

# UN-WIDE HEALTH SURVEY 2021

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SUMMARY REPORT FOCUSING ON  
MENTAL HEALTH AND WELL-BEING





## Overview

This report summarizes the responses of **19,034** 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 employers. The 2021 UN-Wide Health Survey (hereinafter “survey”) *inter alia* 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 19,034 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 Directors (UNMD) and its UN Health Intelligence (UN HI) 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.

## Participating organizations

- CTBTO (Comprehensive Nuclear-Test-Ban Treaty Organization)
- IAEA (International Atomic Energy Agency)
- IARC (International Agency for Research on Cancer)
- ICAO (International Civil Aviation Organization)
- ICC (International Computing Centre)
- IMO (International Maritime Organization)
- IOM (International Organization for Migration)
- UN Secretariat
- UN Women
- UNAIDS (Joint United Nations Programme on HIV/AIDS)
- UNCDF (United Nations Capital Development Fund)
- UNDP (United Nations Development Programme)
- UNFPA (United Nations Population Fund)
- UNHCR (United Nations High Commissioner for Refugees)
- UNIDO (United Nations Industrial Development Organization)
- Unitaid
- UNOPS (United Nations Office for Project Services)
- UNRWA (United Nations Relief and Works Agency for Palestine Refugees in the Near East)
- UNU (United Nations University)
- UNV (United Nations Volunteers)
- UNWTO (World Tourism Organization)
- WHO (World Health Organization)
- WIPO (World Intellectual Property Organization)

## Objectives

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 UN OSH 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.

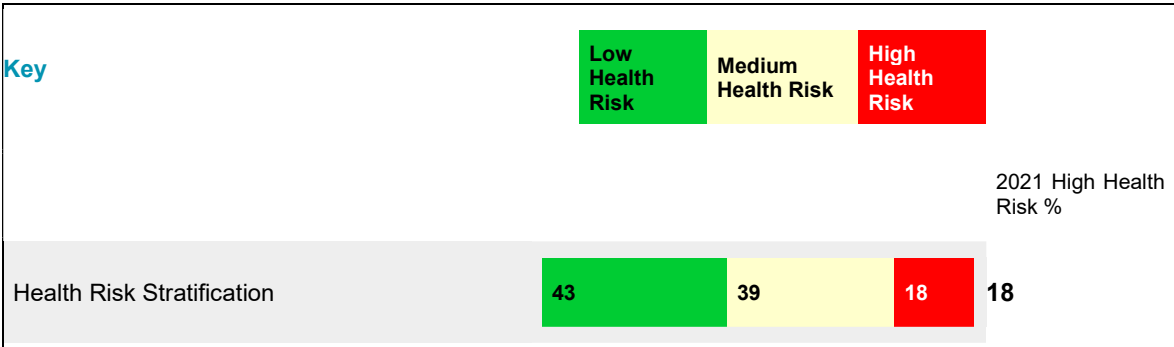
As mentioned above, this summary report focuses primarily on the findings related to mental health and well-being.

Survey Findings

Health Risk Stratification

Findings showed a very high prevalence of preventable health risks and disorders. Forty-three per cent (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 Eddington’s methodology, and it was possible to calculate Health Risk Stratification only for respondents for whom all 15 risk factors have been calculated. See **Figure 1**.

Figure 1



Among the 15 risk factors that were calculated, the highest risk per centage was in relation to diet (less than 5 fruit/vegetables servings/day or more than 2 junk food servings/week) where 93% of respondents were high risk, versus 7% in low to medium risk. The second highest was Physical activity (sedentary lifestyle - less than 30 minutes of moderate physical activity) where 39% were high risk and 61% were low to medium risk. See **annex 1** for the full list of the 15 risk factors.

Looking at the risk factor stress, the findings show that stress had a large effect on the respondent’s health in the past year in 27% of the population

