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Impact of Workplace Mental Health Programs on Employee Performance and Organizational Reputation

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ABSTRACT

Mental health in the workplace has evolved from a minor issue to a crucial strategic requirement. The impact of structured workplace mental health programs (WMHPs) on employee performance outcomes and organizational reputation is examined in this paper. These programs include Employee Assistance Programs (EAPs), mindfulness-based interventions, cognitive behavioral therapy (CBT) delivery platforms, and organizational culture reforms. The study shows strong links between investments in mental health and quantifiable increases in productivity, decreased absenteeism and presenteeism, improved retention, and improved employer brand perception. These findings are based on peer-reviewed research, government health data, and industry surveys that were mostly published between 2022 and 2025. The World Health Organization (2022) estimates a four-dollar productivity return for every dollar invested in mental health treatment, while the evidence consistently demonstrates that untreated mental health conditions cost U.S. employers about $210.5 billion annually (American Psychiatric Association, 2023). Businesses that incorporate mental health into their strategic framework instead of viewing it as a compliance checkbox outperform their competitors in a variety of financial and reputational indicators. In addition to identifying obstacles to program efficacy, such as poor EAP utilization, stigma, and inconsistent measurement, the article ends with managerial and policy recommendations.

KEYWORDS

workplace mental health programs, employee performance, organizational reputation, EAP, absenteeism, presenteeism, employer brand, burnout, ROI

1. INTRODUCTION

HR policy documents are no longer the only places where mental health in the workplace is discussed. It is now hard to overlook the COVID-19 pandemic's financial and reputational effects on businesses in the years that have followed. According to the American Psychiatric Association (2023), untreated depression alone costs the US economy $210.5 billion a year in lost productivity, higher medical costs, and absenteeism. According to estimates from the World Health Organization (WHO, 2022), depression and anxiety cause around 12 billion lost working days annually, costing the world's productivity $1 trillion.

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These figures are not abstract. According to research from the Society for Human Resource Management (SHRM, 2024), over one-third (35%) of American workers claim that their jobs negatively impact their mental health. According to a different ComPsych (2024) analysis, absenteeism related to mental health rose by 300% between 2017 and 2023, and in the first quarter of 2024 alone, one in ten employee leaves of absence were related to mental health, a 22% increase from the same period the previous year.

Despite the weight of evidence, corporate responses have been inconsistent. While approximately 85 percent of large U.S. organizations already provide some kind of wellness program (Robin Report, 2025), many of these initiatives are superficial: a mindfulness app here, an annual well-being day there. According to Lyra Health's 2024 Workforce Mental Health Report, 94 percent of benefits leaders believe mental health benefits are "very important" to potential employees, nearly tripling from 2023, but real impacts remain challenging for employers to quantify or verify.

This study contends that program design, cultural integration, and consistent measurement are critical to closing the gap between providing mental health treatments and achieving quantitative organizational impact. It examines the impact of WMHPs on employee performance (through absenteeism, presenteeism, engagement, and retention) and organizational reputation. It finishes with practical ideas for firms looking to move beyond tokenistic wellness products and into truly significant mental health ecosystems.

2. LITERATURE REVIEW

2.1 The Scale of the Problem: Mental Health and the Modern Workplace

Since 2020, research on occupational mental health has increased significantly. Bagasi et al. (2025), in a systematic review published in Cureus following PRISMA guidelines and covering studies from 2004 to 2025, discovered that occupational burnout has significant organizational and economic consequences, and that well-designed WMHPs, particularly those incorporating cognitive behavioral therapy (CBT) and mindfulness training, consistently reduced burnout-related outcomes compared to control groups.

The problem's generational dimension is particularly striking. According to SHRM (2023), 43 percent of Generation Z employees report unfavorable mental health impacts at work, compared to only 20 percent of Baby Boomers. According to the 2024 National Alliance on Mental Illness (NAMI) Workplace Mental Health Poll, around 34% of workers aged 18 to 29 were considering leaving their jobs due to mental health issues, compared to 21% of employees aged 50 to 64. These findings are significant because Generation Z is on course to become the largest segment of the global workforce, and their expectations of employers differ markedly from previous generations.

