Georgia Tech

Cultivate Well-Being Action & Transformation Roadmap

Focus on Faculty & Staff 2023 - 2030

Cultivate Well-Being Action & Transformation Roadmap

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Executive Summary

Cultivate Well-Being is one of the six strategic goals in the Georgia Tech Institute 2020-2030 Strategic Plan. It is essential to our academic mission and to promoting a sustainable workforce that we exercise leadership in advancing faculty & staff health and well-being, not only for the positive impact it will have on our faculty and staff but also on the lives of the students we serve if we "put on our own oxygen masks first." Well-being is subjective in nature, and cannot be directly impacted by any practice, policy, or program. Rather, institutions of higher education can strive to influence the context, climates, and correlates that are known to be associated with higher levels of well-being. Ultimately, the complex interplay of conditions that contribute to well-being varies from person to person - and can also vary for any one individual throughout the course of their life. This aspect of well-being differs from health and wellness, where activities, interventions, policies, programs, and services designed purposefully – using available data and evidence - to shape individual- and community-level outcomes are more likely to result in a direct impact.

Drawing on evidence and inspiration from global and national public health contexts and quantitative and qualitative inputs directly from staff and faculty at GT, this *Cultivate Well-Being Action & Transformation Roadmap with a Focus on Faculty and Staff* identifies four organizing goals.

Goal 1 – Cultural Change:
- Catalyze Institute-wide transformation and system-level evolution that lasts
- Adopt policies and practices that promote health and enhance wellness
- Minimize aspects of the GT environment that impede wellness

Goal 2 – Capacity and Creativity:
- Expand beyond clinical interventions to focus on prevention of root causes "upstream"
- Advance well-being in a holistic manner that embraces the whole person
- Address social determinants with the goal of closing health equity gaps

Goal 3 – Community and Connection:
- Reduce loneliness; facilitate belonging, mattering, and meaningful affiliations
- Enhance self-efficacy and self-agency; encourage joy and fun
- Live, work and lead in a manner that is consistent with Georgia Tech and personal values

Goal 4 – Commitment and Continuity:
- Explore and adopt frameworks that embed health promotion in the academic mission of Georgia Tech: learning, scholarship, and service.
- Ensure that Cultivate Well-being remains a strategic focus at GT beyond 2030

The desired outcomes identified in this plan are intended to span the remaining seven years of the Institute's strategic planning period ending in 2030; initiation of the various strategies will be staggered across multiple years to ensure the sustainability and viability of implementation efforts. As such, not all returns on investment will emerge immediately; some will necessarily coalesce more incrementally.

A Collective Impact approach, with engagement from multiple disciplines, will be used to guide implementation of the programs, projects and action strategies identified in this *Roadmap,* including establishing appropriate timelines, partners, deliverables, and success measures.

Introduction

Workplaces, such as universities, play a crucial role in public health. Given that individuals dedicate a significant portion of their day to work, it is essential to recognize that their work environment and culture significantly influence their health, well-being, and overall quality of life. Furthermore, the effects extend beyond the individual to the people they interact with in various aspects of life, including their family, colleagues, social circles, educational pursuits, and personal relationships.

> *A culture of health is defined as one in which individuals and their organizations are able to make healthy life choices within a larger social environment that values, provides, and promotes options that are capable of producing health and well-being for everyone regardless of background or environment.[1]*

> *Comprehensive health promotion programs are built on a culture of health that supports individuals' efforts at changing lifelong health habits by putting in place policies, programs, benefits, management, and environmental practices that intentionally motivate and sustain health improvement.[2]*

> *Improving population health requires more than simply convincing people to take better care of themselves. It requires that the organization where individuals spend a good portion of their waking hours creates an environment where leading a healthy lifestyle is the "default" option.[3]*

The importance of cultivating well-being has never been greater, and the Institute's commitment to making great strides in this space is evidenced in naming it as one of the six focus areas of the Institute Strategic Plan. We must demonstrate leadership in the employee health and well-being space, not only for the positive impact it will have on our faculty and staff but on the lives of the students we serve if we "put on our own oxygen masks first." In alignment with the President's Goals and recognizing the influence and impact leaders have on faculty and staff well-being, we must consider not only the individual faculty and staff members

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[1] Robert Wood Johnson Foundation. RWJF's model for advancing a culture of health. Available at: http://www.rwjf.org/en/blogs/culture-of-health/2013/05/aboutcultureofhea.html.