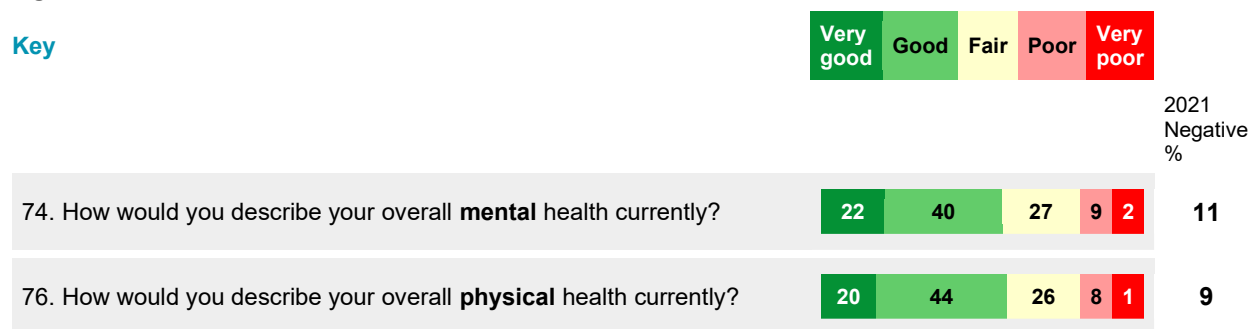
The lowest risk was in relation to Blood sugar (blood sugar is greater than 126mg/dl) and HDL (high-density lipoprotein, or “good” cholesterol, is lower than 40 mg/dl), both of which resulted in 98% of respondents in the low to medium risk and only 2% in high risk group.

Overall health

Regarding the overall health, 11% of respondents described their current overall mental health as poor or very poor, compared to 9% who described their current overall physical health as poor or very poor (in other words the results are similar). The respondents were also asked to describe the current state of mental health and physical health compared to how it was prior to the outbreak of COVID-19: 45% responded negatively regarding mental health while 38% responded negatively regarding physical health. These findings show that the pandemic had impact on our health, and that mental health was impacted to a higher degree than physical health. See **figure 2** and **figure 3**.

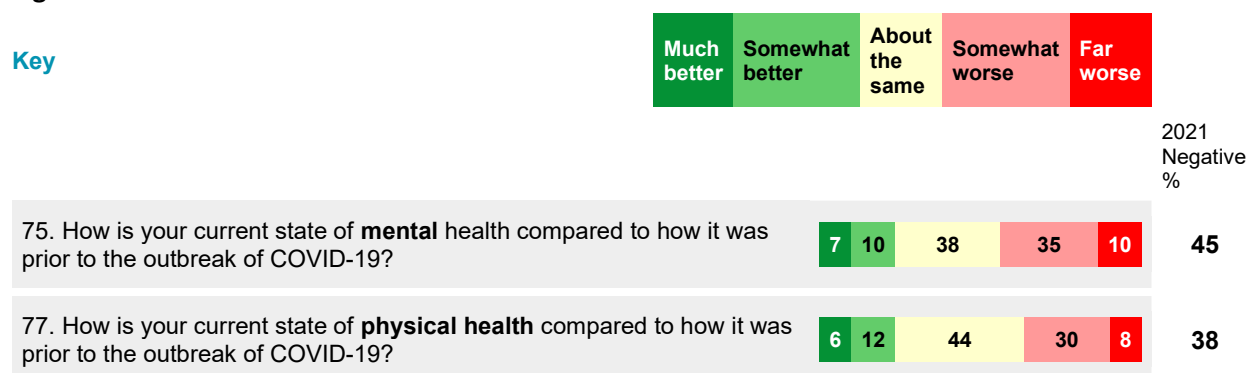
**Figure 2**

Key



**Figure 3**

Key



### Life satisfaction

In general, 70% of respondents reported being satisfied with their work-related life and 75% were satisfied with their non-work-related life. Negative responses (combining moderately dissatisfied and very dissatisfied) were 19% and 13%, respectively. See **figure 4**.

**Figure 4**

Key



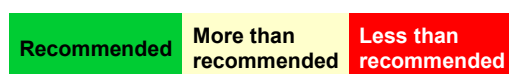
### Sleep

Forty-four per cent (44%) of respondents reported sleeping less than recommended (i.e. 6 hours or less). Sleep patterns had changed since the start of COVID-19 in 53% of respondents; while 47% said that their

sleep patterns had not changed. Of those 53% whose sleep patterns had changed, 59% said that their sleep was more disturbed. See **figure 5** and **figure 6**.