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According to the CDC (2023), absenteeism caused by poor mental health costs employers in the United States around $225.8 billion, or $1,685 per employee each year. Gallup's State of the Global Workplace 2023 Report estimates the global cost of disengaged employees at $8.8 trillion in lost productivity, adding that disengaged individuals can lose company output by up to 34%.

2.2 The Architecture of Workplace Mental Health Programs

The research identifies several unique program kinds, each with their own methods and outcomes:

Employee Assistance Programs (EAPs) are the most extensively used type of WMHP. These are employer-sponsored services that offer confidential counseling, referral, and follow-up support at no cost to employees. In a study based on 54 months of EAP data from January 2017 to June 2021, Attridge et al. (2023) discovered significant improvements in all evaluated outcomes, including depression (reduced by 58%), alcohol misuse (reduced by 64%), absenteeism, and presenteeism after EAP treatment.

Clinical evidence supports mindfulness-based interventions as a structured workplace tool. Mindfulness-Based Stress Reduction (MBSR) and Mindfulness-Based Cognitive Therapy (MBCT) have been proven to reduce stress, improve emotional regulation, and minimize burnout symptoms, especially in high-demand professional settings (Bagasi et al., 2025).

The third area is organizational reform, which includes workload management, flexible scheduling, and psychological safety programs. Stanford researchers, as quoted in CEO Today Magazine (2025), discovered that flexible scheduling reduces cortisol (stress hormone) levels by 30%, an impact comparable to anti-anxiety medicine.

Since the epidemic, the number of digital mental health tools has significantly increased. Woebot Health's clinical trials demonstrated that their AI-supported conversational treatment technology decreases anxiety symptoms 22% faster than traditional EAP delivery methods (CEO Today, 2025). Spring Health's retrospective cohort study of frontline healthcare workers from 2021 to 2022, published in PMC (2023), discovered that among 686 participants with at least moderate depression or anxiety, participation in a digital mental health benefit with care navigation, psychotherapy, and/or medication management was associated with significant improvements in clinical outcomes and workplace functioning.

2.3 Effects on Employee Performance

Research consistently finds three major performance routes through which mental health interventions provide returns: reduced absenteeism, improved presenteeism, and increased engagement and retention.

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In terms of absenteeism, Talkspace and Columbia University researchers discovered that employees suffering from anxiety and depression missed 50% fewer work hours following only 12 weeks of virtual support and therapy. The American Psychiatric Association (2023) reports that employees with untreated depression lose an average of 31.4 workdays each year. Early intervention programs that treat stress and anxiety can reduce absenteeism by up to 27% (Meditopia, 2024).

The data is much more solid for presenteeism, which is defined as attending work while functionally disabled. Presenteeism costs companies around three times as much as absenteeism (Harvard Business Review, reported in CEO Today, 2025). According to research published in the Journal of Clinical Psychiatry (quoted in CEO Today, 2025), employees that are depressed have a 35% lower production rate. According to Attridge's (2023) EAP data, prior to treatment, EAP users lost around 57 hours per month to presenteeism and 7 hours to absenteeism; after counseling, those percentages reduced to approximately 36 hours and 3 hours, respectively.

Companies with high employee engagement rates reported 22% higher output, according to a Gallup study on employee engagement and retention that looked at 1.4 million workers. Organizations with strong mental health support had a 30% lower attrition rate, according to Mind Share Partners (2024). Retention effects significantly affect financial performance because the direct and indirect expenses of losing an employee might reach 50 to 200 percent of that person's yearly compensation (SHRM, 2024).

