

The Mental Health Index™ report

United Kingdom, May 2020

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



LifeWorks
by Morneau Shepell

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Executive summary

May marks the third month since the World Health Organization declared COVID-19 a global pandemic. Since the outbreak began, the UK has been particularly hard hit by COVID-19, overtaking Italy for the highest reported COVID-19 deaths in Europe. The total number of UK- reported cases of COVID-19 and total reported COVID-19 deaths rank in the top five worldwide. England has reported significantly more total COVID-19 cases than the rest of the UK, but rates of daily infection are higher in Wales and Scotland.¹

At the start of the month, emergency legislation remained in place across the UK and included strict lockdown measures, as well as closure of non-essential businesses and schools. Attention has shifted to the gradually reopening of British society and the economy. While a majority of UK residents remain opposed to an easing of restrictions until the virus is contained², an easing of restrictions began slowly allowing unlimited outdoor exercise and reopening of select businesses. A new “conditional plan” has since been unveiled and includes a five-level “COVID Alert System” to guide how quickly restrictions can be lifted. Under the new guidance, several additional measures have been introduced to relax the lockdown focused on allowing people who cannot work from home to return to work, while encouraging people to physical distance and consider alternatives to public transit. Schools remain closed. A mandatory quarantine period is also in place for anyone entering the UK by air, with exemptions for people returning from France. The resulting and cumulative effect of the COVID-19 pandemic continues to have a negative impact on the mental health status of UK residents.

¹ UK Coronavirus Data, rate per 100,000
https://coronavirus.data.gov.uk/?_ga=2.66571373.2108234416.1588185057-635563446.1585167913
² Teneo, May 7, 2020 - Coronavirus update



Mental Health Index™

The overall Mental Health Index™ for April 2020 is -14 points. The index represents the deviation from the benchmark of 75, where a negative score indicates poorer mental health relative to the benchmark, and a positive score indicates better mental health. The benchmark reflects mental health data from 2017, 2018 and 2019. A 14-point decrease from the pre COVID-19 benchmark³ remains unchanged since April 2020 and reflects a population whose mental health is similar to the most distressed 1 per cent of the benchmark population. In the three years when benchmark data was being collected. The current score of 61 is equivalent to the first percentile of the benchmark.

The lowest Mental Health Index™ sub-score is for the risk measure of optimism (-17.1 points), followed by depression (-17.0), anxiety (-16.7), work productivity (-14.1), and isolation (-12.4). While there is a modest decrease in anxiety when compared to the prior month, there is a larger increase in optimism and work productivity scores. In spite of this, there was relatively little change in self-ratings of general psychological health (-3.7); however, this measure lags behind the other sub-scores. As well, the financial score was above the benchmark value at 2.3 points, which is an improvement from April. This suggests that Britons have likely started to take full stock of their savings because of this crisis. The most improved risk measure was financial risk. That said, those without emergency savings have experienced a more significant decline in mental health (-27.2) when compared to the overall group. As well, individuals without an emergency fund have uniformly low scores on the Mental Health Index™.

Among individuals who completed the survey in both April and May, 61.0 per cent indicated that they had no change in salary or hours, 35.1 per cent had a reduction in salary or hours since April, and 4 per cent are unemployed, which is up from 2.9 per cent in April. Controlling for household income, individuals reporting reduced salary or fewer hours from last month have lower Mental Health Index™ scores than those still working, and those not employed.⁴ Those with lower incomes are more likely to have experienced reduced salary or hours than those with higher incomes. Regardless of employment status, there is a lower mental health score for females (-16.4) when compared to males (-11.5). Further, the younger the age group, the lower the Mental Health Index™ score.

The overall Mental Health Index™ for April 2020 is -14 points, unchanged from the prior month

³ The raw score for the Mental Health benchmark is 75/100. The May 2020 score is 61/100.

⁴ All respondents had been employed within the prior six months.



The number of adults in the household has an impact on mental health. Households with five or more adults had a significant decline in mental health (-17.9) when compared to the prior month (-14.9). In April, this same group was close to the overall UK mental health score and while the average score remained the same in May, this group declined. This may be attributed to the stress of multiple people working or learning from home and the increased risk of going out to work and potentially exposing others to infection. Individuals who report having one adult in the household showed no meaningful improvement and continue to have lower mental health scores (-17.1) than the average population (-14). The highest score across all household size categories is for individuals living in two adult homes (-12.0).

Individuals employed in Utilities, Finance and Insurance, and Wholesale Trade have experienced a decline in mental health since last month, and have scores that are equivalent or worse than the most distressed one per cent of the population pre-2020. Individuals employed in Transportation and Warehousing, Health Care and Social Assistance, and Arts, Entertainment and Recreation have had the greatest improvement in mental health since last month. The score for individuals in Health Care and Social Assistance also showed improvement (-14.4) when compared to the prior month (-16.4), and is now in line with the average Mental Health Index™ score for the UK.