[2] Centers for Disease Control and Prevention. *The CDC Worksite Health Score-Card: An Assessment Tool for Employers to Prevent Heart Disease, Stroke, and Related Health Conditions*. Atlanta, GA: U.S. Department of Health and Human Services; 2012. Available at: http://www.cdc.gov/dhdsp/pubs/worksitescorecard.htm.

[3] Goetzel, R. Z., Henke, R. M., Tabrizi, M., Pelletier, K. R., Loeppke, R., Ballard, D. W., Grossmeier, J., Anderson, D. R., Yach, D., Kelly, R. K., McCalister, T., Serxner, S., Selecky, C., Shallenberger, L. G., Fries, J. F., Baase, C., Isaac, F., Crighton, K. A., Wald, P., … Metz, R. D. (2014). Do workplace health promotion (wellness) programs work? *Journal of Occupational and Environmental Medicine*, 56(9), 927–934. https://www.jstor.org/stable/48500477

but also how we support our managers, supervisors, chairs, deans, and other leaders who research has shown have the highest potential to significantly impact the Institute's culture.[4]

This *Cultivate Well-Being Action & Transformation Roadmap with a Focus on Faculty and Staff* identifies four organizing goals:

<u>Goal 1 – Cultural Change</u>: Catalyze cultural, transformational change at Georgia Tech so that the places, practices, policies, protocols, people, and philosophies that have a demonstrated positive contribution to well-being are adopted, advanced, expanded and/or strengthened, while those aspects of Institute culture that impede health and wellness are minimized.

<u>Goal 2 – Capacity and Creativity</u>: Continue to improve the quality and ease of access to equity-literate and trauma-informed health, including mental health, promotion interventions while also improving programs and services that focus on the primary prevention of health-related symptoms, diseases, and disorders; the promotion of wellness in a holistic manner; and the creation of conditions which cultivate and sustain well-being for all faculty and staff, inclusive of all identities and backgrounds.

<u>Goal 3 – Community and Connection</u>: Increase, expand, and generate broader awareness of and access to faculty and staff engagement experiences across Georgia Tech that contribute to and facilitate the factors that comprise well-being, including sense of belonging and connection, happiness, resilience, self-awareness, and self-efficacy, as well as support living and leading in a manner that is consistent with one's personal values.

<u>Goal 4 – Commitment and Continuity</u>: Appoint an *ad hoc* study group comprised of a diverse range of Institute-wide constituents and representative of all Georgia Tech community stakeholders – including but not limited to students, faculty, staff, administrators, and alumni – to review the feasibility of formally adopting (or adapting) the action framework for higher education that is outlined in the [Okanagan Charter: An](#) [International Charter for Health Promoting Universities & Colleges](#) and subsequently incorporating the framework into Georgia Tech's ongoing administration, culture, and operations for the foreseeable future. This process will begin no later than 2030, when the prevailing Institute Strategic Plan period is slated to end, concluding in a formal recommendation made to the President.

Together, these goals strive to (1) continue strengthening equity-literate[5] and trauma-informed[6] health promoting interventions while expanding primary prevention efforts; (2) focus on expanding and enhancing those institutional attributes and factors that evidence shows

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[4] Mind Share Partners. (2021). *2021 Mental health at work report—the stakes have been raised*. https://www.mindsharepartners.org/mentalhealthatworkreport-2021

[5] Equity-literate health interventions provide a fair and just opportunity for everyone to attain their highest level of health. https://www.cdc.gov/healthequity/whatis/index.html

[6] Trauma-informed care acknowledges past trauma and shows sensitivity to the effects it can have on the survivors of present events. https://blogs.cdc.gov/publichealthmatters/2022/05/trauma-informed/

promote health, wellness, and well-being; and (3) mitigate those systemic and cultural elements that have a documented negative impact on well-being.

It is important to keep in mind that the desired outcomes identified in this plan are intended to span the remaining seven years of the Institute's strategic planning period ending in 2030 and that initiation of the various strategies will be staggered across multiple years to ensure the sustainability and viability of implementation efforts. As such, not all returns on investment will emerge immediately; some will necessarily coalesce more incrementally. Gal Beckerman recently spoke to this essential feature of authentic transformative social change, which generally requires substantial "incubation" and "unseen work" that are not quick:

> *"If our movements today can devalue that slow, unseen incubation, the stories we tell about how social or political change unfolded in the past tend to leave out this part as well. Many of those narratives, whether about women's suffrage or the civil-rights movement, feel foreshortened, cutting out the years of struggle, or the need for debate and patience, for trial and error. Instead we zero in on the charismatic leaders' big speeches. We fixate on the moments: policemen on horseback chasing down protesters, or a man standing up to a tank. This leaves out so much."*[7]

This work will require concerted, collaborative, and committed investments of time, energy, and resources, sustained over multiple years to bring about measurable – and more importantly, lasting - outcomes in the desired areas of change. If Georgia Tech remains focused on implementation even when it becomes challenging, then our faculty and staff will ultimately experience positive gains in terms of improved health and wellness, increased likelihood to report experiencing well-being, and greater health equity.

