

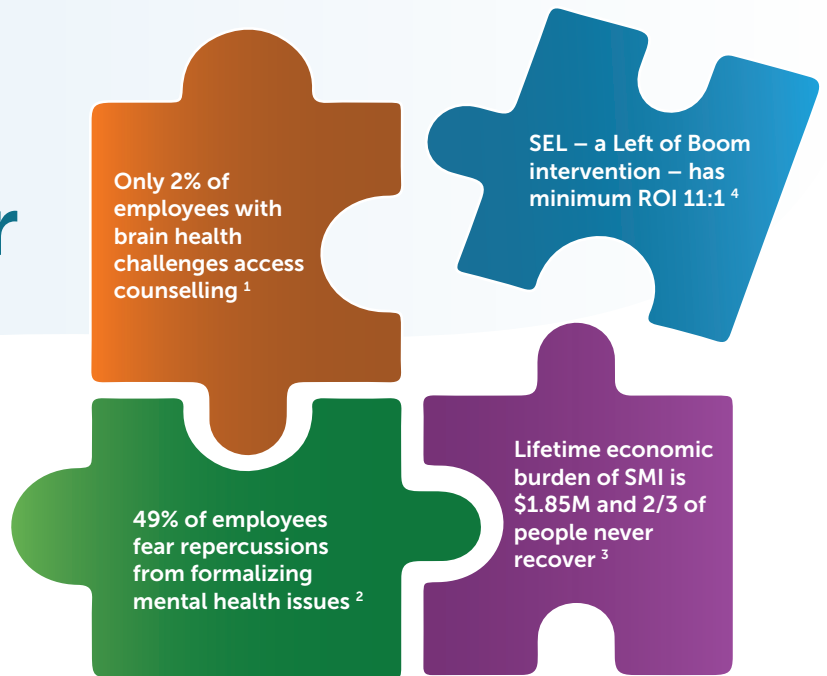
Left of Boom: Economics of Intervening After the Fact

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Consider 2 strategies for addressing brain health in the workplace:

- Strategy 1: recognize we depend on the brain health of every employee, and everyone has a brain; teach our people how the brain functions and give every employee tools to assess and improve their own brain performance
- Strategy 2: Provide a number to call when something goes wrong with their brain (like depression) and hope that (a) the employee calls, and (b) the intervention is effective

Email me to explore a BrainHealthy collaboration, at andrew.nevin@utdallas.edu



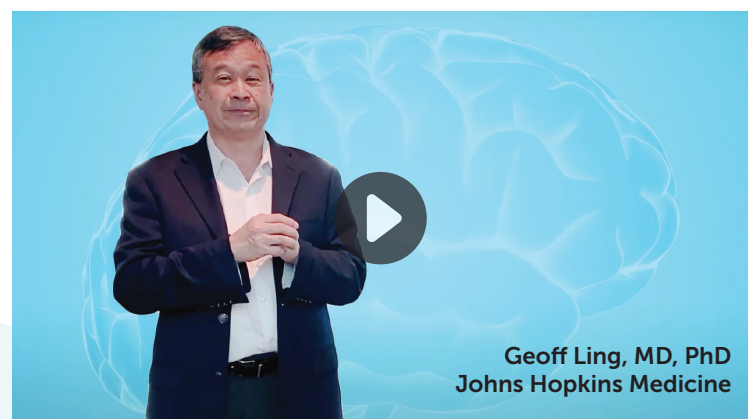
Well, we don't need much analysis to know that Strategy 1 is almost certainly going to be more effective (and have higher economic returns) than Strategy 2 – any number of analogies can be cited, but the teeth comparison is simple: no one waits for a root canal to brush their teeth.

Despite what we know, almost all companies are executing Strategy 2: an endless stream of emails saying if you have mental health challenges, call our EAP hotline. The results seem dismal – only 10% of employees with challenges call, only 2% of those get treatment, and only 51% of employees believe the service is confidential.

The EAP strategy seems designed for failure.

At the Center for BrainHealth, we have a different idea – Left of Boom. This military term means exactly what it says: it is better to do something before (i.e. to the left on the timeline) than right of Boom (after the explosion). Of course, after the Boom, you still have to intervene, but the fewer the Booms, the better off people and the economy will be.

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The brain is the only irreplaceable major organ in our body. It's time to keep it fit for a lifetime.
– Sandra Bond Chapman, PhD
Chief Director, Center for BrainHealth
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¹Spill Team. (2024, January 26). Understanding the ROI for your employee assistance programme.

²Onque, R. (2022, September 13). 49% of workers fear repercussions for being open about their mental health at work. CNBC.

³Seabury et al. (2019). Measuring the lifetime costs of serious mental illness and the mitigating effects of educational attainment. Health Affairs, 38(4), 652-659.

⁴Arnett, A. A. (2017, April 11). For every \$1 spent on SEL, there's an \$11 return. Higher Ed Dive.