Individuals who have access to an Employee Assistance Program (EAP) either directly or through their partner, have a better Mental Health Index™ score (-13.2) when compared to individuals without access (-14.8). This is an indication of the value of support, as the availability of EAP demonstrates support from the employer.

Mental Stress Change

The Mental Stress Change score for May 2020 is 65.0. This reflects a continued increase in mental stress compared to the prior month. While some increase in mental stress has been reported over the past three years, the current score indicates that more than half the population is experiencing more mental stress compared to the prior month, with a small proportion experiencing less. This is the second month in a row where the Mental Stress Change score reflects increased mental stress in the population overall. Considering geography, the greatest increase in stress month over month was for respondents living in Northern Ireland (68.3), followed by Scotland (65.5), Wales (65.3), and England (64.9).

While there is a modest improvement in anxiety when compared to the prior month, there is a larger increase in optimism and work productivity scores



There is a significant increase in mental stress for females, and those with children.

Households with lower income experienced a greater increase in stress when compared to higher income households. That said, the Mental Health Index™ shows a decrease in mental health for lower income households. This suggests that individuals with lower incomes are continuing to experience significant mental health impact, especially when compared to those with higher household income.

The greatest increase in mental health stress is seen in employed people with reduced salary (70.3) when compared to last month and the lowest stress increase is among individuals employed with no change in hours or salary (62.6). Among different age groups, individuals in the 20 to 29 age category are feeling the largest increase in mental health stress (68.3). There is a significant increase in mental health stress among households with any number of children. This may be the result of strain arising from lack of childcare, the pressure of online learning and work. Further, households with a lower income report a greater increase in stress than households with higher income. This trend is reflected in the highest income households having the greatest improvements in Mental Health Index™ scores.

The Mental Stress Change scores for the sectors of Public Administration, Administrative and Support services, and Health Care and Social Assistance are more favourable when compared to the prior month. Utilities is the only industry to show an even greater increase in mental stress than the previous month with the Mental Stress Change increasing from 60.9 in April to 71.4 in May. Further, the Mental Stress Change score for Health Care and Social Services industry is improved over the prior month (74.4 to 66.5), but this industry is still showing a considerable increase in mental stress.

There are a wide range of concerns and fears related to the pandemic. The most pervasive concern having an impact on mental health relates to the fear of a loved one passing away (34 per cent), followed the financial impact of the pandemic (28 per cent), the fear of getting ill (25 per cent), and the uncertainty around how the virus will impact family and relationships (21 per cent). While financial fears are prominent, as noted above, financial risk as measured by emergency savings was slightly higher (2.3 points) in May 2020 than the benchmark, suggesting more financial fears than actual depletion of emergency savings at this point in time.



A significant majority of those surveyed (69 per cent) indicate that the COVID-19 pandemic specifically has had a negative impact on their mental health. Forty per cent of the total believe that although they feel this impact, they also feel that they will be able to cope; 29 per cent indicate greater concern, with 15 per cent of the total indicating a very negative impact or crisis. Overall, the younger the individual, the greater the level of negative impact as a result of the COVID-19 pandemic. Those with children are also more likely than those without to have experienced a more negative impact.

Nearly all respondents (96.5 per cent) indicate that they have had some personal disruption as a result of the COVID-19 pandemic. At this point, a significant proportion of respondents (27 per cent) believe that the disruption to them personally will be over in 2021 which is a change from the prior month, where the majority indicated that they felt the disruption would be over in June; 12 per cent believe that it will be over by June 2020; 40 per cent believe it will be over either July, August or September 2020; and 13 per cent believe it will be over either October, November or December 2020. Those who believe that the personal disruption of the pandemic will last longer are more likely to have the greatest negative mental health impact as a result of the pandemic.

The two key drivers of the Mental Health Index™ are financial risk and isolation and remain unchanged from last month.

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

The two key drivers of the Mental Health Index™ remain financial risk and isolation

The full MHI report
Regional Comparison

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



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 a given geography, compared to the benchmarks collected in the years of 2017, 2018 and 2019. The increases and decreases in the index are intended to predict cost and productivity risks, and inform the need for investment in mental health supports 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 deviation from the benchmark of mental health and risk.
2. A Mental Stress Change score (MStressChg), 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: For the current and immediately foreseeable future, the measures in this section relate to the mental health impact of the COVID-19 pandemic.

