

# Roundtable: The outlook for employee health and wellbeing in Africa



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The health and wellbeing space in Africa has been changing rapidly; nonetheless, it still has deeply traditional facets at the same time as trying to incorporate a digital future. Employers may find themselves pulled in many different directions, particularly when it comes to the mental wellbeing of their employees, a subject which is still considered taboo.

How can employers navigate this challenging terrain? Senior Consultant Jeremy Povey had the opportunity to discuss some of these issues at a recent WTW roundtable.

**Jeremy Povey (JP):** How would you describe the current state of healthcare and wellbeing for employees in Africa right now?

**Dr. Kylee Montgomerie (KM):** I think a lot of people are struggling. We are seeing a surge in unmanaged blood pressures, cholesterol, cancer. We've seen a lot of people neglecting their normal medical check-ups because of fear going into the doctor's rooms. But one of the most worrying aspects we are noticing is the huge increase in mental health problems.

Many are feeling hopeless and overwhelmed. In South Africa, we've been struggling a lot with floods in KwaZulu-Natal. So we're not only dealing with COVID; people are losing their homes and their livelihoods.

And in the African population, people don't want to talk about mental health. It's still seen as a taboo topic. From that point of view, I think mental health is a big problem and it's impacting physical health.

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**JP: Dr. Ogunnubi, do you see a difference between how multinational employers and local companies view this issue on mental health? Is it different with distinct groups or types of companies?**

**Dr. Oluseun Peter Ogunnubi (OPO):** Jeremy, that's an interesting question. I've offered an Employee Assistance Program (EAP) for three years to a national organisation and a multinational. After the contract period, the local organisation called me, and they asked how many people I saw over the period they reviewed. There had been 53 in total, including suicide cases that were averted and 10 cases of mood disorders. But the national organisation was dismayed to hear that we had only reviewed 53 cases; to them it was too little.

I reasoned that what matters should not only be the bottom line, the money, the coins, the notes that go into it. In fact, it would have been worse if I'd seen over 2,000 employees having psychological problems. But to cut the story short, the contract was terminated because they felt that the money they are putting in does not justify the approach.

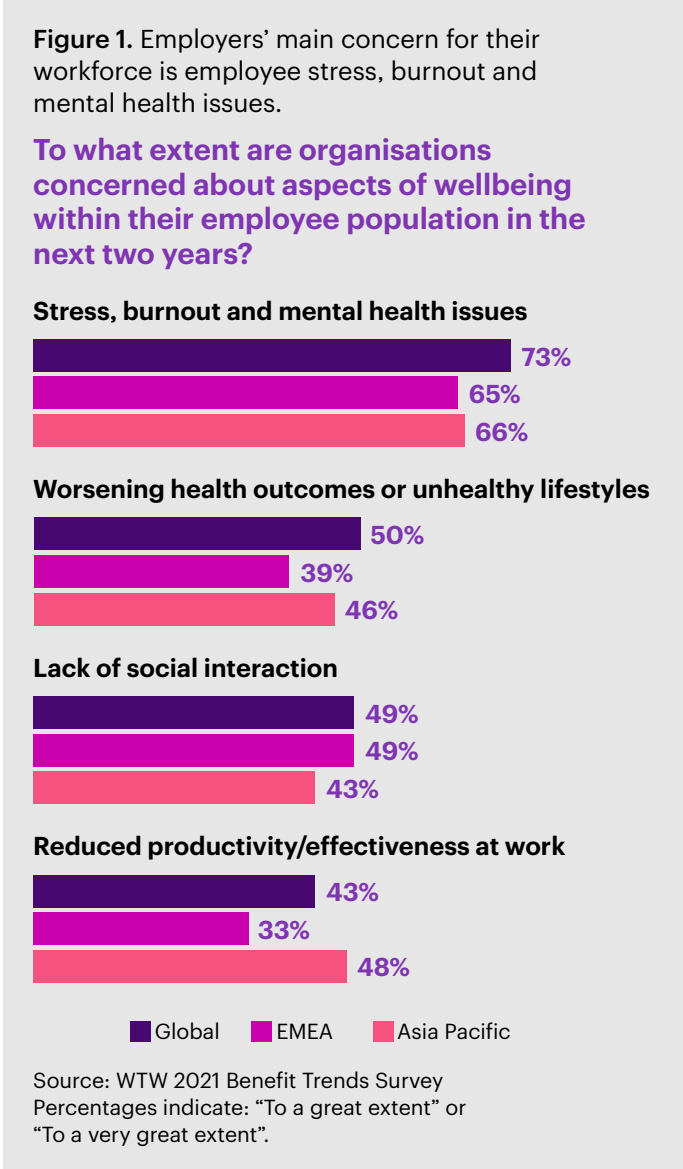
Now switch to the global brand, we probably saw 22 cases in a one-year review. Then there was a time they laid off 20 top management staff and we had a retreat for them. That was the only active thing we did for a year, other than the regular newsletter, regular work-life balance training, maintaining your mental health, avoiding burnout and all those things. Guess what, the project is still running because as far as they are concerned, one percent is enough.