2.4 Return on Investment: The Financial Case

Over the past five years, there has been a significant increase in the economic evidence supporting investments in mental health. According to the WHO's basic analysis, there is a four-to-one return on investment for mental health treatment: for every dollar invested, four dollars are reimbursed through better health and productivity. According to Deloitte (2023), Canadian businesses with active mental health programs have a median yearly return on investment of CA$1.62 per dollar invested, which increases to CA$2.18 for programs that have been in place for three or more years.

For every £1 invested in employee mental health, Deloitte's UK analysis revealed an average return of £5 (MedCircle, 2025). For businesses utilizing EAPs, the National Safety Council discovered a comparable four-dollar return per dollar (Uprise Health, 2024). According to research dedicated to EAPs, the average return on investment (ROI) varies from $3 to $10 per dollar invested, depending on workforce demographics and program design (Attridge, 2023).

The magnitude of these returns is demonstrated by a well-known corporate example. Salesforce saw a 42 percent decrease in sick days within 18 months after investing $6 million in

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a comprehensive mental health program (CEO Today, 2025). According to Lyra Health's 2024 Workforce Report, companies that prioritize mental health surpassed their peers by 23% in terms of profitability indicators.

It is crucial to remember that a positive return on investment does not happen right away. According to Deloitte's (2023) report, it often takes three or more years of consistent investment to get meaningful returns, highlighting the need for programs to develop and become ingrained in company culture before they produce quantifiable results.

Table 1: Summary of Key Financial and Performance Data

Metric	Finding	Source
Annual cost of untreated depression (U.S.)	$210.5 billion in productivity loss, medical costs, absenteeism	APA (2023)
Global productivity loss (depression & anxiety)	$1 trillion per year; 12 billion working days	WHO (2022)
Mental health-related absenteeism increase	300% rise from 2017–2023	ComPsych (2024)
WHO treatment ROI	$4 return per $1 invested in mental health	WHO (2022)
Deloitte Canada – program ROI (3+ years)	CA$2.18 median annual ROI per dollar invested	Deloitte (2023)
Deloitte UK – employer ROI	£5 return per £1 spent on mental health	Deloitte (2023)
Salesforce program – sick day reduction	42% reduction in sick days within 18 months	CEO Today (2025)
Lyra Health – profitability outperformance	23% higher profitability vs. peers for MH-prioritizing orgs	Lyra Health (2024)
EAP absenteeism reduction	Up to 27% reduction with early intervention	Meditopia (2024)

Presenteeism productivity loss	35% lower productivity in depressed employees	APA (2023)
Attrition reduction with MH programs	30% lower employee attrition	Mind Share Partners (2024)
Disengagement cost (global)	$8.8 trillion in lost global productivity annually	Gallup (2023)

3. MENTAL HEALTH PROGRAMS AND ORGANIZATIONAL REPUTATION

3.1 Employer Branding in the Mental Health Era

Talent recruitment, employee advocacy, public image, and ESG positioning are some of the interrelated routes through which the relationship between mental health investment and business reputation functions.

Today's job hopefuls thoroughly investigate potential employers. 83 to 86 percent of job searchers look for company evaluations and ratings before applying for a position, according to employer branding statistics gathered by Glassdoor (2025). According to Universum Global, 21% of applicants worldwide now include mental health initiatives in their list of requirements for a well-rounded workplace. According to the APA's 2023 Work in America Survey, 92% of employees think it's critical to work for a company that prioritizes their mental and emotional health.

According to Deloitte's 2024 Global Gen Z and Millennial Survey, 61% of Gen Z employees said that a job offer's mental health perks were a decision factor. Over the past two years, the number of job descriptions mentioning "mental health" has tripled, and positions that highlight wellness perks get more candidates from a variety of industries, including software development and investment banking (Talivity, 2023).

Inadequate mental health support has equally important effects on the employer brand. According to MedCircle (2025), 33% of workers for organizations that did not take mental health precautions intended to hunt for a new position within the year. According to Glassdoor's midyear worklife review (2025), as of May 2025, burnout references in company ratings had increased by 73% year over year, with understaffing and employers' unwillingness to handle workload being the main causes. A reputation for disregarding employee mental health bears significant recruitment costs, since 84% of job seekers take this into account when choosing where to apply.