Collected through an online survey of 2,000 UK citizens

Methodology

The data for this report was collected through an online survey of 2,000 UK citizens who are living in the United Kingdom and are currently employed or who were employed within the prior six months. Participants were selected to be representative of the age, gender, industry and geographic distribution in the United Kingdom. The same respondents participate each month to remove sampling bias. The respondents were asked to consider the prior two weeks when answering each question. The Mental Health Index™ is published monthly, starting in April 2020. The benchmark data was collected in 2017, 2018 and 2019. The data for the current report was collected between April 30 to May 11, 2020.



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.



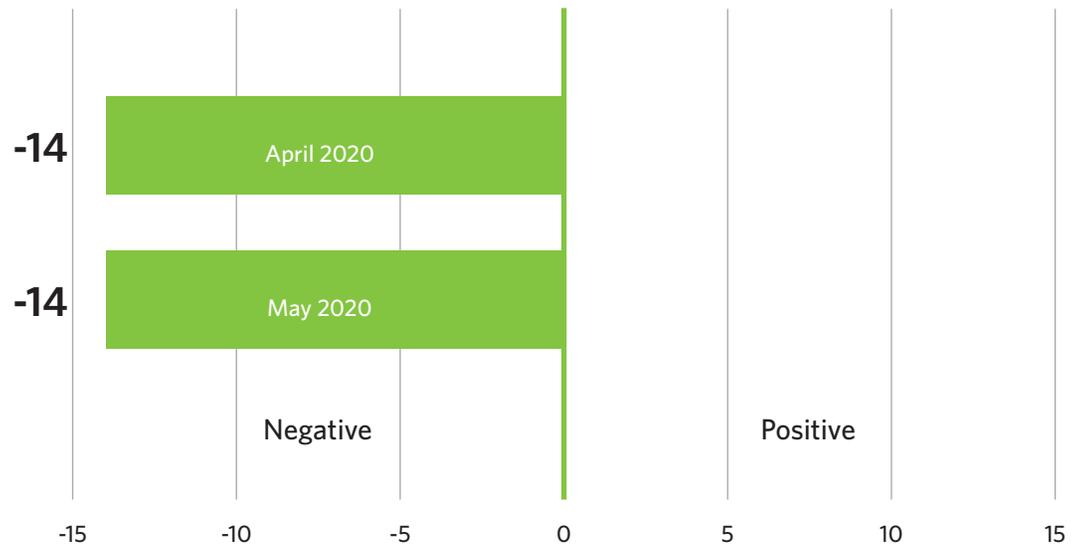
The Mental Health Index™

The Mental Health Index™ (MHI) is a measure of deviation from the benchmark⁵ of mental health and risk.

MHI

Current month May 2020	-14
Last month:	-14

Mental Health Index™ sub-scores ⁶	Current month	Last month
Depression	-17.0	-17.7
Anxiety	-16.7	-17.3
Optimism	-17.1	-16.4
Work productivity	-14.1	-13.6
Isolation	-12.4	-13.0
Psychological health	-3.7	-2.1
Financial risk	2.3	1.4



The overall Mental Health Index™ remains 14 points below the benchmark. The current score is equivalent to the first percentile of the benchmark.

⁵ The benchmark reflects data collected in 2017, 2018 and 2019.
⁶ The demographic breakdown of sub-scores are available upon request.



Employment status ⁷	Current	Last month
Employed (no change in hours/salary)	-11.7	
Employed (fewer hours compared to last month)	-16.3	-13.5
Employed (reduced salary compared to last month)	-17.8	
Not currently employed	-17.3	-26.1
Age group	Current	Last month
Age 20-29	-22.8	-23.1
Age 30-39	-17.3	-17.6
Age 40-49	-15.5	-15.8
Age 50-59	-10.8	-11.6
Age 60-69	-3.2	-4.7
Number of children	Current	Last month
No children in household	-12.0	-11.6
1 child	-17.1	-17.6
2 children	-15.6	-16.9
3 children or more	-17.7	-19.6
Region	Current	Last month
England	-14.0	-13.7
Northern Ireland	-15.8	-19.3
Scotland	-10.8	-12.0
Wales	-12.3	-16.4

⁷ The prior month's question asked whether the respondent was employed or not; additional employment qualifiers were added to the May 2020 survey.

