

Challenges of the Next Normal: Returning to the Office

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Over the course of the COVID-19 pandemic, many people have talked about a “return to normal,” but our post-pandemic reality may be significantly different from our lives before it. Even with effective vaccines, the United States is unlikely to reach herd immunity until the third quarter of 2021.¹ The percentage of people who say they will not be vaccinated, however, makes it possible we will never reach it.² Masks, social distancing, and frequent sanitizing are almost certain to remain a feature of our lives for the foreseeable future.

Nonetheless, we’ve already seen adjustments such as the loosening of government restrictions and easing guidelines from the Centers for Disease Control and Prevention (CDC), especially for people who have been vaccinated. Some employers are reopening offices they closed when the pandemic first hit.

Expect Delayed Impacts to Behavioral Health

Americans are experiencing significantly higher rates of behavioral health conditions during the pandemic. Mental distress in general is impacting 46% of the adult working population, while 49% screened positive for problem use of alcohol, drugs, or prescription medication during the prior year.³ The CDC has documented elevated rates of anxiety and depression among American adults since April 2020, continuing to the present.⁴ Post-traumatic stress disorder

(PTSD) is a known complication of COVID-19 infection,⁵ but it has also impacted the general public. The drug overdose rate has risen to the highest level on record.

Research on previous pandemics has found that psychological issues, particularly anxiety and PTSD, may develop *after* the crisis has passed.⁶ Similarly, many people were unable to observe the usual customs and rituals when a loved one died during the pandemic, so the depth of the loss may not have impacted them yet. These issues are obviously compounded by other stressors. Job worries, economic turbulence, natural disasters, political divisions, and social unrest have all contributed to the difficulties Americans are facing.

These findings suggest that workers returning to the office may have new conditions that will require support. Visible reminders of the pandemic, such as masks and new safety protocols, may trigger anxiety attacks and PTSD for employees returning to the office. Workers who have been able to cope with poor sleep by getting up later or not showering before work, or who have been drinking or using drugs during the day, may find it difficult to adjust to a more regular schedule and a daily commute.

Employers are likely to receive more requests for reasonable accommodations related to alcohol use, anxiety, depression, opioid misuse, drug abuse, and PTSD. Such requests are particularly likely among people who've been directly impacted by one or more of these stressors. This includes employees who were diagnosed with COVID-19; those who had a significant other die from the infection; workers who were furloughed or laid off and are now struggling financially; women who have been juggling work with childcare and/or eldercare responsibilities; employees who have been sheltering in place with an abusive partner; and Black employees or other marginalized groups who may be dealing with race-based traumatic stress.⁷

“Back to Normal”?

Do we even want to return to the “old normal”? Prior to the start of the pandemic, the United States was in a long-term epidemic of diseases of despair, with dramatic increases in depression, suicide, addiction, and overdose deaths since 2000.⁸

People who have developed new behavioral health conditions during the pandemic probably will not recover from them immediately after the it has passed. Most are unlikely to seek treatment,⁹ and those who do seek help are likely to wait years.¹⁰

Despite this, the majority will eventually recover, although it may take longer for those who don't seek professional help.¹¹ Anxiety disorders tend to be persistent,¹² as is PTSD in response to physical disease. The United States has a significant shortage of behavioral health providers, such that at least a third of Americans do not live within a reasonable distance of a behavioral health treatment provider,¹³ and it generally takes weeks to schedule an initial appointment.

Another factor for employers to consider: At least 25% of employees surveyed say they plan to quit their job, but the numbers are even higher for working women¹⁴ and younger workers.¹⁵

What Employers Should Do Now

Even before reopening their offices, employers can act to mitigate the behavioral health issues their employees may be facing. Supporting employees' mental well-being and getting input on what workers want before they return to the office may be essential to prevent a surge in turnover once offices reopen.¹⁶

Regular pulse surveys can help employers gauge employee well-being, morale, and engagement. They can identify issues that workers prioritize; gather information about potential benefits and service offerings; and collect feedback after solutions are implemented.¹⁷ These surveys are important, too, in helping to identify which specific employees are struggling and what issues they see as most urgent.