So, the thinking is quite different between global and national organisations. And that's a problem; employers need to see wellbeing as a duty, and not about the coins.

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**JP: Pheona, you're based in Singapore, Asia. Some of the things that you've been hearing so far, do those resonate with you? How does that compare to the key drivers in Asia?**

**Pheona Chua (PC):** There are certainly some commonalities. We conducted a Benefit Trends Survey globally last year. Interestingly, we found that 66% of Asia Pacific employers are telling us that the key concern today is addressing stress, burnout and mental health.



Maybe partly as a result of the pandemic, many employers are recognising that they need different ways to build resilience in the workforce.

We also hear that in terms of measuring. Earlier, Dr. Ogunnubi was saying that people are looking at the dollars rather than looking at the usage. What we've found is that more employers are moving away from the return on investment (ROI) approach when it comes to the success of the wellbeing program and taking more of a value of investment (VOI) approach.

I think they recognise that wellbeing program outcomes are not just measured in financial returns, but across various milestones across short-, mid- and long-term goals. They can be measured across participation rate, utilisation rate — these are all milestone measurements that contribute to the success of the program.

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**Employers are moving away from a return on investment approach (ROI) for wellbeing programs and taking more of a value of investment (VOI) approach.**

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**JP: How is the legislative landscape keeping up? Is this a legal obligation or more of an ethical point for employers?**

**OPO:** It's unfortunate that in Nigeria, for example, we have no mental health law. The only law is the Lunacy Act of 1958, which is quite out of date. People have been known to go into neighbouring countries for medication; so there would be out-of-pocket payments for mental health care.

There is a law currently going through the assembly now, which mandates that employers need to take care of employee mental wellbeing. But this law has gone through nine legislative seasons. In the meantime, individual companies just try to do what they think is right.

**KM:** Jeremy, one of things we've been trying to push on our South African side is to "train the trainer", that is run courses for managers so they can identify staff who are in vulnerable positions, pick up on the signs just like how you do for drugs and alcohol.

We're now trying to push for the more liberally minded companies to train their people who are in management positions. But, you know, there's no legislation forcing you to do that or to look after them – as Doc says, it's an ethical thing with what you feel is the right thing to do for your employees.

**JP: Do you see any critical areas or need for improvement? For instance, early intervention and prevention — is that something you see as a critical issue in Africa?**

**KM:** It is critical, because we see too many people who are, for example, ending up with amputations from diabetes because they don't understand their care. If someone's first diagnosed with diabetes or even when they are pre-diabetic, we can turn it around.

The companies we've noticed where we run educational programs have much lower levels of chronic illness progressing to hospitalisation. In my opinion, we have to push education — if we can catch the signs early, whether signs of cancer, signs of diabetes, signs of depression, we'd have a much better chance of saving lives.

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**JP: Dr. Ogunnubi, just picking up on that point where there is a great need for education on mental health. How does the stigma and cultural issues, where people just don't want to talk about it, affect this?**

**OPO:** To be sincere, the situation in Nigeria and many African countries is gradually changing. In the last 30 years, I've been involved in the mental health advocacy and if we compare and contrast where we were and where we are now, we've made some significant positive steps in the right direction. Maybe before, around 2% to 5% were well-informed about mental and emotional health.