Gender	Current	Last month
Male	-11.5	-12.3
Female	-16.4	-15.7
Income	Current	Last month
Household income <£15K/annum	-20.8	-21.0
£15K to <£30K/annum	-20.0	-18.2
£30K to <£60K	-13.1	-13.4
£60K to <£100K	-9.4	-10.1
£100K and over	-1.9	-4.2
Number of adults in household	Current	Last month
One adult in household	-17.1	-17.0
2 adults	-12.0	-12.1
3 adults	-13.4	-14.9
4 adults	-17.8	-16.8
5 adults or more	-17.9	-14.9
EAP access	Current	Last month
Yes	-13.2	n/a
No	-14.8	n/a
I don't know	-12.6	n/a
EAP usage in 2020 for those with access	Current	Last month
Yes	-20.3	n/a
No	-11.2	n/a

Numbers highlighted in orange are the most negative scores in the group. Numbers highlighted in green are the least negative scores in the group.

Available upon request:

Industry scores, Specific cross-correlational and custom analyses



The Mental Health Index™ (industry)

The mental health of individuals across industries can differ immensely depending upon market and cultural circumstances. The highest mental health scores are observed in Real Estate, Rental and Leasing (-7.2), Professional, Scientific and Technical Services (-9.1), and Manufacturing (-10.6). The lowest mental health scores are observed in Utilities (-23.2), Retail Trade (-17.3), and Administrative and Support services (-16.3). Improvements from the prior month are shown in the table below:

Industry	May 2020 Mental Health Index™	April 2020 Mental Health Index™	Improvement
Transportation and Warehousing	-11.0	-13.8	2.8
Health Care and Social Assistance	-14.4	-16.4	2.1
Arts, Entertainment and Recreation	-12.2	-14.1	1.9
Real Estate, Rental and Leasing	-7.2	-9.1	1.9
Public Administration	-15.0	-16.7	1.7
Food Services	-15.3	-17.0	1.7
Manufacturing	-10.6	-11.7	1.1
Construction	-14.6	-14.3	-0.4
Professional, Scientific and Technical Services	-9.1	-8.7	-0.4
Other	-14.9	-14.4	-0.5
Educational Services	-13.8	-13.2	-0.6
Administrative and Support services	-16.3	-14.9	-1.3
Other services (except Public Administration)	-13.0	-11.7	-1.4
Retail Trade	-17.3	-15.1	-2.1
Wholesale Trade	-15.1	-11.8	-3.3
Finance and Insurance	-13.9	-10.1	-3.8
Utilities	-23.2	-15.2	-8.0

