

Oklahoma's untapped workforce

The economic case for addressing mental health

People living with untreated mental illness may struggle with productivity and absenteeism, and those with severe mental illness are often not participating in the workforce at all. Because of this, Oklahomans experiencing mental illness make up a large part of an untapped workforce. However, many more Oklahomans can thrive in the workforce with simple treatment and wellness interventions available to employers and policymakers, including supported employment programs and other evidenced-based practices.

Recovery is possible and happens every day with appropriate treatment and supports. By embracing this paradigm and advancing practices proven to strengthen and grow the workforce, Oklahoma and its business community can benefit from increased workforce productivity and participation leading to economic gains and improved tax collections. There are solutions to Oklahoma's workforce needs; it's just smart business.

Key takeaways

- Addressing mental health **can help solve some of Oklahoma's toughest economic and workforce challenges**, both by increasing the workforce and by improving productivity of existing workers.
- Investments in employee mental health have a **well-documented return on investment**.
- Employers have opportunities to improve their bottom lines and fuel economic growth with **HR-minded solutions** (including employee wellness programs and tactics to create a stigma-free workplace), and **external advocacy** (such as through chambers of commerce and business associations).

Background

A healthy workforce is critically important. Employee mental health plays a large role ensuring the best possible outcomes for both employer and employee. Mental illness exists on a continuum or spectrum, with experiences spanning from mild to severe. Mild to moderate mental illness includes but is not limited to an array of common diagnoses such as depression and anxiety. Serious Mental Illness (SMI) generally consists of schizophrenia, bipolar disorder, and severe forms of other disorders. Both categories have unique impacts on Oklahoma's workforce. Nationally, employees with untreated depression lose an average of 45 work days annuallyⁱ to absenteeism and presenteeism — the practice of employees coming to work but not fully functioning — combined.

However, people with any mental illness can succeed in the workplace given appropriate supports. For example, more than 80 percent of employees nationally who received mental health treatment reported improvements in both job satisfaction and efficacy.ⁱⁱ However, just last year, 59 percent of Oklahomans that reported a need for mental health treatment did not get help.ⁱⁱⁱ Fear of repercussions at work and stigma around mental illness, as well as the lack of access to quality, affordable care can prevent employees from getting help.

Cultivating an open and stigma-free workplace, as well as ensuring benefits packages and employee assistance programs are available to staff are general solutions preventing escalating problems and supporting those with depression and anxiety. Those experiencing SMI may require more intensive supports, such as involvement in a supported employment program. Supported employment programs create the opportunity for people experiencing SMI to obtain and maintain successful, competitive employment by providing long-term support, assistance, and a number of resources. Supported employment programs emphasize the individual strengths of each participant, and encourage meaningful work by actively seeking partnerships with employers in each participant's field of interest. Work is therapeutic, and will improve the mental health of Oklahomans.^{iv}

COVID-19 and the mental health landscape

COVID-19 has had a profound and likely lasting impact on not only physical health of Oklahomans, but mental health as well. In July 2020, 39.6 percent of Oklahoma adults reported experiencing anxiety and depression symptoms at the height of the pandemic.^v Additionally, one in three COVID-19 patients nationally are diagnosed with a psychiatric or neurological condition within six months of their illness.^{vi} The pandemic has especially impacted Oklahoma's oil and gas industry, which has experienced a precipitous drop in price, resulting in existing wells being shut down and oil field worker layoffs. In 2020, Healthy Minds Policy Initiative projected that economic threats to Oklahoma petroleum industry alone would lead to a yearly increase of five additional suicides, eight additional overdose deaths, 1,651 additional cases of SUDs involving illicit drugs, and 528 additional cases of alcohol abuse or dependence annually.^{vii}

The increased demand for mental health services has highlighted gaps in Oklahoma's mental health treatment systems, even as access to care is being expanded. Medicaid expansion will take effect July 1, 2021, resulting in an estimated 178,000^{viii} to 278,000^{ix} new Medicaid enrollees. This will challenge the existing capacity of behavioral health and primary care providers to meet the demand for behavioral health services.^x The comparatively small number of behavioral health providers participating in insurance networks—typically because of low reimbursement and high administrative burden—will likely be insufficient to meet the increased demand for services. Currently, Oklahomans with private insurance seek out-of-network mental health care 7 to 9 times more often than other kinds of care — directly impacting employee access to care.^{xi} Without network adequacy in the state's insurance networks, or an insurer's ability to sufficiently offer access to both in-network and specialty care, Oklahomans will continue to struggle to find appropriate and affordable behavioral health services in-network and close to home.