**Figure 5**

**Key**



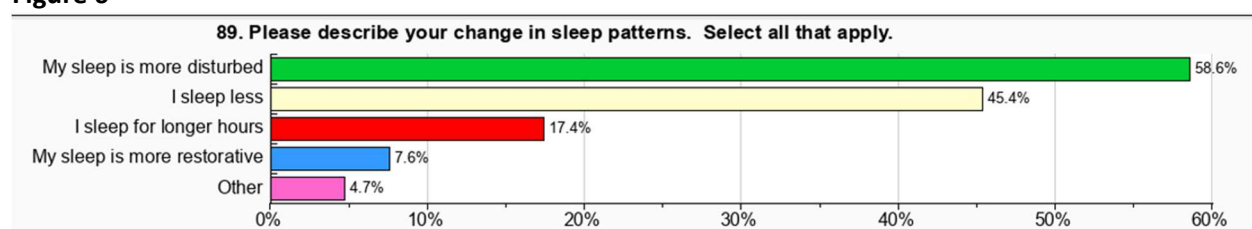
2021  
Negative  
%

87. How many hours do you usually sleep at night?	55	1	44	44
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Key:

- Recommended = 7-9 hours
- More than recommended = 10 hours or more
- Less than recommended = 6 hours or less

**Figure 6**



## Stress

To the question “During the past year, to what extent has stress (regardless of the source) affected your health?” 59% responded “to a moderate extent” or “to a large extent”. Ten per cent (10%) reported that stress had not affect their health at all and 31% said that stress had affected them to a small extent.

Fifty-two per cent (52%) said that stress negatively affected their family, and 53% reported that their life was stressful overall. See **figure 7**.

**Figure 7**

**Key**



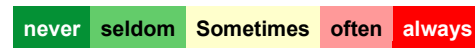
2021  
Negative  
%

109. During the past year, to what extent has stress (regardless of the source) affected your health?	10	31	32	27	0	59
110. During the past year, to what extent has your stress affected your family?	14	33	31	21	1	52
112. How stressful is your life overall?	8	40	39	13		53

Another finding from the survey was that 30% of respondents felt tense, anxious and/or depressed often or always. Twenty-eight per cent (28%) never or seldom felt this way. See **figure 8**.

**Figure 8**

Key



2021  
Negative  
%

111. How often do you feel tense, anxious, and/or depressed?	5	23	43	25	5	30
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### Sources of stress

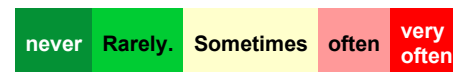
Main sources of stress include “work hours and high workload/demands” at 38% negative, and “lack of time for family, friends or personal pursuits” at 30% negative; followed by “too few resources to complete assigned tasks” at 28%. See **annex 2** for the more details about the sources of stress.

### COVID-19 impact on stress

In terms of how often the COVID-19 pandemic has impacted the stress, top reasons included: 54% were often or very often stressed about the state of the world, 50% about travel, 33% were stressed about family’s health. Other reasons included worries about the future (32%), health (25%) and other reasons (23%). See **figure 9**.

**Figure 9**

Key



2021  
Negative  
%

Please indicate how often the COVID-19 pandemic has impacted your stress about:

142. The state of the world	6	11	28	29	25	54
141. Travel	11	14	25	26	24	50
139. Your family’s health	11	20	36	21	12	33
140. Your future	15	19	34	20	11	32
138. Your health	14	23	37	18	8	25
143. Other	30	15	31	13	10	23

### Coping with stress

When asked how they coped with pressures or stress, top choices chosen by respondents included: 58% said knowing and accepting myself, 55% said by utilizing time management, prioritizing and delegating, and 49% said by being realistic about what they could and could not change.

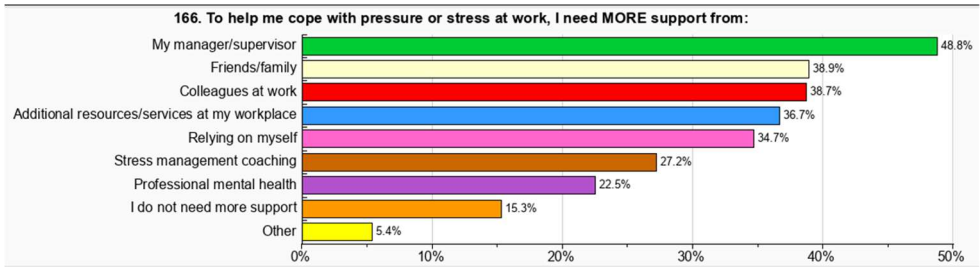


On the lower end in terms of percentage rate, 9% selected getting professional support from health professionals outside the organization, 6% chose using prescribed medication to help with mood/help to relax, and 4% responded selected getting professional support from a counsellor in their organization. See **annex 3** for the more details about coping with stress.