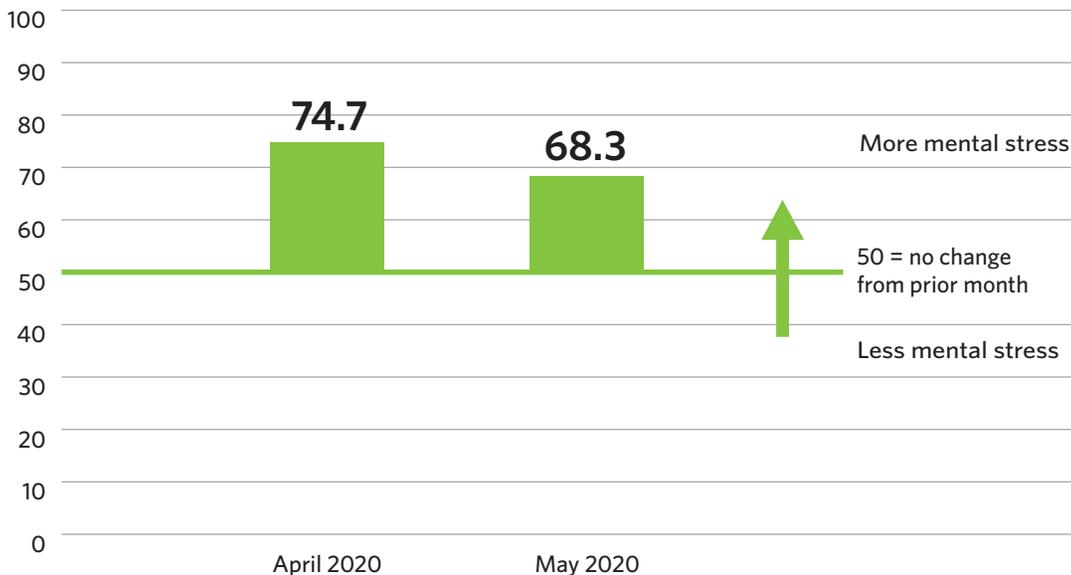


The Mental Stress Change score

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

Mental Stress Change	
Current month May 2020	65.0
Last month	69.7

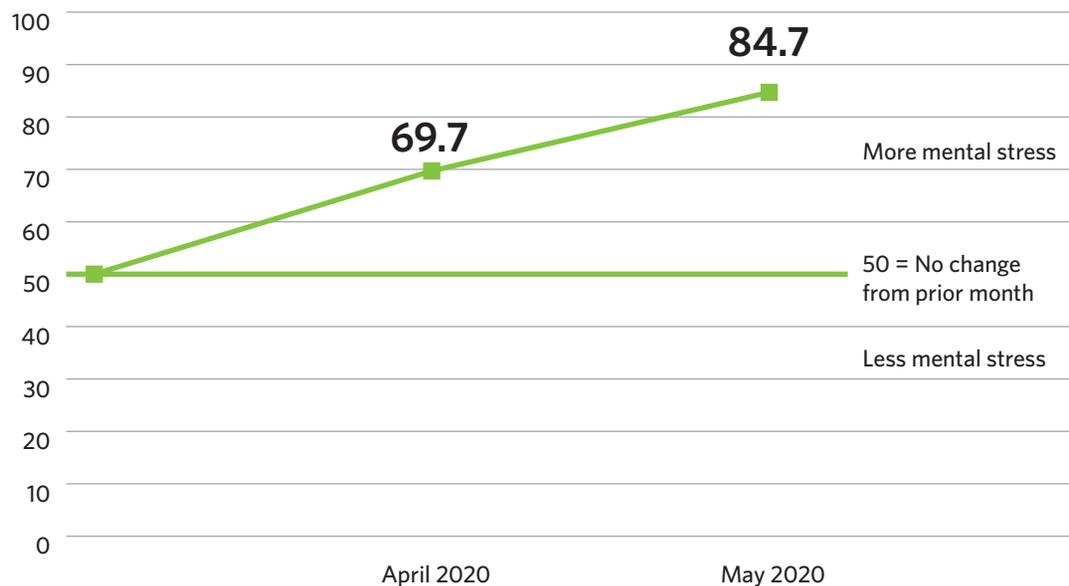
The Mental Stress Change score for May 2020 is 65. This reflects a significant increase in mental stress compared to the prior month. While some increase in mental stress has been reported over the past three years, the current score indicates that more than half the population is experiencing more mental stress compared to the prior month, with a small proportion experiencing less. An increase in the Mental Stress Change in both April and May indicates a significant accumulation of strain in the population.





The Mental Stress Change (cumulative)

The Mental Stress Change (MStressChg) score is a measure of the level of reported mental stress compared to the prior month. The change is rooted against a value of 50 implying no net mental stress change from the previous month, while values above 50 indicate a net increase in mental stress and values below 50 indicate a net decrease in mental stress. The graph below tracks the increases and decreases to account for the cumulative effect on mental stress.





Employment status ⁸	Current	Last month
Employed (no change in hours/salary)	62.6	
Employed (fewer hours compared to last month)	68.0	69.5
Employed (reduced salary compared to last month)	70.3	
Not currently employed	67.1	74.1

Age group	Current	Last month
Age 20-29	68.3	71.5
Age 30-39	67.4	70.7
Age 40-49	65.6	73.4
Age 50-59	64.8	67.5
Age 60-69	57.8	65.2

Number of children	Current	Last month
No children in household	62.7	67.6
1 child	68.0	71.3
2 children	69.3	75.0
3 children or more	70.0	73.4

Region	Current	Last month
England	64.9	69.8
Northern Ireland	68.3	65.3
Scotland	65.5	65.3
Wales	65.3	76.7

⁸ The prior month's question asked whether the respondent was employed or not; additional employment qualifiers were added to the May 2020 survey.

Gender	Current	Last month
Male	63.0	66.5
Female	67.5	73.5

Income	Current	Last month
Household income <£15K/annum	64.6	65.8
£15K to <£30K/annum	65.5	70.9
£30K to <£60K	66.2	68.8
£60K to <£100K	63.4	72.4
£100K and over	61.4	67.8

Number of adults in household	Current	Last month
One adult in household	66.7	69.3
2 adults	64.1	69.9
3 adults	64.8	71.9
4 adults	67.4	67.7
5 adults or more	67.4	62.0

EAP access	Current	Last month
Yes	66.3	n/a
No	66.2	n/a
I don't know	61.7	n/a

EAP usage in 2020 for those with access	Current	Last month
Yes	75.7	n/a
No	63.7	n/a

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

Available upon request:

Industry scores, Specific cross-correlational and custom analyses



The Mental Stress Change (industry)

The mental health of individuals across industries can differ immensely depending upon market and cultural circumstances. The most favourable mental stress changes are observed in Construction (62.4), Administrative and Support services (62.5), and Transportation and Warehousing (63.2). The least favourable mental stress change is observed in Utilities (71.4).

Every industry has reported an increase in mental stress for two consecutive months.