The increased need for mental health care in addition to the limited access to care that many Oklahomans face inevitably leads to higher health costs for the employer, with lost productivity and absenteeism negatively impacting the bottom line.

Workforce impacts

Oklahoma's workforce has room for improvement in both quality and quantity, particularly in terms of labor participation. For example, the state's labor-force participation rate, or the number of all

employed and unemployed workers divided against the state's civilian¹ population, is 60.8 percent^{xii} as of February 2021. With nearly 40 percent of Oklahoma civilians not participating in the labor force, a portion of that number may be attributable to or impacted by a lack of mental health treatment or supports. Considering that depression is the leading cause of disability in the U.S. for ages 15 to 44^{xiii}, mental health likely plays a significant role.

In addition to the low labor participation rate, Oklahoma has in recent history had a low unemployment rate, hovering around 3 percent, which is typically considered full employment.^{xiv} Although the rate increased to above 12 percent at the height of COVID-19 shutdowns, it has declined back to about 4 percent.^{xv}

Studies show that most adults with mental illness want to work^{xvi}, and approximately 6 out of 10 succeed with appropriate supports.^{xvii} There are also many people who live with SMI or AMI that are currently working below their potential due to untreated mental illness. By utilizing best practices and embracing Oklahomans experiencing mental illness, the state can expect to see benefits in current employee productivity.

Presenteeism results in productivity loss in the workplace. When sick, fatigued, depressed and anxious employees show up for work, they are not bringing their best selves to the table. Employees experiencing depression miss an average of 31 days of work each year and lose another 28 days of work due to lack of productivity.^{xviii} However, only one third of the people who need mental health treatment will get it. Fear of repercussions at work, stigma around mental illness and the lack of access to quality affordable care disincentives employees from getting help.^{xix xx xxi xxii}

The opportunity: ROI from mental health

Investing in mental health brings two direct benefits for employers – improving the return from existing employees and reducing organizational health care costs.

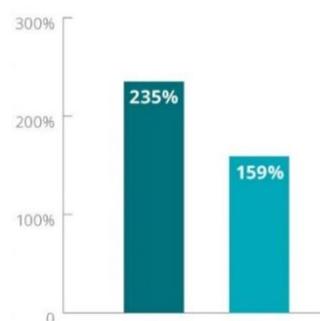
The U.S. has an annual lost earnings amount of \$193.2 billion due to untreated mental illness.^{xxiv} Investing in mental health of Oklahomans in an investment in the state's economy, with profitable outcomes, as evidenced by a study of U.S. and Canadian companies who prioritized employee wellness.^{xxv} Those companies saw a significant rise in stock appreciation, or an increase of their market value, over a six-year period.

Left untreated, mental health conditions often result in higher healthcare costs for a number of reasons. Mental health and physical health are inextricably linked. One example of this is the link between anxiety and risk

The ROI of investment in mental health programs

Stock appreciation based on S&P 500 Index of companies over six-year period

■ Companies with high health and wellness scores
■ Overall S&P 500 appreciation



Note: Both US and Canadian companies were included in this analysis.
Source: Deloitte analysis.

¹ In this context, civilian refers to “persons 16 years of age and older residing in the 50 states and the District of Columbia, who are not inmates of institutions (e.g., penal and mental facilities, homes for the aged), and who are not on active duty in the Armed Forces.” The civilian labor force population consists of civilians classified as either employed or unemployed, as defined by U.S. Department of Labor. (U.S. Department of Labor, n.d)

factors for developing costly physical conditions when left untreated. Anxiety is commonly known to increase the level of cortisol, the stress hormone, in the body. When levels of cortisol are left unchecked in the body, it can raise the risk of dangerous and expensive health problems such as high blood pressure and obesity.^{xxvi} Though there is no generally agreed upon annual cost of untreated mental health in healthcare, research consistently shows higher medical costs for those with untreated mental illness than those without.^{xxvii}