Considering the findings concerning people drinking during work hours while working from home¹⁸ and the increasing overdose death rate, companies should review their alcohol and drug policies to be sure they clearly indicate that they apply even when working remotely and that they address prescription misuse. These policies should be revised as appropriate and communicated to all employees, along with reminders about employer-sponsored benefits to help workers struggling with substance use issues.

Education on opioid misuse may help workers to recognize problems before they become more serious, as can instruction on other behavioral health issues.

Specific guidelines and training on company expectations related to remote work may help employees to deal with substance use issues, while also allowing them to feel more connected to the workplace.

A wide variety of nontraditional benefits is available to support employee well-being: virtual meditation, mindfulness, exercise, and yoga sessions to support employees holistically;¹⁹ technologies that link employees to appropriate services, from self-guided care to coaching to therapy;²⁰ and mobile apps that help people struggling with mental health needs.²¹

Other benefits to support employee well-being include allowing employees to take "personal" days without being required to explain why they're taking time off (also known as "mental health days"); specific pandemic leave, such as leave to care for others directly impacted by COVID-19; educational sessions on well-being and mental health; resilience training; and childcare and eldercare support services frequently available through employee assistance programs.

The Challenges of the Next Normal

As employees return to the office, new mental health and substance use conditions are likely to become more evident and have a clearer impact on the workplace. An initial manifestation of this may be reluctance to return to the office:

- For people dealing with anxiety, reluctance may be linked to fear of infection.
- Those coping with depression or motivation problems may have difficulty adjusting to a more rigid schedule.
- Those who have developed PTSD may feel better able to manage triggers while working from home.
- People struggling with alcohol or drug abuse may avoid coming into the office in order to continue using substances during the day.

Supervisors will need to obtain additional information to make appropriate decisions about requests to continue remote work. They can do this in consultation with human resources. A useful starting point may be requesting documentation from a treating physician to support the need for ongoing telecommuting. Telecommuting may be a reasonable accommodation for those with anxiety, depression, or PTSD; telecommuting to continue substance abuse is generally not a reasonable accommodation (but you should consult legal counsel in this area).

Stay-at-work (SAW) services are generally helpful in these situations, too. Most disability insurance vendors offer SAW services, and people with mental health and substance use conditions are almost always willing to participate in them. Indeed, behavioral health conditions are among those most likely to benefit from a SAW program's case management services.²²

Given the shortage of behavioral health treatment professionals, employers may want to supplement their traditional benefits with newer solutions, such as virtual therapy and mobile apps.

Moving Forward with Intention

Despite the challenges ahead, there is reason to hope. Behavioral health conditions are treatable, and recovery is the expected outcome. Many people rebound from crises with a clearer sense of purpose, greater appreciation of daily life, and renewed sense of connection.

After many employers stayed on the sidelines for the past two decades as Americans struggled with diseases of despair, more are now taking an active role in improving employee mental wellness.²³ They are also starting to tackle other social issues, such as racism and sexism, and provide new benefits to support caregivers, parents, and others whose stressors outside work were previously seen as their personal business.

The pandemic will change our society in ways that we are only beginning to recognize. Having grown up with parents who lived through the Great Depression and inheriting the frugality and aversion of waste they developed then, I imagine this crisis will reverberate for generations. And I take hope in the fact that, following that and the other crises the world faced early in the 20th century, humanity rebounded to greater prosperity, growing equality, and unprecedented achievements in science and technology.

We have an opportunity to create the next normal — one that supports and sustains mental well-being. Employers can be on the front lines of that, helping to address longstanding issues and reverse some of the trends that have plagued Americans since the turn of the millennium. We can move forward with intention, together, to come back stronger.