For this document, we use the term "roadmap" instead of "plan." While we recognize that plans are always subject to constantly shifting realities and evolving contexts, the term "roadmap" may be a better metaphor for the endeavor on which we are to embark. A roadmap provides a general set of directions and a planned pathway for reaching one's destination; but sometimes traffic conditions, weather, construction, road closures, or other unforeseen and unanticipated factors will force us to pivot and select a different route. We are also sharing the road with many other vehicles – some of whom are headed to the same destination, others with whom we will drive alongside for just a few miles before our journeys diverge. Our ability to arrive at our destination safely is in part reliant on the goodwill and good driving of others. For example, a fellow driver in a fit of road rage could run us off the road. Lastly, we simply don't know everything about the highway we will be taking until we travel on it; while there is irrefutably increasing mobilization nationwide to focus on employee well-being, the reality is that many of us are driving on the road while it is being paved. To remain on the road, we must

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[7] Beckerman, G. (2022). How to make change, slowly. *Atlantic.* https://www.theatlantic.com/books/archive/2022/04/social-change-books-lynn-hunt/629587/. Accessed 1 July 2022.

be willing to be lifelong learners ourselves – open to acknowledging what we do not know, willing to dispense with status quo measures that simply have not had the desired impact, and courageous enough to embrace innovative and creative initiatives that may require us to take some measured risks – risks we take by simply getting on the road.

Finally, it is important to note that it is nearly impossible to effectively impact health and wellness without also actively engaging on issues related to justice, diversity, equity, and inclusion. The impacts of the widening wealth gap, the persistence of discrimination, systemic marginalization, and the legacy of slavery in the United States have all played a significant role in shaping the health and health-related outcomes for individuals, families, and communities. Across all goals and strategies, it will be essential that Georgia Tech – particularly those who occupy roles of administrative leadership and organizational responsibility – incorporate the five principles for equitable policy- and decision-making advanced by the Institute for Higher Education Policy in their January 2022 report, *Opening the Promise*, and summarized below.[8]

In other words, as cabinet officers, their deputies and designees, deans and directors go about making policy and advancing practices and protocols, it is essential to consider whether any given decision will have a positive impact on health, wellness, and well-being – for staff and faculty of all backgrounds and identities – or whether it will create additional barriers or reinforce existing ones?

Opening the Promise PRINCIPLES	*Opening the Promise* ACTION ITEMS
An issue's **framing** shapes the creation of relevant policy.	• Frame an issue by including the specific "why" of the work and "what of the problem." • Apply an equity lens to outcomes, even for seemingly race-neutral problems. • Reach hearts AND minds.
Investments signal priorities.	• Plan for long-term, sustainable, systemic change. • Invest in long-term, sustainable, systemic change.
Who **participates** in policymaking decisions shapes the outcome	• Ensure the representation and voices of impacted communities hold influence.
Data and empirical evidence are essential to effective policy.	• Disaggregate, disaggregate, disaggregate. • Ensure the evidence base is informed by researchers of color and reflects racially diverse populations.

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[8] The full report can be accessed at https://www.ihep.org/wp-content/uploads/2022/01/IHEP_equitable_policy_principles_brief_final_web2.pdf

Language must be precise, inclusive, people-first, and respectful.	• Take an asset-based approach. • Be specific and respectful. • Be people-first and inclusive.

Table 1: **Five principles for equitable policy- and decision-making advanced by the Institute for Higher Education Policy in their January 2022 report,** *Opening the Promise*

While the Institute for Higher Education Policy focused their report on highlighting strategies to combat the impacts of racism in the United States[9], these principles are relevant when considering efforts to address equity across all populations, whether on the basis of sex, gender, gender identity, sexual orientation, ability, socioeconomic status, or other identities.