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

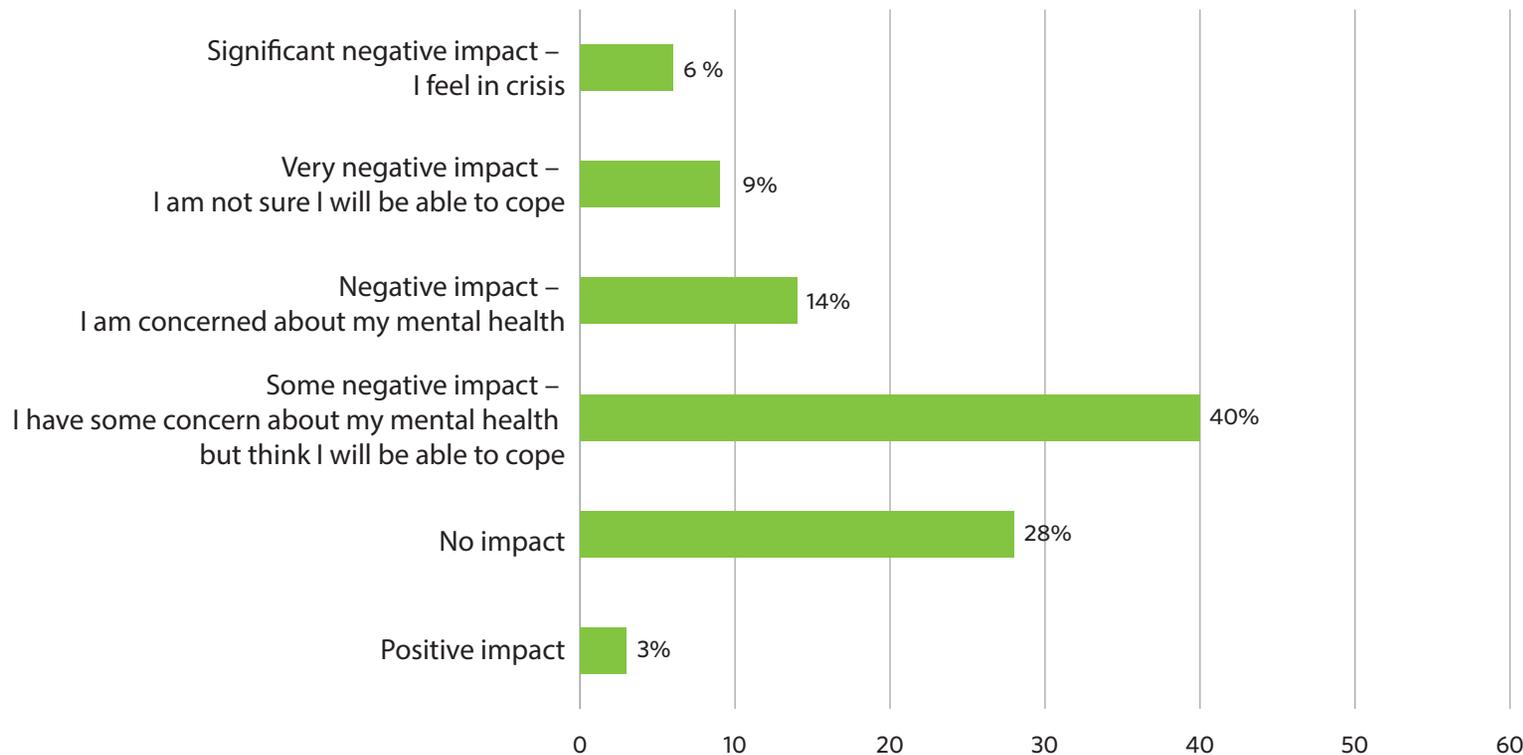
Industry	May 2020 Mental Stress Change	April 2020 Mental Stress Change
Construction	62.4	67.8
Administrative and Support services	62.5	73.5
Transportation and Warehousing	63.2	68.5
Professional, Scientific and Technical Services	63.3	66.8
Other services (except Public Administration)	63.3	66.0
Public Administration	64.0	75.6
Manufacturing	64.7	70.0
Finance and Insurance	65.3	65.9
Wholesale Trade	65.5	66.9
Other	65.5	65.4
Food Services	65.8	72.4
Real Estate, Rental and Leasing	66.2	67.6
Health Care and Social Assistance	66.5	74.4
Educational Services	66.7	70.7
Arts, Entertainment and Recreation	66.7	73.7
Retail Trade	67.2	69.3
Utilities	71.4	60.9
Information and Cultural Industries	60.9	x *

With all scores being over 50, May is the second consecutive month with an increase in mental stress

* Industries with an "x" do not meet the minimum threshold for reporting.