**Support to help cope 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 per cent (16%) said that they did not need any support. See **figure 10**.

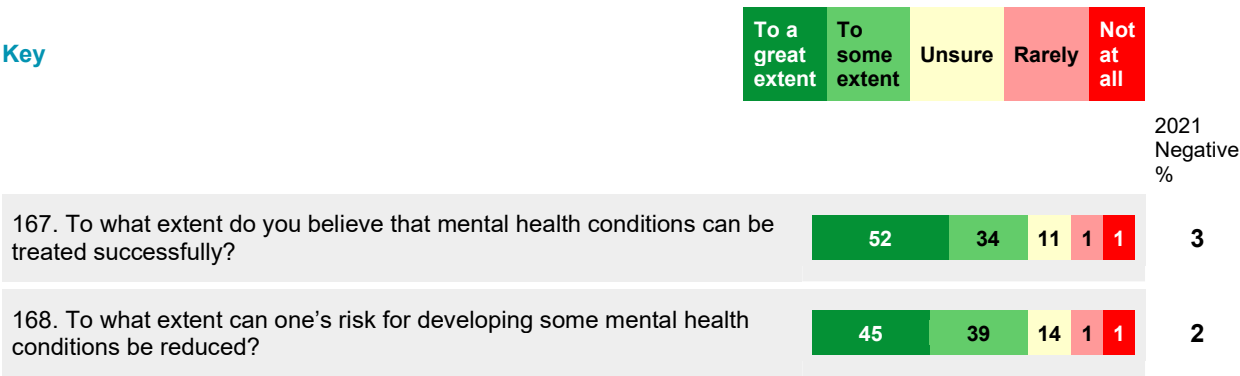
**Figure 10**



**Mental health**

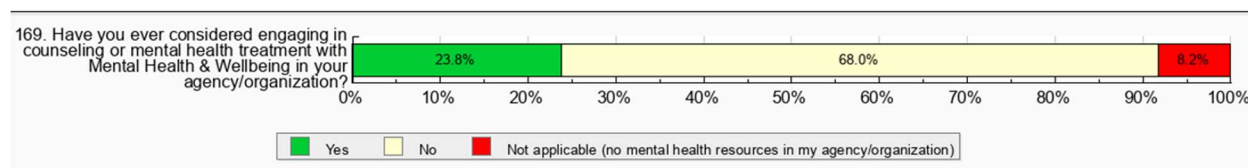
Eighty-six per cent (86%) said that they believed that mental health conditions could be treated successfully to a great extent or to some extent, 11% were unsure, and 3% answered negatively. Regarding the question to what extent can one’s risk for developing some mental health conditions be reduced, 84% responded positively, 15% were unsure and 2% responded negatively. See **figure 11**.

**Figure 11**

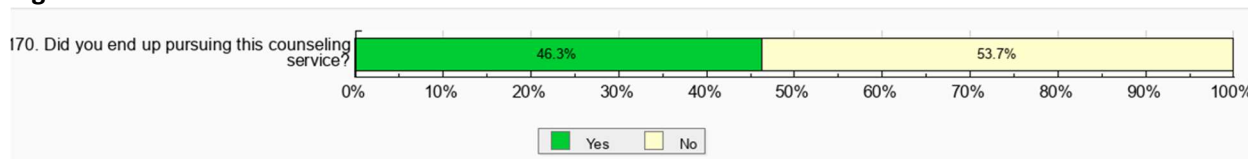


Twenty-four per cent (24%) of respondents said that they had considered engaging in counseling or mental health treatment with Mental Health and Well-being in their organization, while 68% said no, and 8% said “not applicable” as there were no mental health resources in their organization. Those 24% who said they had considered engaging in counseling or mental health treatment with Mental Health & Wellbeing in their agency/organization, were asked if they ended up pursuing this counseling service: 46% said yes and 64% said no. See **figure 12** and **figure 13**.