But now, let us say that we have moved roughly to 13% or 15%. But we still have a very long way to go. Don't forget the fact that 60% of the population in Nigeria are in the rural areas. They have no access to the internet. They have no access to Twitter, Facebook and other social media platforms. Many people still believe that mental illness is due to witches, supernatural forces, spiritual wickedness and evil forces. That's why people don't report, don't want to talk about it. So, there's a need to increase awareness; we try to advocate "It's okay not to be okay." Call for help the way you call if you have physical problems. Education is very key in these things.

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**KM:** In South Africa, even though a lot of companies do have an EAP or an EAP on-demand, there's a stigma about the information that will be shared. Many feel that if the employer finds out that they called in for mental health instability, they will lose their job, especially in South Africa where they see such a big problem with unemployment. We have to get across that it's confidential, that we're not sharing it with the employer.

**JP: Pheona, let's turn now to what you're seeing. What sort of trends have you seen evolving in the last few years?**

**PC:** The biggest shift we've observed recently is that employers are recognising that they need to go beyond just program considerations. Of course, programs are important, but employers are now looking at how to achieve sustainable change in the long term. And this includes questions such as:

- Using the concept of the employee experience through deployment of technology and other tools
- Building compassionate leadership through active listening strategies. This entails senior stakeholders walking the talk and again, taking a value of investment approach as opposed to return of investment approach.
- Ensuring sufficient resources are considered in the implementation, and considering cost optimisation strategies to ensure that there's sufficient budget allocated.

Mostly employers are asking themselves — how do we touch employee lives at different points of the life journey? How do we resonate with different demographics of employees we are working with, so that we can see more effective outcomes in terms of behavioural change?

**JP: What about any future trends?**

**PC:** In the near future, wellbeing will play a critical role across all business functions as part of the employee experience journey. Traditionally, you only see HR practitioners in charge of rolling out wellbeing initiatives. Decisions are made at an HR level.

Moving forward, we see more ownership from senior leaders and different business functions. Managers will be accountable for the wellbeing of their people. I think this will be a more sustainable approach moving forward, as they will be able to create networks, and better work within the organisation to constantly nudge employees and support their wellbeing.

There will also be efforts to better connect wellbeing to D&I (diversity and inclusion), Corporate Social Responsibility initiatives, and now the latest global focus is ESG.

// **Technology is going to play a significant role in future wellbeing strategies.** //

And certainly, technology is going to be here to play a significant role in future wellbeing strategies. In one of the surveys that we have conducted with organisations, over 70% of employers in Asia Pacific and 69% in EMEA, are planning to have an enhanced digital strategy in the next two years to support across mental, physical health conditions, virtual care and pre-acute, chronic conditions, physio — and also work-from-home solutions and telehealth services. These are some of the trends that we see in the future.

**OPO:** That’s important; I like what you said. The truth is the future is there — in the employee experience journey. Let the experience of the employee be different right from now. It is the duty of organisations, employers to make sure the future that what we hope for starts now. And once we’re able to do that, we’ll be able to achieve many things.

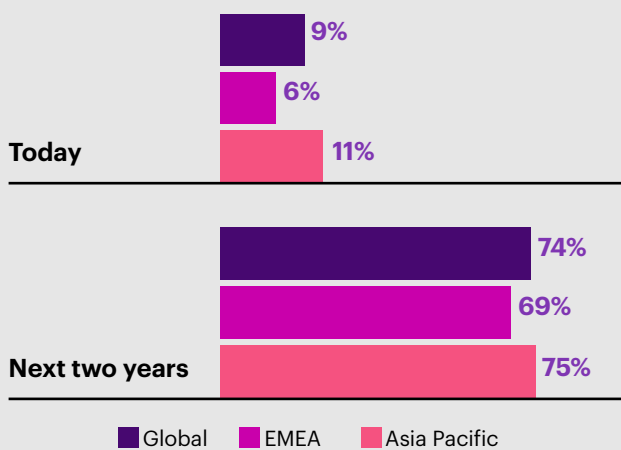
To find out more about developing an employee health and wellbeing strategy in your organisation, visit [wtwco.com/WellbeingAfrica](https://wtwco.com/WellbeingAfrica) or connect with our experts:

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**Figure 2.** Most employers are planning to enhance their digital benefit offerings

**Employers with an enhanced digital strategy for benefits and those planning to accomplish within the next two years**



Source: WTW 2021 Benefit Trends Survey



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