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3.2 The Glassdoor Effect and Employee Voice

The emergence of websites such as Glassdoor has made employer reputation more accessible. The story around their workplace culture is no longer under the employers' control. Job seekers are seven times more likely to apply for a position following repeated good brand exposure, according to Glassdoor's own statistics. On the other hand, a single persistent complaint about inadequate management or a culture of burnout can stifle applications for months.

After work-from-home alternatives, access to mental health care benefits climbed by 18 percentage points between 2019 and 2024—the second-largest growth of all workplace perks (Glassdoor, 2024). However, according to Glassdoor's 2025 statistics, 48% of workers still find it harder to prioritize their mental health at work than they did five years ago, indicating that there is still a gap between benefit availability and efficacy. Offering mental health benefits is a standard expectation in terms of reputation; whether or not employees truly utilize them and feel supported is what makes a difference.

According to LinkedIn's 2022 Global Talent Trends study (quoted in Meditopia, 2024), 63% of job searchers prioritize well-being support. According to LinkedIn data, companies with socially engaged employees have a 58% higher chance of attracting top talent and a 20% higher chance of retaining them. Additionally, employee-shared content generates click-through rates that are roughly twice as high as corporate posts, indicating that genuine employee stories about mental health support have significant amplifying potential.

3.3 Reputational Risk of Inaction

The risk aspect of the situation is just as significant. Failure to address mental health poses a compound threat to an organization's reputation: disengaged workers produce lower-quality work and customer experiences; burnout increases the number of employee departures that are visible on review platforms; and a reputation for having a bad culture actively suppresses inbound talent pipelines.

According to Uprise Health (2024), unresolved disputes are considerably more likely to result in regulatory files or litigation, and EAPs aggressively handle concerns connected to workplace conflicts, harassment, and legal difficulties. U.S. firms lose over $2 billion every day due to absenteeism and lost productivity as a result of incivility, which is partially a consequence of untreated stress (SHRM, 2024).

At the board level, there is a growing understanding of the reputational calculus. According to Vouch (2026), 96% of businesses admit that employer reputation and brand can affect income, but only 44% really keep an eye on it. Because of this measuring gap, many

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organizations underestimate the benefits of effective mental health initiatives as well as the costs associated with ignoring them.

Table 2: Mental Health Investment and Organizational Reputation Indicators

Indicator	Data Point	Source
Workers valuing employer MH support	92% say it is important to work for org valuing emotional well-being	APA (2023)
Gen Z job acceptance decisions	61% cite mental health benefits as a deciding factor	Deloitte (2024)
Job seekers checking company reviews	83–86% research employer reputation before applying	Glassdoor (2025)
Mental health in job descriptions	Tripled in 2 years; linked to higher applicant volume	Talivity (2023)
Planned departures without MH programs	33% of employees plan to leave if no MH measures exist	APA (2023)
Burnout mentions in Glassdoor reviews	73% year-on-year spike as of May 2025	Glassdoor (2025)
MH benefits access growth (2019–2024)	+18 percentage points — 2nd largest benefit increase	Glassdoor (2024)
Companies acknowledging MH → revenue link	96% acknowledge it; only 44% track it	Vouch (2026)
Attrition without workplace connection	65% burnout rate among employees not connected to workplace	Glassdoor (2025)
LinkedIn talent attraction edge	58% more likely to attract top talent with socially engaged employees	LinkedIn (2022)

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4. BARRIERS TO PROGRAM EFFECTIVENESS

4.1 Low Utilization of Available Resources

The gap between program availability and actual use is one of the most enduring gaps in WMHP research. According to Attridge (2023), the average EAP utilization rate for all firms is still less than 6%. According to MedCircle (2025), less than half of American workers say their employers provide mental health benefits in addition to normal health insurance, and even fewer use them. The main obstacle, according to numerous experts, is stigma. In a culture where resilience and professional identity are strongly linked, many workers, especially males and senior professionals, still view seeking mental health care as a sign of weakness or incapacity.