**Figure 12**

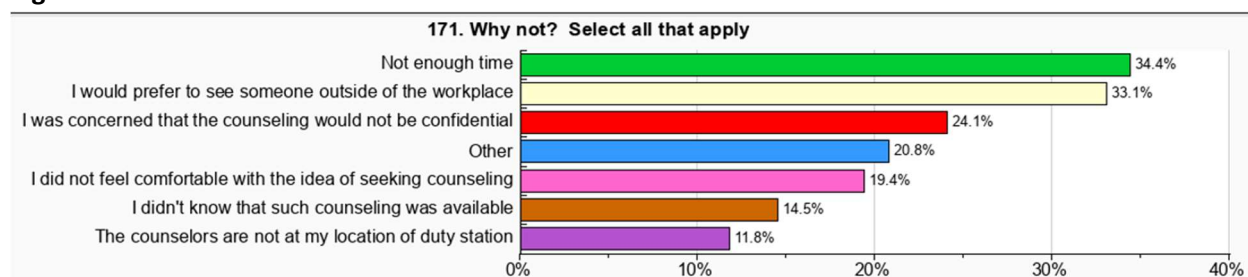


**Figure 13**



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 (34%), preferred to see someone outside the workplace (33%), and concerns that the counseling would not be confidential (24%). See **figure 14**.

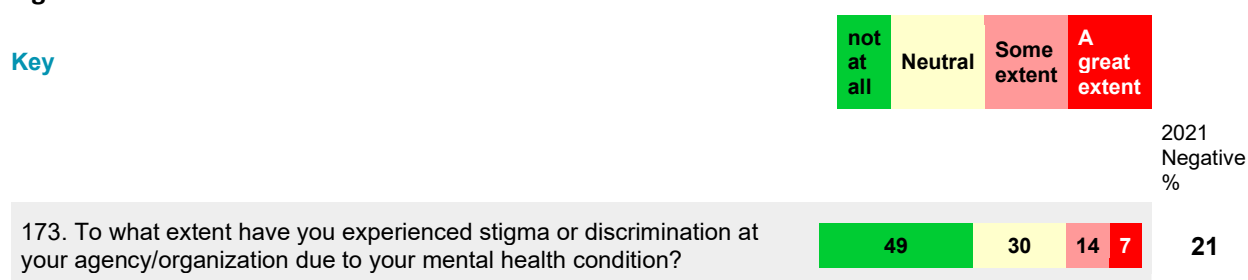
**Figure 14**



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.

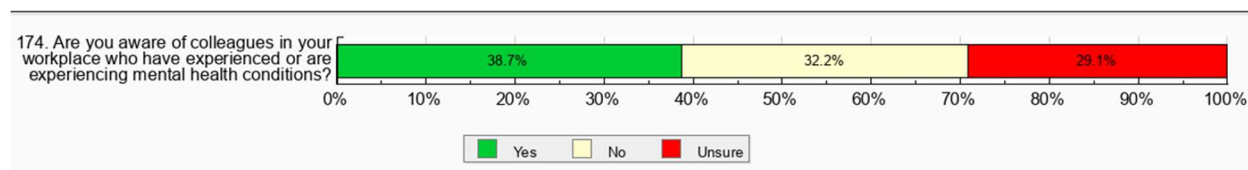
Those who had experienced or were experiencing a mental health condition were asked to what extent they experienced stigma or discrimination at their organization due to mental health conditions: 49% said not at all, 30% were neutral and 21% said yes to some or a great extent. See **figure 15**.

**Figure 15**



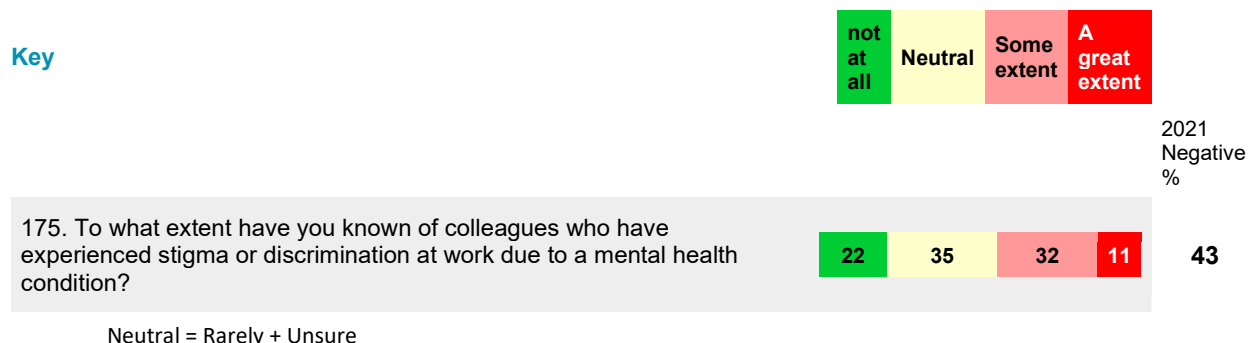
The forty-nine per cent (49%) of respondents who had experienced or were experiencing a mental health condition were asked if they were aware of colleagues in their workplace who have experienced or were experiencing mental health conditions. Thirty-nine per cent (39%) said that they were aware, 32% were not aware, and 29% were unsure. See **figure 16**.