Outside the walls of employers, investing in evidence-based practices enabling people with SMI to work will improve communities' workforce availabilities and improve costs in the public sector. This can be seen in a reduction of Social Security and/or Social Security Disability for people who participate in supported employment programs. Based on this premise, the Social Security Administration recently invested in an ongoing research project in 30 U.S. cities, including Tulsa. This project provided grants to chosen local area service providers to conduct a study on these models to see if supported employment programs significantly save costs and reduce enrollment in SSI/SSDI by providing appropriate levels of support and empowering people who otherwise would likely have had to rely on government programs.^{xxviii}

Solutions

Although the burden of untreated mental health weighs heavily both socially and economically on Oklahomans, there are solutions. Addressing the issue on macro and micro levels broadens the solution and allows for new ways to look at and address the health of the workforce.

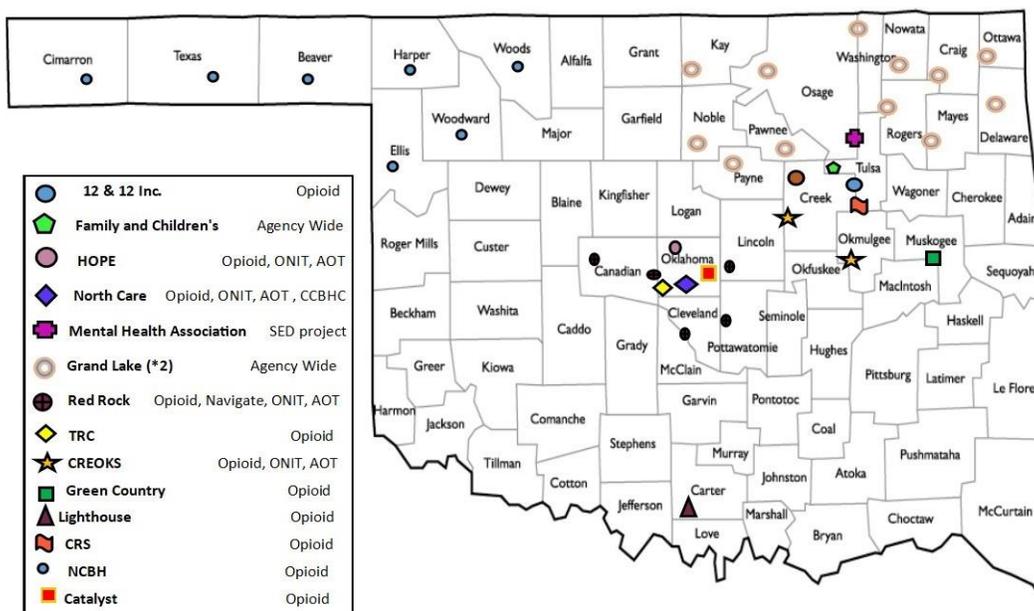
For employers: Steps for maximizing existing workforce

- **Facilitate tools and information for staff.** For example, training employees in Mental Health First Aid^{xxx} is a way to normalize mental health and ensure protective factors² for staff. Mental Health First Aid, a program of the National Council for Behavioral Health, addresses issues caused by mental health stigma and broadens understanding of interventions needed for mental health issues. Further information and training requests can be found at www.mentalhealthfirstaid.org.
- **Have a strong employee wellness program** that emphasizes mental health routine care. The American Psychiatric Association has released a toolkit for business owners about the inextricable relationship between mental health and business health, with information about creating wellness programs.^{xxxii} This resource is free and available online with in depth information offering ideas and insights into employer wellness programs. This can be found at www.workplacementalhealth.org.
- **Have a strong benefits package.** The business community can step up by taking a deeper look at how their benefits packages influence the quality of mental health care that employees receive. In some cases, preventative mental health care can be difficult to obtain in certain benefits

² Protective factors are defined by the Substance Abuse and Mental Health Services Administration (SAMHSA) as, "characteristics associated with a lower likelihood of negative outcomes or that reduce a risk factor's impact. Protective factors may be seen as positive countering events. Some risk and protective factors are fixed: they don't change over time. Other risk and protective factors are considered variable and can change over time. Variable risk factors include income level, peer group, adverse childhood experiences (ACEs), and employment status." (Substance Abuse and Mental Health Services Administration, 2019).

packages. The American Psychiatric Association recommends that employers ask their insurance provider about the frequency of in-network and out of network care for mental health services and the denial of care rates as compared to medical services. In addition, having a reliable and quality Employee Assistance Program is beneficial for workplace mental health, reducing burnout and absenteeism as staff wellness increases.