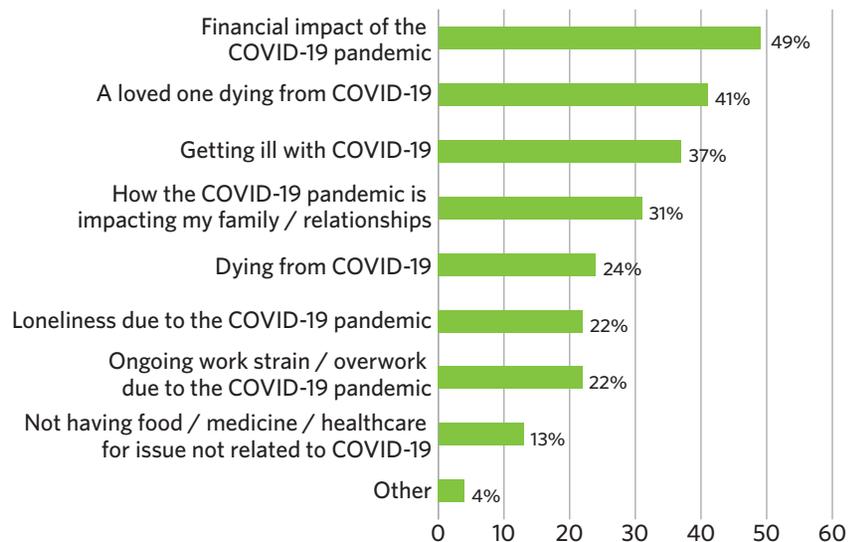
The impact of the COVID-19 pandemic



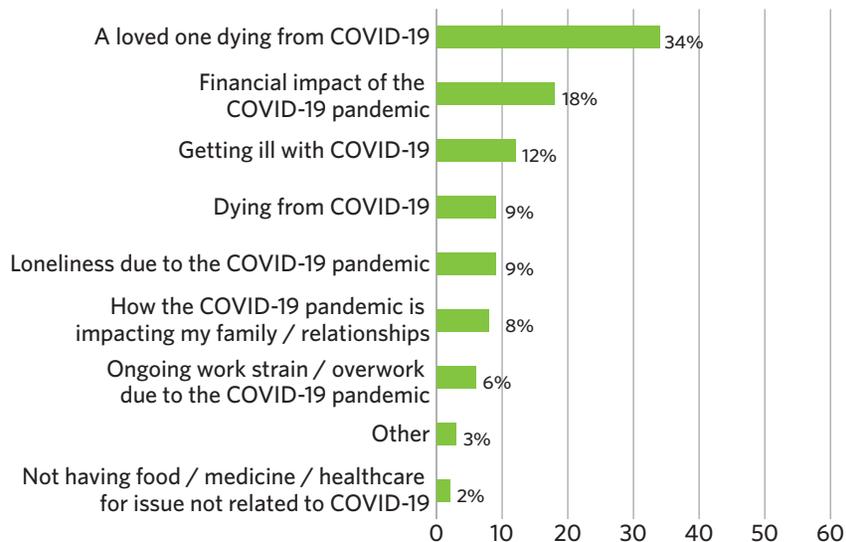
A significant majority (69 per cent) indicate that the COVID-19 pandemic specifically has had a negative impact on their mental health. About half (40 per cent) continue to believe that although they feel this impact, they also feel that they will be able to cope; 29 per cent indicate greater concern, with 15 per cent of the total indicating a very negative impact or crisis. While the impact of the COVID-19 pandemic is high, there has been an increase over the prior month (24 to 28 per cent) in the percentage of people who believe that the COVID-19 pandemic has had no impact on their mental health.



Contributors to the mental health impact of the COVID-19 pandemic (multiple selections)⁹



The single greatest contributor to the mental health impact of the COVID-19 pandemic (multiple selections)⁹