**Figure 16**



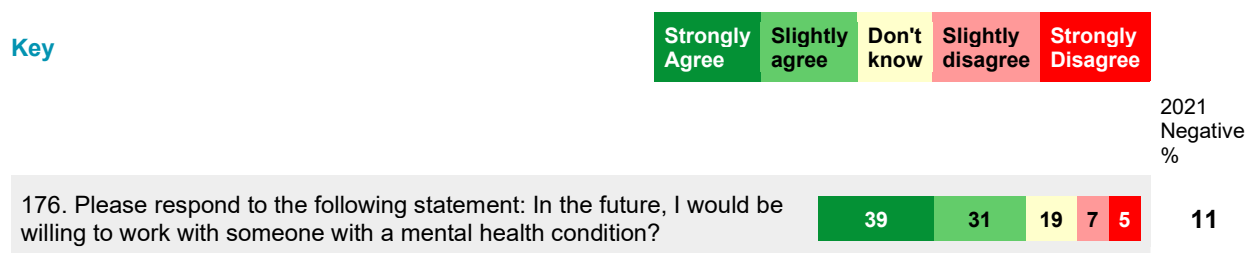
The thirty-nine per cent (39%) of respondents who were aware of colleagues who have experienced or were experiencing mental health conditions were asked to what extent had they known of colleagues who experienced stigma or discrimination at work due to a mental health condition: 22% answered “not at all”, 35% were neutral (e.g. they selected “rarely” or “unsure”), and 43% selected to “some extent” or “a great extent”. See **figure 17**.

**Figure 17**



When asked to respond to the statement “in the future, I would be willing to work with someone with a mental health condition”, 70% agreed, 19% did not know, and 11% disagreed. See **figure 18**.

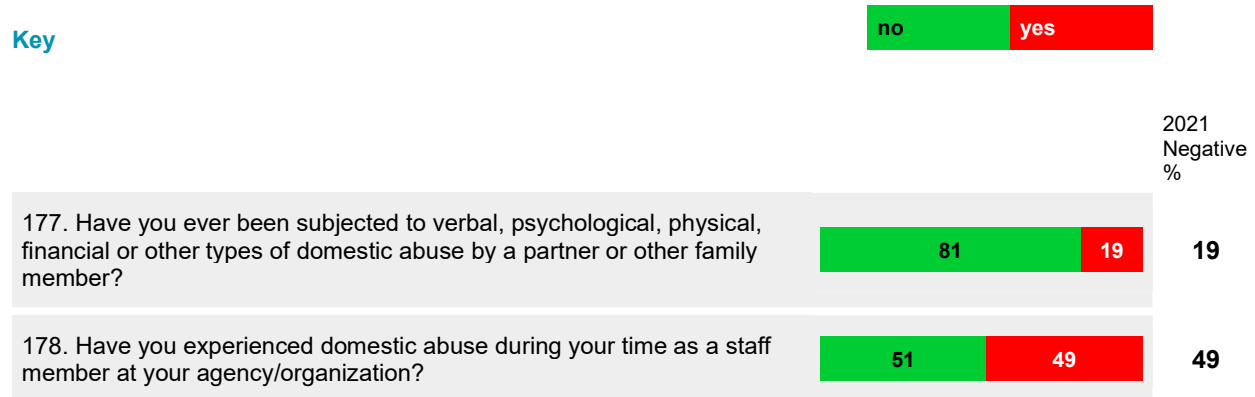
**Figure 18**



### Domestic Abuse

Nineteen per cent (19%) of respondents said that they had been subjected to verbal, psychological, physical, financial or other types of domestic abuse by a partner or other family member; while 81% said that they had not been. Of those 19%, 49% said that they had experienced domestic abuse during their time as a staff member at their organization, while 51% had not. See **figure 19**.