4.2 Stigma and Organizational Culture

According to Glassdoor's 2024 statistics, program uptake is significantly increased when stigma is reduced. Sharing personal mental health stories with coworkers decreased stigma and improved engagement in mental health programs by up to 8%, according to a randomized controlled trial involving 2,400 Novartis employees in four countries (Glassdoor Research, reported in BrianHeger.com, 2024). This implies that successful deployment requires not only program design but also a shift in culture. According to Mental Health America's 2024 Workplace Wellness Research, 86% of employees consider transparency and trust to be essential components of their connection with their company. Employees won't use available resources if they don't feel psychologically safe.

4.3 Measurement Gaps

One significant systemic obstacle is the unwillingness or incapacity to measure results. According to Kyan Health (2026), the majority of businesses that provide mental health benefits merely monitor participation rates or satisfaction surveys rather than real drops in absenteeism, employee turnover, or medical expenses. Programs are more susceptible to budget cuts during recessions since it is challenging to prove ROI to senior leadership due to this lack of measurement. According to Deloitte's approach (2023), baseline data should be established prior to implementation, and program outcomes should be tracked iteratively over a minimum of three years.

4.4 One-Size-Fits-All Program Design

Programs addressing workforce mental health should be tailored to demographic and sector-specific needs, as highlighted by SHRM (2025). Rather than merely facilitating therapy access, a skills-based approach is recommended, equipping employees with both professional and personal tools to tackle mental health challenges. According to ComPsych (2024), industries characterized by demanding shift work and customer-facing roles face heightened mental health-related absenteeism, indicating that traditional Employee Assistance Programs (EAPs) may be inadequate. Additionally, NAMI (2024) notes that younger employees (ages 18–29) are

significantly more inclined to consider quitting due to mental health concerns, indicating a need for distinct support systems for early-career individuals compared to those in mid-career stages.

5. CASE STUDIES AND EMERGING PRACTICES

5.1 Unilever's Mental Health Allies Program

A peer network of qualified mental health advocates has been established by Unilever, designating one manager for every fifty employees trained in psychological first aid. This initiative has contributed to a 41% acceleration in team recovery from high-stress projects, according to CEO Today (2025). The design is significant as it addresses two key issues: accessibility, by providing support close to the workplace, and stigma, by promoting discussions around mental health through the involvement of line managers.

5.2 Walmart and Lyra Health Partnership

As the biggest private employer in the US, Walmart has partnered with Lyra Health to provide up to 20 therapy or mental health coaching sessions per person annually, covering family members for free. The fact that domestic and family stressors are important elements contributing to mental health disorders in the workplace makes this program noteworthy for expanding mental health support to encompass not just employees but also their households (Robin Report, 2025).

5.3 Novartis and Stigma Reduction at Scale

One of the more methodologically sound employer-led mental health studies in recent literature is the Novartis randomized controlled trial, which was conducted in four different nations. Its main conclusionthat peer storytelling about mental health lessens stigma and significantly boosts program participationoffers a repeatable, inexpensive cultural intervention that any organization may use in addition to its official programs (Glassdoor Research, 2024).

5.4 Digital-First Models

According to a 2024 industry study by Dr. Jessica Watrous, the Director of Clinical Research at Modern Health, the company's strategic approach integrates peer coaching, digital tools, and therapy into a single platform. Data from Woebot Health indicates that digital solutions can alleviate anxiety symptoms 22% faster than traditional Employee Assistance Program (EAP) methods. Furthermore, a retrospective cohort study conducted by Spring Health (PMC, 2023) on frontline healthcare workers employed the PHQ-9 and GAD-7 scales to assess clinical benchmarks. Findings revealed that among participants exhibiting at least moderate levels of clinical depression or anxiety, the utilization of a digital care navigation and therapy benefit led to significant decreases in both symptom severity and functional impairment.