- Expand your hiring search** to include programs supporting and training people with mental illness or recovering from addiction. Local and state workforce boards and programs such as [Workforce Oklahoma](#) often support programs training people to enter the workforce. In addition, numerous nonprofits operate supported employment programs, which offer wraparound supports for people with serious mental illness. These programs, which serve those experiencing SMI, see rates of competitive employment at 60 percent, which is significantly higher than the 20 percent of those with SMI who receive no support.^{xxxiii} Employers can reach out to local nonprofits to express interest in partnering in these programs, letting the service providers know that their company would be a good fit for clients or that they would be willing to work with an employment specialist to create a supportive workplace. The Employment and Housing Director at the Oklahoma Department of Mental Health and Substance Abuse Services (ODMHSAS) oversees the state funded supported employment programs, which includes 14 teams across the state.^{xxxiv} Below is a map of Individualized Placement and Support (IPS) Model teams in Oklahoma:^{xxvii}



For policy: Increasing workforce availability

Employers and policymakers have the ability to advocate for common-sense solutions by building relationships with legislators and having conversations with other business leaders about the importance of smart mental health policy. Employer advocacy for Oklahomans' mental health is key, and investing in prevention keeps our population healthy and our economy thriving.

- **Activate the business voice for mental health.** Chambers of commerce and other business advocacy groups can be powerful voices in Oklahoma for positive change. Participating in these organizations' legislative advocacy efforts and advocating for inclusion of mental health funding and supports are tangible ways to advance the cause of mental health in Oklahoma. Business leaders can also speak directly with their legislators or local public policy officials about the economic and business importance of a strong mental health system.
- **Expand Supported Employment Programs.** Investing in supported employment programs increases the return on investment by empowering individuals with serious mental illness to become self-sufficient and to successfully rejoin the workforce, putting more money into the economy and reducing the need to rely on other social service programs long-term. Despite the evidence behind the effectiveness of support employment and similar models, these programs are provided to only 2 percent of the people served in state systems nationwide.^{xxxv} Several Oklahoma nonprofits currently receive funding for supported employment through ODMHSAS. As of December 2020, ODMHSAS reports that the waiting list for potential employment seekers looking for the help of one of these teams exceeds 300 participants, with projected growth in 2021.^{xxxiv}
- **Expand mental health treatment systems.** Oklahoma has a myriad of needs within its mental health treatment systems, including capacity in its mental health crisis systems, a need for inpatient beds, mental health provider workforce gaps and unique issues in children's mental health care. Healthy Minds Policy Initiative explores all of these issues, with research regularly posted on www.healthymindspolicy.org. Particularly key issues include:
 - Expand telehealth. Telehealth parity ensures that medically-appropriate telehealth visits are treated the same as similar in-person visits, with no greater patient costs or limitations and with equal provider reimbursement. Oklahoma already mandates service parity in telehealth, but not full parity in payment and process.^{xxxvi} In a public health emergency, expanded telehealth measures helped Oklahomans through the COVID-19 era on a temporary basis. If made permanent, they can transform access to care in rural areas and for mental health services. Passing SB 674 in the 2021 Legislative Session would be a key step.
 - Make mental health more accessible in general health care settings. The Oklahoma Department of Mental Health and Substance Abuse Services, the Oklahoma Health Care Authority and major higher education institutions in Oklahoma are advocating for specific models that integrate mental health care into primary care, which allows more mental health conditions to be treated sooner. Integrated care means providing universal screening for behavioral health conditions during primary care visits, and treatment for those who need it, as well as improving coordination between primary care providers and behavioral health care specialists allowing for better follow-up care. In Oklahoma, there is a limited supply of psychiatrists, but a higher than average number of primary care providers, making it an ideal state for implementing integrated care.^{xxxvii} These models can have substantial and long-term benefits for the wellness of the Oklahoma workforce.

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