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- ¹ Charumilind S, M Craven, et al. When Will the COVID-19 Pandemic End? McKinsey & Company Healthcare Systems and Services. Mar. 26, 2021. Retrieved from <https://mck.co/3wcojy5>
 - ² Aschwanden C. Five Reasons Why COVID Herd Immunity Is Probably Impossible. *Nature*. Mar. 18, 2021. Retrieved from <https://www.nature.com/articles/d41586-021-00728-2>
 - ³ The Standard. *Resource Center: Behavioral Health in the Workplace*. Retrieved from <https://bit.ly/3bz7uWn>
 - ⁴ CDC. *Anxiety and Depression: Household Pulse Survey*. 2021, Retrieved from <https://bit.ly/3bv7PJC>
 - ⁵ Tucker P, CS Czaplá. Post-COVID Stress Disorder: Another Emerging Consequence of the Global Pandemic. *Psychiatric Times*. 38(1). 2021. Retrieved from <https://bit.ly/3eUZ25X>
 - ⁶ Taylor S. For the Generation Shaped by Coronavirus, Life May Never Fully Return to "Normal." *The Guardian*. Apr. 7, 2020. <https://bit.ly/3tWK5o0>
 - ⁷ Jolivet D. How Employers Can Help Workers Cope with Social Unrest. The Standard Insurance Company. Jul. 16, 2020. Retrieved from <https://bit.ly/3uYObxi>
 - ⁸ Brignone E, ER George, et al. Trends in the Diagnosis of Diseases of Despair in the United States, 2009–2018: A Retrospective Cohort Study. *British Medical Journal Open*. Nov. 9, 2020. Retrieved from <https://bit.ly/3uY50x9>
 - ⁹ American Psychiatric Association. Stigma, Prejudice and Discrimination against People with Mental Illness. Retrieved from <https://bit.ly/2SPi3xU>
 - ¹⁰ Wang PS, P Berglund, et al. Failure and Delay in Initial Treatment Contact after First Onset of Mental Disorders in the National Comorbidity Survey Replication. *Archives of General Psychiatry*62(6):603 – 613. 2005. Retrieved from <https://bit.ly/3tXjM1d>
 - ¹¹ Whiteford HA, MG Harris, et al. Estimating Remission from Untreated Major Depression: A Systematic Review and Meta-analysis. *Psychological Medicine*. 43(8):1569 – 1585. 2013. Retrieved from <https://bit.ly/3eV83vA>
 - ¹² Gale CK, M Oakley-Browne. Generalized Anxiety Disorder. *American Family Physician*. 67(1):135 – 138. 2003. Retrieved from <https://www.aafp.org/afp/2003/0101/p135.html>
 - ¹³ Rural Health Information Hub. *Health Professional Shortage Areas: Mental Health, by County, 2021*. 2021. Retrieved from <https://www.ruralhealthinfo.org/charts/7>
 - ¹⁴ Mayer K. One in 4 Workers Plans to Quit Post-Pandemic. *Human Resource Executive*. Feb. 25, 2021. Retrieved from <https://bit.ly/3tYV5RQ>
 - ¹⁵ Stoller K. One Third of Millennials Plan to Quit Their Jobs after the Pandemic — Here's Why, and What Employers Can Do. *Forbes*. Apr. 6, 2021. Retrieved from <https://bit.ly/2QrSz9b>

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- ¹⁶ Maurer R. Turnover ‘Tsunami’ Expected Once Pandemic Ends. Society for Human Resource Management. Mar. 12, 2021. Retrieved from <https://bit.ly/3bz5ai0>
- ¹⁷ WorkTango. COVID-19 Employee Survey Templates. Retrieved from <https://bit.ly/3oqrDmz>
- ¹⁸ American Addiction Centers. Drinking Alcohol When Working from Home. Retrieved from <https://bit.ly/3oruEmA>
- ¹⁹ Page S. 5 Virtual Wellness Program Ideas to Engage Your Remote Employees. *TotalWellness Employee Wellness Blog*. May 18, 2020. Retrieved from <https://bit.ly/3ysaEFp>
- ²⁰ Raphael R. *Mental Wellness and Technology: Rethinking the Relationship*. Global Wellness Summit. 2020. Retrieved from <https://bit.ly/3uYhzDQ>
- ²¹ Morin A. Best Mental Health Apps. *Very Well Mind*. 8, 2021. Retrieved from <https://bit.ly/3eXEoS0>
- ²² Based on internal data developed by The Standard Insurance Company.
- ²³ U.S. Department of Labor, Office of Disability Employment Policy. *Mental Health*. An extensive bibliography of mental health resources for employers, including many developed by employers. Retrieved from <https://www.dol.gov/agencies/odep/program-areas/mental-health>