**Figure 19**



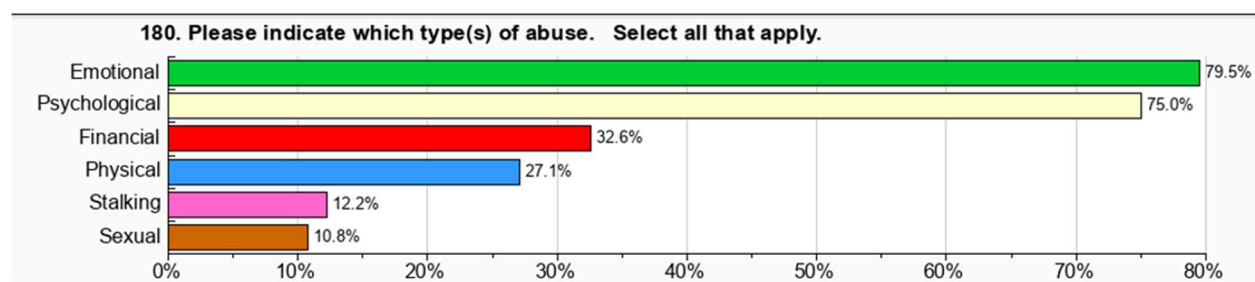
Nineteen per cent (19%) of respondents who experienced domestic abuse were asked to indicate whether the extent/frequency of domestic abuse changed since COVID-19. Of those 19%, 55% said that the abuse happened prior to COVID-19, 18% said that the abuse started for the first time during COVID-19, and 18% said that the extent/ frequency had increased. See **figure 20**.

**Figure 20**



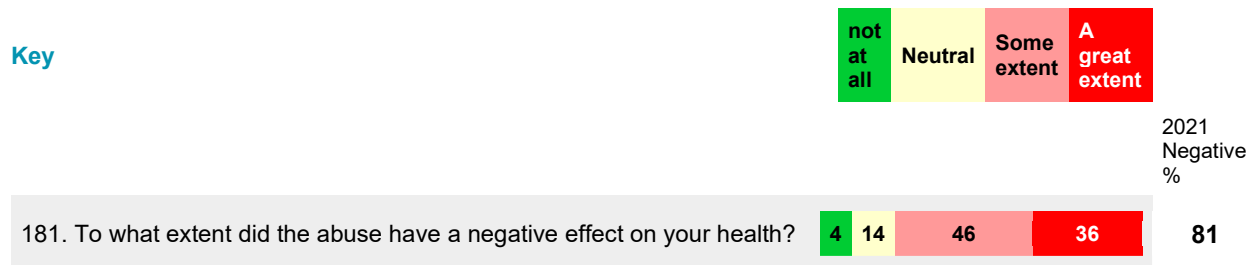
Respondents who experienced domestic abuse (19%) were asked to indicate which type(s) of abuse, selecting all that applied. The most frequent types of abuse were: emotional 80%, psychological 75%, financial 33%, physical 27%, stalking 12% and sexual 11%. See **figure 21**.

**Figure 21**



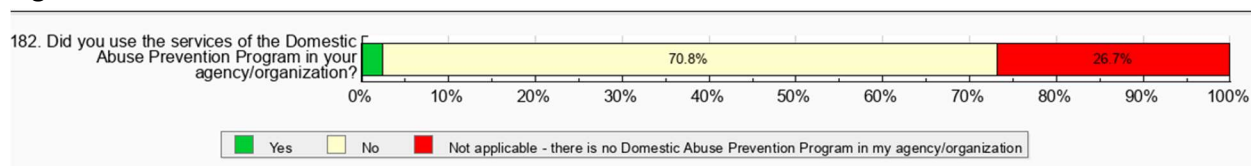
Respondents who said they had experienced abuse (19%) were asked to what extent the abuse had a negative effect on their health. Eighty-one per cent (81%) of respondents reported that the abuse has had a negative effect on their health to some extent or to a great extent. See **figure 22**.

**Figure 22**



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 23**.

