

HEALTHY CITYWAVE

2021

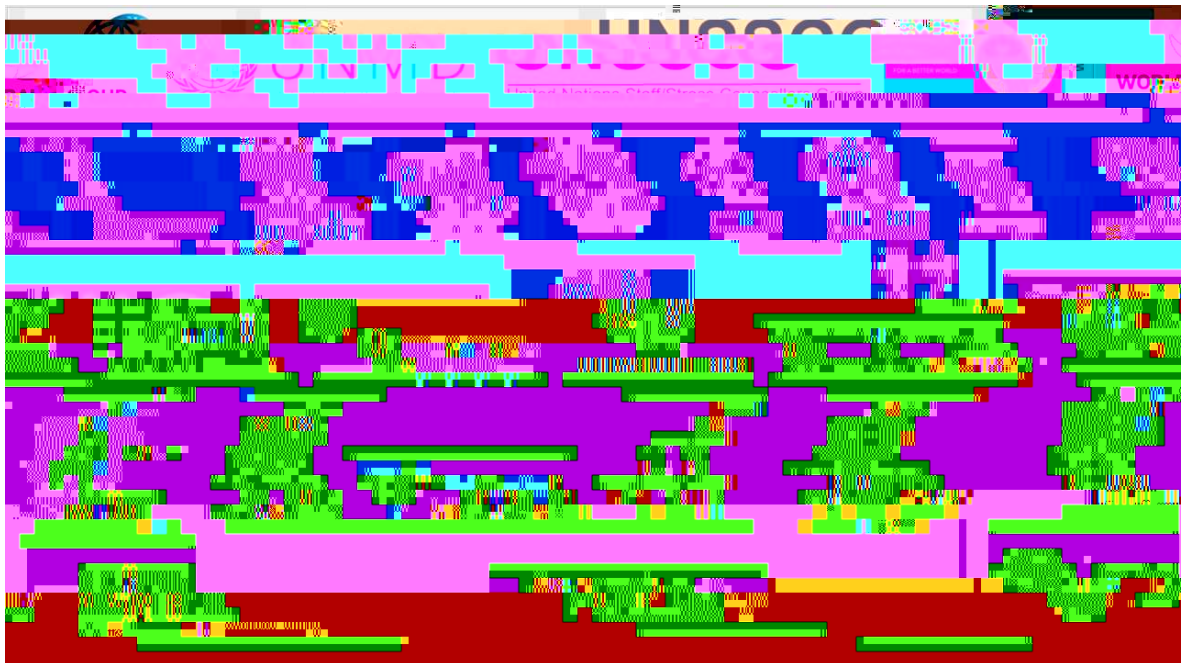
SUMMARY REPORT FOCUSING ON

MENTAL HEALTH AND WELL-BEING

MENTAL

WELL-BEING

HEALTH AND WELL-BEING



This report summarizes the responses of United Nations system personnel from around the world to an anonymous survey fielded in the summer of 2021, about a year after the COVID-19 pandemic began exacting enormous health and economic impacts on individuals and employees. The 2021 UN Wide Health Survey (hereinafter “survey”) queried staff about personnel’s response to the COVID-19 pandemic as well as other central issues relevant to their health, wellbeing and safety. This summary report focuses primarily on the findings related to mental health and well-being. Findings related to domestic abuse are also included as it related to mental health and well-being. A key findings report, which includes further detailed findings and information on the survey methodology, is available upon request.

The survey was undertaken between 22 June and 16 August 2021 (8 weeks), available online in English, French, Spanish and Arabic. A total of 19,084 individuals responded to the survey out of a possible estimated total of 158,572, reaching an overall response rate of 12%. Response numbers ranged from 16 to 4,658. Response rates from individual agencies ranged from 6% to 54% for an average of 23%. The median response rate was 19%.

The survey was open to all personnel of the 23 participating organizations of varying size, including UN Secretariat and all its entities throughout the world. The total survey population was estimated at some 158,000; hence the response rate should be taken as a general guide only.

The survey was a partnership between the UN Medical Director (UNMD) and its UN Health Intelligence (UNHI) working group, the UN Staff/ Stress Counsellors Group (UNSSG), the UN System Workplace Mental Health and Well-being Implementation Board, the focal points in participating organizations, and Agenda Consulting.

The objectives of the survey were as follows

At organizational level

- Build future health and safety strategies for the organization**
- Guide policies and measures that improve staff health and safety, reducing cost of healthcare and absenteeism**
- Implement the UN Mental Health Strategy in the organization**
- Invest in preventive programs to facilitate staff's post-pandemic recovery**
- Provide adequate resources for staff's physical and mental health**
- Improve organization's work environment after reopening and in the post-pandemic world**

At the UN system level

- Benchmark aggregated staff's health risk profiles among UN agencies using a similar methodology for data collection and analytics**
- Compare data on modifiable health risk and preventable medical conditions**
- Inform the UN Mental Health Strategy and the Occupational Health and Safety Programmes under the UNOSH framework**
- Identify best practices in improving staff's health and safety by leveraging collective expertise and promoting shared insights**
- Recognize greater opportunities for collaborative implementation of evidence-based interventions, especially in the most vulnerable areas**

The survey shows results for all measures for all respondents in the following areas

- High health risk factors**
- Work patterns**
- COVID-19 pandemic experience**
- Physical health**
- Mental health and well-being**
- Domestic abuse**
- Office set up/ergonomics**
- Medical information (doctor's visits and preventive screening)**
- Sick leave**
- Vaccines**
- Blood pressure and lab results, and**
- Plans regarding your health**

The survey included questions regarding 15 risk factors, including diet, physical activity, smoke, alcohol, stress, blood sugar, body mass index (BMI), etc

As mentioned above, this summary report focuses primarily on the findings related to mental health and well-being

Findings showed a very high prevalence of preventable health risks and disorders. Forty-three percent (43%) had low health risk (0-2 high health risk factors identified), 39% were in the medium health risk group (3-4 high health risk factors identified) and 18% were in the high health risk group (5 or more high health risk factors identified). In other words, health risk stratification showed 57% of respondents to be in medium and high health risk categories. Health Risk Stratification was done per Dee Edington's methodology, and it was possible to calculate Health Risk Stratification only for respondents for whom all 15 risk factors have been calculated. See .

