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Improving mental health support in the workplace: findings from an OHSU pilot test

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Keywords

Mental Health, Leader Development, Workplace Intervention, Employee Well-Being

Abstract Brief Summary/Objectives

The present study responds to mounting concerns over employee well-being through the development of mental health supportive supervisor training. Training supervisors on proactive and responsive supportive strategies is expected to positively influence employee mental health, improve perceptions of support, and lead to positive work outcomes. Using a quasi-experimental approach, we administered and evaluated an online Workplace Mental Health Training (WMHT) for managers at OHSU.

Methods

The intervention utilized a quasi-experimental, pre/post design in 15 departments across OHSU, representing a variety of job functions (i.e., clinical, support). Department managers were invited to participate in a one-hour supervisor training on mental health supportive leadership behaviors, with pre- and post-test scores. The training drew on prior evidence-based supervisor support training (e.g., emotional, instrumental, role modeling, and stigma reduction; Hammer et al., 2019) and manager mental health awareness training (identifying warning signs and early intervention; Dimoff & Kelloway, 2019). Prior to the training, employees were provided with a 15-minute survey on their current mental health, work experiences, and supervisor behaviors, with a follow-up survey two months later. Our final sample included 117 managers who completed the training and 341 employees (managers and employees) who completed the baseline survey. For the follow up survey, 243 of the 341 consented to participate again, for a retention rate of 68%.

Findings

Out of the 192 managers who were invited to participate in our training, approximately 70% of them (n=117) completed the training. Average scores for pre- and post-test scores were 67% and 90% respectively, representing an average learned score of 23%. Effect size indicated a very large effect ($d = 1.49$). Over 90% of the managers rated the training very favorably. Pretest-posttest scores demonstrated significant improvements in employee reports of supportive behaviors – role modeling and stigma reduction (see Table 1), and reductions in reported psychological distress, perceived stress, and anger (see Table 2).

Discussion

Our findings indicate that training supervisors on mental health supportive and responsive strategies (e.g., emotional support, instrumental support; mental health awareness) leads to improved reports of supervisor support and psychological health. The WMHT for managers represents a preventative and responsive approach for supporting employee mental health and well-being. Given their close proximity to their employees, leaders are in a strategic position to respond to the mental health needs of their employees and provide the missing link in improving population mental health (Hammer et al., 2022).

Table 1. Means and Standard Deviations of Dimensions of Employee Reports of Manager Support

Support Type	Mean	SD	t	p
W1: EMOTIONAL SUPPORT	3.88	1.00	.42	.673
W2: EMOTIONAL SUPPORT	3.88	1.02		
W1: INSTRUMENTAL SUPPORT	3.62	.89	-1.31	.193
W2: INSTRUMENTAL SUPPORT	3.69	.88		
W1: ROLE MODELING	3.47	.66	-2.87	.005
W2: ROLE MODELING	3.59	.70		
W1: STIGMA REDUCTION	3.43	.87	-3.47	<.001
W2: STIGMA REDUCTION	3.61	.85		
W1: WARNING SIGN RECOGNITION	3.18	.99	-.20	.839
W2: WARNING SIGN RECOGNITION	3.19	1.01		
W1: WARNING SIGN RESPONSE	3.51	.92	.15	.877
W2: WARNING SIGN RESPONSE	3.50	.99		

Table 2. Means and Standard Deviations of Dimensions of Mental Health Outcomes

Support Type	Mean	SD	t	p
W1: PSYCHOLOGICAL DISTRESS	1.92	.67	2.34	.020
W2: PSYCHOLOGICAL DISTRESS	1.85	.64		
W1: PERCEIVED STRESS	2.57	.69	2.62	.009
W2: PERCEIVED STRESS	2.48	.69		
W1: BURNOUT	3.09	.63	.70	.483
W2: BURNOUT	3.07	.63		
W1: BELONGINGNESS	3.52	.97	-1.66	.099
W2: BELONGINGNESS	3.58	.93		
W1: RESILIENCE	3.54	.76	-.36	.718
W2: RESILIENCE	3.55	.79		

References

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