**Figure 23**



## Annex 1

### High Health Risks

#### Key



#### High Health Risks with criteria in brackets

2021  
High  
Health  
Risk  
%

BMI (Body Mass Index is greater than 27.8 in men or 27.3 in women)	68	32	32
Perceived Physical Health (current overall physical health is very poor or poor)	91	9	9
Diet (less than 5 fruit/vegetables servings/day or more than 2 junk food servings/week)	7	93	93
Physical activity (sedentary lifestyle - less than 30 minutes of moderate physical activity)	61	39	39
Smoke (current smoker, occasional or social smoker)	85	15	15
Alcohol consumption (14 or more drinks a week for men, 7 or more drinks a week for women)	87	6	6
Drugs for stress and mood control (drugs for mood control taken in any dose and with any frequency)	86	14	14
Seatbelts (seatbelts are not always used when available and functional)	81	19	19
Stress (stress had a large effect on the respondent's health in the past year)	73	27	27
Health Condition (diagnosed with health disease, diabetes, cancer)	89	11	11
Sick leave (more than five sick leave days in the past year)	75	25	25
Blood Pressure (systolic blood pressure is greater than 139 or diastolic blood pressure is greater than 89)	94	6	6
Blood sugar (blood sugar is greater than 126mg/dl)	98	2	2
Cholesterol (total cholesterol is greater than 239 mg/dl)	95	5	5
HDL (High-density lipoprotein, or "good" cholesterol, is lower than 40 mg/dl)	98	2	2

## Annex 2

### Sources of stress

#### Key

Never/Not applicable	Rarely.	Sometimes	often	very often
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#### The sources of my stress are as follows:

2021  
Negative  
%

122. Work hours and high workload/demands	12	19	30	22	16	38
133. Lack of time for family, friends or personal pursuits	16	20	34	19	11	30
115. Too few resources to complete assigned tasks	18	25	30	17	11	28
113. Unrealistic or shifting deadlines	14	24	36	18	8	26
114. Unclear/conflicting work priorities	14	25	35	18	8	26
132. Geographic separation from family and other supports (living far from home)	40	13	21	13	13	25
124. Employment status/assignment/extension	35	21	22	12	10	23
118. Lack of control over decisions at work that affect me	21	28	29	14	8	22
137. Financial concerns - near term (monthly bills, servicing debt, supporting relatives)	32	27	24	10	7	17
119. Not being able to use my skills in my job	33	28	23	10	6	16
120. Insufficient support from manager	37	28	20	8	6	15
134. Home office set up	36	25	24	10	5	15
125. Lack of clarity of my role and/or task-definition	36	28	22	8	5	14
127. Caring for ill, elderly, or infirm family member(s)	51	18	19	7	4	12
130. Home schooling of my children	62	12	14	7	4	12
123. Performance appraisal	39	30	20	8	3	11

Key

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

2021  
Negative  
%

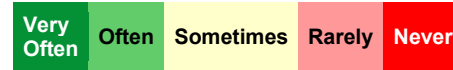
131. Lack of social support	41	26	22	8	4	11
129. Parenting-related difficulties	52	19	19	7	3	10
135. Other personal/family problem	35	29	26	6	3	10
121. Insufficient support from colleagues	33	36	23	6	2	8
136. Health problems	30	35	26	6	2	8
117. Conflict with supervisor/manager	46	32	15	4	3	7
128. Conflict with my spouse/partner	51	27	16	4	2	6
116. Conflicts with colleagues	38	40	17	4	2	5
126. Difficulty adapting to cultural diversity	71	22	6	1	0	1



## Annex 3

### Coping with stress

#### Key



#### I usually cope with pressure or stress by:

2021  
Positive  
%

158. Knowing and accepting myself	19	39	31	8	2	58
144. Utilizing time management, prioritizing, delegating	14	41	33	9	4	55
157. Being realistic about what I can and cannot change	14	35	37	11	3	49
147. Meeting challenges with humor	13	29	38	15	5	42
151. Spending time with family/friends	10	30	42	16	3	39
162. Getting enough sleep	8	29	41	18	3	37
154. Talking to someone I trust	10	27	39	20	5	36
155. Talking positively to myself	11	25	33	20	11	36
149. Engaging in regular physical exercise	12	21	31	25	10	33
145. Setting personal limits/learning to say no	6	22	42	23	6	29
146. Taking regular breaks	5	22	43	25	5	27
150. Taking time for leisure/pleasurable activities	6	20	44	24	6	26
153. Taking personal time and caring for myself	6	18	41	29	6	24
159. Attending training to improve my personal or professional skills	6	17	37	25	15	23
152. Nourishing my creative side	4	12	35	34	15	16
160. Taking time away (R&R, family leave)	3	10	41	32	13	13

**Key**

Very Often	Often	Sometimes	Rarely	Never
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**I usually cope with pressure or stress by (continued):**

2021  
Positive  
%

164. Getting professional support from health professionals outside of my agency/organization	3	6	16	18	58	9
161. Using prescribed medication to help with my mood / help me relax	2	4	8	10	76	6
163. Getting professional support from a counsellor in my agency/organization	1	3	11	17	68	4
165. Other	2	3	21	13	61	4