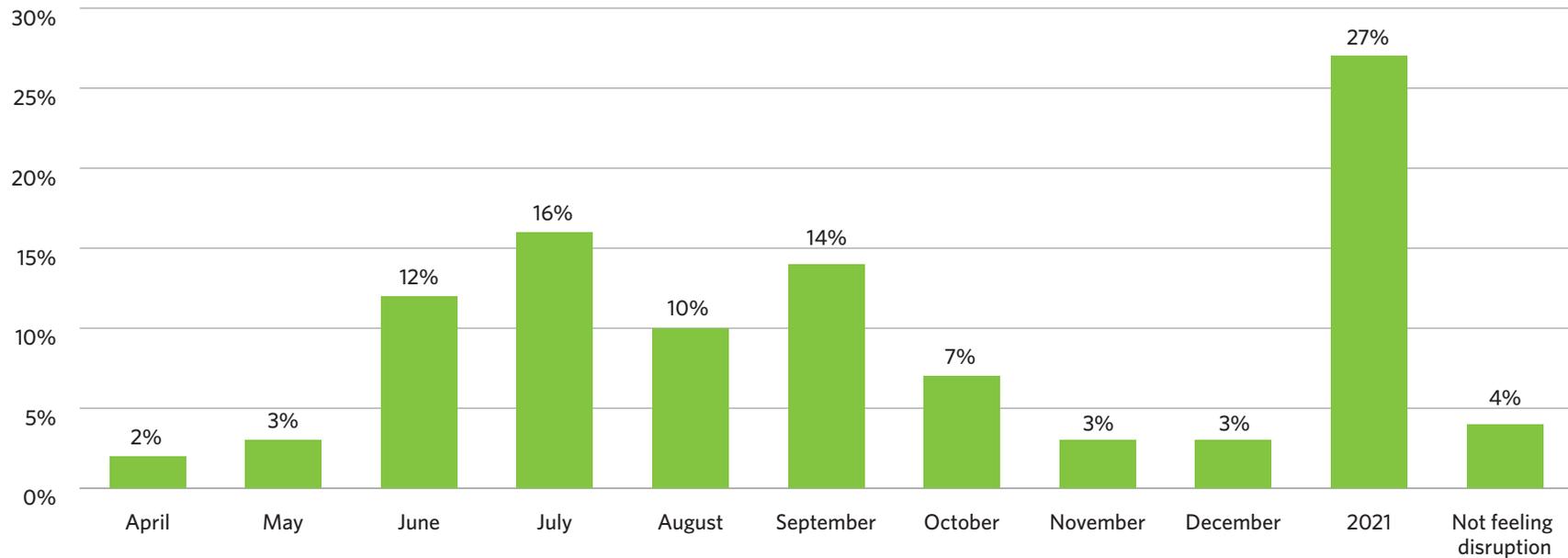


Where there was a mental health impact as a result of the COVID-19 pandemic, the most prevalent concern, and the top concern impacting mental health is related to death of a loved one. The financial impact of the pandemic and becoming ill with COVID-19 follow, with fear of dying being next. The most prevalent concerns remain unchanged over the prior month.

⁹ The charts reflect data from 1,376 people who made a selection.



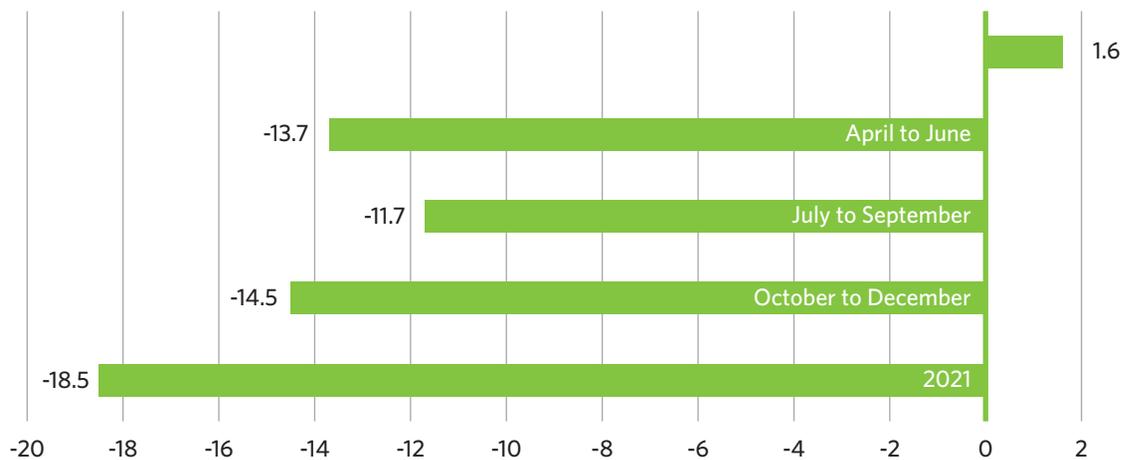
Belief: When the personal disruption from the pandemic will be over



There was a significant shift from the most commonly expected end to the disruption by the COVID-19 pandemic from June 2020 to 2021. In the prior month, 20 per cent of individuals expected the disruption to be over in June 2020, but in the current month, only 12 per cent of individuals believe June will be the end date. In the prior month, 13 per cent of individuals expected a 2021 end to the disruption, but this figure has increased to 27 per cent in the current month.



Mental Health Index™ by expected end of disruption



As of May 2020, the most prevalent belief is that the personal disruption, as a result of the pandemic, will last until 2021. The longer the disruption is believed to last, the more negative the Mental Health Index™ score.



Implications

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

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

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

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



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

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