The global COVID-19 pandemic spotlighted and exacerbated many challenges with health equity, and its disproportionate impact on some social and occupational groups more than others has perpetuated many prior existing injustices.[10] The pandemic also provided a glimpse into the future of work, affording institutions the opportunity to more deeply pilot and invest in remote and hybrid work.[11] However, these more flexible alternative work arrangements are not available to everyone and depend on job function and core responsibilities. The reverberations of the pandemic will be felt for decades to come and should be acknowledged in health promoting activities.

Definitions and Core Concepts

To effectively implement this *Roadmap's* goals and deliver on key action strategies, the Georgia Tech community needs to have a shared, common understanding regarding the core concepts that shape the work of promoting health, wellness and well-being. This section will review the most essential definitions and ideas that inform this plan.

Term	Definition
Employees	**Employees** include faculty, staff, and other job classes such as postdoctoral positions. However, there is great variety in performance outcome measures, rewards and stressors by job class and setting. Thus, "Faculty and Staff" wellness will be used throughout this *Roadmap* except in instances when something is specific to staff or specific to faculty. Furthermore, the setting of one's work needs to be taken into consideration when designing and implementing wellness offerings. The settings for staff and faculty who work at GT locations outside the U.S. as well as the settings for fully remote staff and faculty should be explored and accommodated.

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[9] This site offers an example of how one university is critically self-examining their role in slavery: https://slavery.virginia.edu/universities-studying-slavery/.

[10] Asfaw, A. Racial disparity in potential occupational exposure to COVID-19. (2022). *J. Racial and Ethnic Health Disparities,* 9, 1726–1739. https://doi.org/10.1007/s40615-021-01110-8

[11] https://www.mckinsey.com/featured-insights/future-of-work/the-future-of-work-after-covid-19

Term	Definition
Health	**Health** is defined by the World Health Organization (WHO) as "a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity."[12] The definition was refined in 1984 by WHO to include "the extent to which an individual or group is able to realize aspirations and satisfy needs and to change or cope with the environment."[13] And in 1986, the *Ottawa Charter for Health Promotion* added that "Health is created and lived by people within the settings of their everyday life; where they learn, work, play and love. Health is created by caring for oneself and others, by being able to take decisions and have control over one's life circumstances, and by ensuring that the society one lives in creates conditions that allow the attainment of health by all its members."[14]
Social determinants of health	Health cannot be fully understood without also considering the **social determinants of health**, which are defined by the Office of Disease Prevention and Health Promotion (ODPHP) in the U.S. Department of Health and Human Services (DHHS) as "the conditions in the environments where people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks."[15] These determinants can be grouped as follows: (1) economic stability; (2) educational access and quality; (3) health care access and quality; (4) the neighborhood and built environment; and (5) social and community context. These can often be used to explain health disparities across communities.
Wellness	The Global Wellness Institute (GWI) defines **wellness** as "the active pursuit of activities, choices and lifestyles that lead to a state of holistic health."[16] The GWI also notes that while wellness is an individual endeavor - wherein each person has personal responsibility for their respective choices, behaviors, and lifestyles - it can also be notably influenced by social determinants.

Further, individuals often confuse or use the words health, wellness, well-being, and happiness interchangeably. The GWI observes, "While there are |

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[12] World Health Organization. (1946). *Constitution of the World Health Organization*. Retrieved June 17, 2022, from https://apps.who.int/gb/bd/PDF/bd47/EN/constitution-en.pdf?ua=1.

[13] World Health Organization. (1946). *Constitution of the World Health Organization*. Retrieved June 17, 2022, from https://apps.who.int/gb/bd/PDF/bd47/EN/constitution-en.pdf?ua=1.

[14] World Health Organization (1986). *The Ottawa charter for health promotion*. Retrieved August 10, 2023, from https://www.who.int/teams/health-promotion/enhanced-wellbeing/first-global-conference/actions

[15] Refer to the Office of Disease Prevention & Health Promotion, US Department of Health & Human Services webpage on Healthy People 2030 at https://health.gov/healthypeople/priority-areas/social-determinants-health.

[16] Refer to the Global Wellness Institute webpage at https://globalwellnessinstitute.org/what-is-wellness/.