6. RECOMMENDATIONS

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6.1 Embed Mental Health into Business Strategy, Not HR Policy

Companies are urged to view mental health as more than just a compliance concern or an employee perk, but as a critical component impacting corporate performance. This entails giving executive leadership responsibility for mental health, including well-being metrics in quarterly performance reviews, and making sure that investments in mental health are taken into account when discussing capital allocation, just like other crucial business functions (Kyan Health, 2026).

6.2 Measure Rigorously and Continuously

Organizations should set pre-implementation baselines for a number of variables, including absenteeism rates, presenteeism scores, healthcare claims, turnover rates, and engagement scores, in accordance with Deloitte's (2023) suggested framework. Results should be monitored for three or more years at 12-month intervals. In EAP research, the Workplace Outcome Suite (WOS), a validated self-report measure comprising absenteeism, presenteeism, job engagement, life happiness, and workplace distress, is frequently suggested as a standardized assessment tool (Attridge, 2023).

6.3 Address Stigma as a Cultural Priority

If workers are afraid to use programs, they won't be effective. Organizations can investigate peer storytelling programs based on the Novartis study, engage in management training in psychological first aid, and normalize mental health talks through leadership visibility. Mental Health America (2024) concluded that transparent communication and supportive management are the strongest determinants of a healthy, productive workplace. Psychological safety is a structural requirement for the success of programs; it is not a soft concept.

6.4 Tailor Programs to Workforce Demographics

Programs should be divided by demographic group, work type, and career stage due to the notable generational differences in mental health expectations and load. According to NAMI (2024) and Deloitte (2024), Gen Z workers are more inclined to choose employers based on their mental health benefits and are more likely to quit if those benefits are deemed insufficient. As a recruitment and retention strategy, companies with younger workforces should aggressively market and advertise their mental health services.

6.5 Leverage Mental Health as an Employer Brand Asset

As a strategic talent acquisition strategy, genuine, targeted communication regarding mental health initiatives should be used in job advertising, career pages, and employee advocacy on LinkedIn and Glassdoor. Transparent mental health communication and inbound talent quality are directly related, since job advertisements that mention mental health get more candidates (Talivity, 2023) and 92% of workers favor companies who promote well-being (APA, 2023).

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7. CONCLUSION

Workplace mental health initiatives, when meticulously planned and executed, provide measurable advantages for companies, including enhanced employee performance, financial effectiveness, and improved reputation. As business leaders prepare for 2025 and beyond, the focus should shift from merely offering symbolic programs to fostering a cultural integration of mental health support. The study highlights the economic toll of untreated mental health disorders, manifesting in increased presenteeism, absenteeism, disengagement, and turnover. Gallup estimates that disengaged workers result in $8.8 trillion in annual global economic losses (2023), while the American Psychiatric Association reports costs of $210.5 billion in the United States alone for the same year. These costs persist as organizations generally opt not to measure them, underscoring the importance of proactive mental health strategies.

At the forefront of the business case for mental health investment, the WHO cites a four-to-one return on investment, while Deloitte reports a CA$2.18 median ROI for established programs. Additionally, Salesforce highlights a 42 percent decrease in sick days attributed to mental health initiatives. Notably, Lyra Health (2024) finds that organizations prioritizing mental health as a fundamental business strategy achieve 23 percent higher profitability compared to their peers, underscoring the significant advantages associated with such investments.

Organizational culture is now critical to recruitment, as job seekers increasingly research employer reviews and prioritize mental health benefits. A significant rise in references to burnout on platforms like Glassdoor underscores the necessity for companies to address these issues, as failure to do so will impact recruitment quality and costs. To improve, organizations should commit to consistent investment in mental health, rigorous measurement of outcomes, fostering open conversations, and recognizing mental health as fundamental rather than a cost center, which is essential for overall performance.

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