Key



Key

Very
good

sleep patterns had changed. Of those 53% whose sleep patterns had changed, 59% said that their sleep was better than recommended and 44% said that their sleep was more than recommended.

Key

Recommended

More than recommended

Less than recommended

44

D

To the question

59% responded "to an moderate amount" and 44% responded "to a great extent" that stress had not affect their health that all a great extent.

Fifty two percent (52%) said that stress negatively affect their life was stressful overall. See .

Key

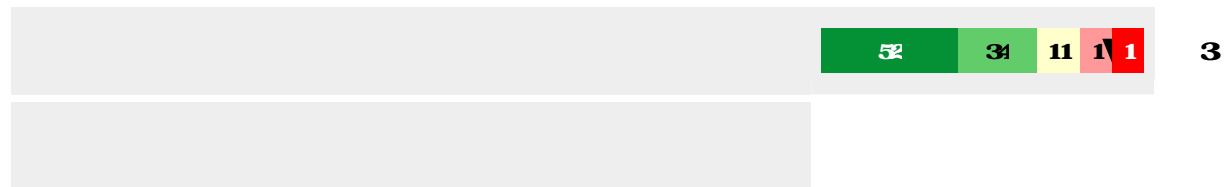
Another finding from the survey was that 30% of respondents felt tense, anxious and/or depressed often or always. Twenty eight percent (28%) never or seldom felt this way. See

On the lower end in terms of percentage rate, 9% selected getting professional support from health professionals outside the organization, 6% chose using prescribed medication to help with mood/help to relax, and 4% responded selected getting professional support from a counsellor in their organization. See [redacted] for the more details about coping with stress.

Regarding support to help cope with pressures or stress at work, the majority of respondents (49%) said that they needed more support from manager/supervisor, followed by 40% who selected friends/family, and 39% who selected colleagues at work. Sixteen percent (16%) said that they did not need any support. See [redacted].

Eighty six per cent (86%) said that they believed that mental health conditions could be treated successfully to a great extent or to some extent, 11% were unsure, and 3% answered negatively. Regarding the question to what extent can one's risk for developing some mental health conditions be reduced, 81% responded positively, 15% were unsure and 2% responded negatively. See [redacted].

Key



Respondents who said that they had not end up pursuing the counseling service (54%) were asked to indicate the reasons why they had not done so. The top reasons include not enough time (32%), preferred to see someone outside the workplace (33%), and concerns that the counseling would not be confidential (24%). See

The survey findings indicate that 20% of respondents have had a mental health condition, regardless of whether or not they received treatment for it. In other words, 1 in 5 respondents experienced a mental health condition at some point.

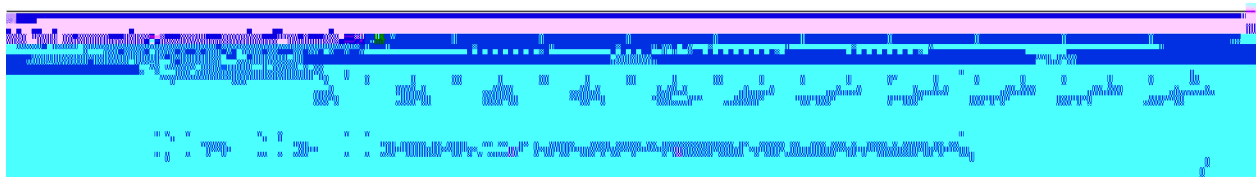
Those who had experienced or were ch A

The forty nine percent (49%) of respondents who had experienced or were experiencing a mental health condition were asked if they were aware of colleagues in their workplace who have experienced or were experiencing mental health conditions. Thirty nine percent (39%) said that they were aware, 32% were not aware, and 29% were unsure. See .

Respondents who said they had experienced abuse (19%) were asked to what extent the abuse had a negative effect on their health. Eighty one percent (81%) of respondents reported that the abuse has had a negative effect on their health to some extent or to a great extent. See [Figure 10](#).



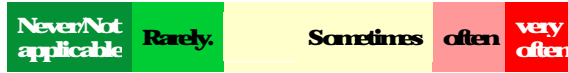
Lastly, 2% of respondents who experienced domestic abuse said that they had used the services of the Domestic Abuse Program in their organization, while 71% said “no” and 27% said not applicable as there was no Domestic Abuse Prevention program in their organization. See [Figure 11](#).



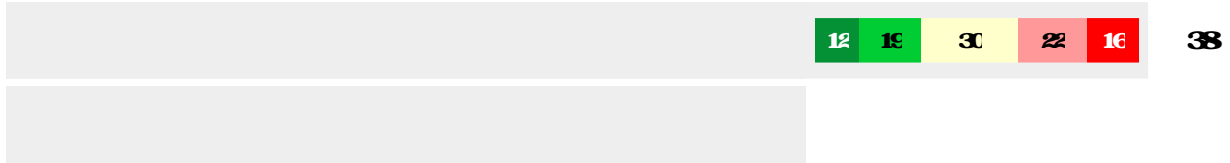
Key



Key



The sources of my stress are as follows:



Key

Never/Not applicable	Rarely	Sometimes	often	very often
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The sources of my stress are as follows (continued):

