pandemic work from home

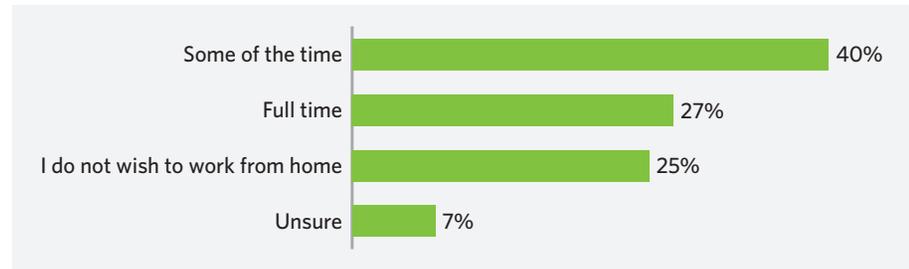
In December, Forbes magazine noted that the pandemic has brought about the greatest work from home experiment in history.<sup>5</sup> Post-pandemic work from home policies are expected to be reconsidered as some employers consider partial or fully remote workforces.

### Employee interest in work from home post-pandemic

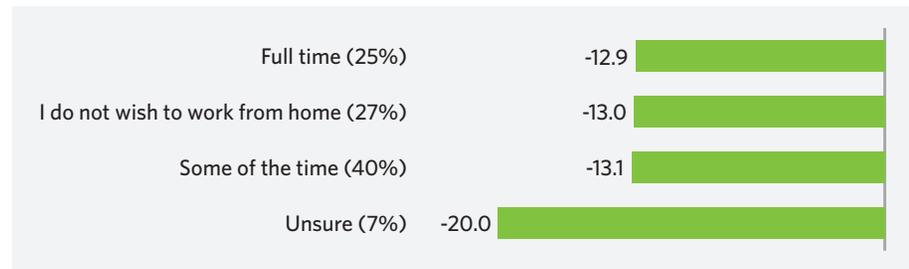
Where the option for remote work is possible, employees were asked about whether they want to work from home post-pandemic.

- Nearly two-thirds (65 per cent) report wanting the flexibility to work from home, at least some of the time, once the pandemic is over.
- Seventy per cent of managers want to work from home at least some of the time compared to 62 per cent of non-managers.
- Approximately two-thirds of respondents, regardless of their demographic profile, report wanting to work from home some of the time or all the time once the pandemic is over.

### Employee interest in work from home post-pandemic



### MHI score by employee interest in work from home post-pandemic



<sup>5</sup> Why Has The Great Work-From-Home Experiment Been So Successful?, Forbes, <https://www.forbes.com/sites/forbes-techcouncil/2020/12/11/why-has-the-great-work-from-home-experiment-been-so-successful/?sh=75366d3c28c7>, 2020.

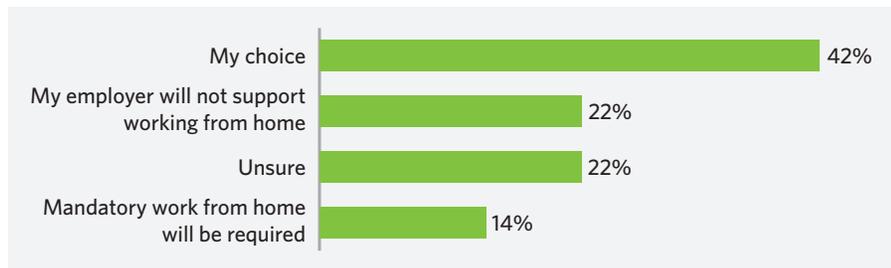


### Employers and work from home

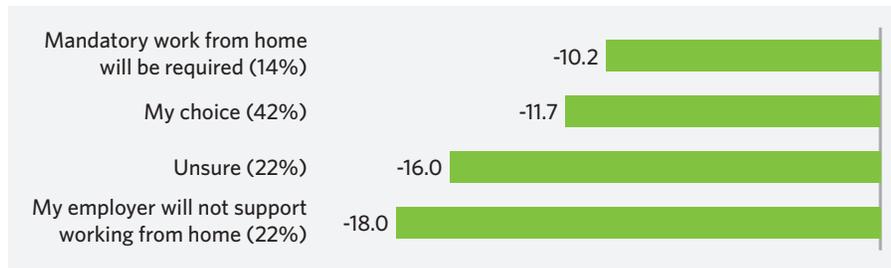
For employees who have the option to work from home, individuals were asked how they perceive their employers will support work from home after the pandemic ends.

- More than one-in-four (42 per cent) believe employers will give employees the option to choose whether they work from home. This group has the second most favourable mental health score (-11.7).
- Nearly one-quarter (22 per cent) report that they do not believe that their employer will support work from home and this group has the least favourable mental health score (-18.0).
- Managers are twenty per cent more likely than non-managers to report that they can or will be required to work from home after the pandemic ends.

### Employee perception of how employers will support work from home post-pandemic



### MHI score by employee perception of how employers will support work from home post-pandemic





## Overview of the Mental Health Index™

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 main 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 2,000 Britons who are living in the United Kingdom 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 the United Kingdom. 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 February 17 to March 1, 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. 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 change 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 (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, 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@morneaushepell.com](mailto:MHI@morneaushepell.com)

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