Term	Definition
	common elements among them, wellness is distinguished by not referring to a static state of being (i.e., being happy, in good health, or a state of wellbeing). Rather, wellness is associated with an active process of being aware and making choices that lead toward an outcome of optimal holistic health and wellbeing."[17] **Wellness actions are the inputs and well-being is a desired output.**
Well-Being	In defining **well-being**, the Centers for Disease Control & Prevention (CDC) states: *"There is no consensus around a single definition of well-being, but there is general agreement that at minimum, well-being includes the presence of positive emotions and moods (e.g., contentment, happiness), the absence of negative emotions (e.g., depression, anxiety), satisfaction with life, fulfillment and positive functioning.[18, 19, 20, 21] In simple terms, well-being can be described as judging life positively and feeling good.[22, 23] For public health purposes, physical well-being (e.g., feeling very healthy and full of energy) is also viewed as critical to overall well-being."[24]* Similarly, the GWI asserts that well-being refers to the perception of a state that is associated with feelings of happiness, satisfaction, and sense of fulfilment; further, while it does have a physical dimension, mental/emotional dimensions feature more prominently in well-being.[25] Similar to wellness, researchers and practitioners have multiple dimensions of well-being, all of which may be interrelated and interdependent. And, as with health and wellness, well-being can be impacted by a variety of sociocultural determinants.[26]
Psychological safety	There is yet another concept that is commonly used: **psychological safety**, which is defined by the Center for Creative Leadership as "the belief that

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[17] Ibid.

[18] Frey, B.S. & Stutzer, A. (2002). *Happiness and Economics*. Princeton, NJ: Princeton University Press, as cited by the CDC.

[19] Andrews F.M. & Withey, S.B. (1976). *Social Indicators of Well-Being*. New York: Plenum Press, pp. 63–106, as cited by the CDC.

[20] Diener, E. (2000). Subjective wellbeing: the science of happiness and a proposal for a national index. *American Psychologist*, 55(1): 34–43, as cited by the CDC.

[21] Ryff, C.D. & Keyes, C.L.M. (1995). The structure of psychological well-being revisited. *Journal of Personality and Social Psychology,* 69(4): 719–727, as cited by the CDC.

[22] Diener, E., Suh, E. & Oishi, S. (1997). Recent findings on subjective well-being. *Indian Journal of Clinical Psychology*, 24: 25–41, as cited by the CDC.

[23] Veenhoven, R. (2008). Sociological theories of subjective well-being. In Eid, M. & Larsen, R.J. (Eds)., *The Science of Subjective Well-Being*. New York: Guilford Press, pp. 44–61, as cited by the CDC.

[24] The Centers for Disease Control & Prevention definition of well-being, along with a fuller discussion of the concept, can be found at https://www.cdc.gov/hrqol/wellbeing.htm.

[25] Refer to the Global Wellness Institute webpage at https://globalwellnessinstitute.org/what-is-wellness/.

[26] For more information about the various dimensions of well-being, refer to https://www.berkeleywellbeing.com/what-is-well-being.html.

Term	Definition
	you won't be punished or humiliated for speaking up with ideas, questions, concerns, or mistakes."[27]

Table 2: Definitions and Core Concepts used in this *Roadmap*

Further, wellness is more than just about physical or mental health;[28] it can incorporate anywhere from 6-12 interrelated and interdependent dimensions. In our work here at Georgia Tech, because it better reflects the holistic nature and complexity of our employees' and students' lives, we will incorporate the eight-dimension model advanced by the Substance Abuse and Mental Health Services Administration (SAMHSA) in the DHHS, which includes emotional, environmental, financial, intellectual, occupational (or career), physical, social, and spiritual.[29]

Figure 1: Social Determinants of Health, U.S. Department of Health and Human Services

While there are varying ways to describe each dimension, below are brief definitions adapted from work conducted by the GWI, SAMHSA and the University of Maryland at College Park:

Emotional – Coping effectively with life stressors, having self-esteem, and expressing optimism, as well as being aware of our feelings, accepting the full range of feelings, expressing our feelings appropriately, and understanding the feelings of others;

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[27] Refer to the Center for Creative Leadership webpage at https://www.ccl.org/articles/leading-effectively- articles/what-is-psychological-safety-at-work/.

[28] The American Psychological Association defines "mental health" as "A state of mind characterized by emotional well-being, good behavioral adjustment, relative freedom from anxiety and disabling symptoms, and a capacity to establish constructive relationships and cope with the ordinary demands and stresses of life." Refer to https://dictionary.apa.org/mental-health.

[29] This framework of wellness was adapted by the Substance Abuse and Mental Health Services Administration (SAMHSA) from the work of Swarbrick, M. (2006). A wellness approach. *Psychiatric Rehabilitation Journal*, 29(4), 311–314. Additional information is available at SAMHSA's webpage at https://store.samhsa.gov/sites/default/files/d7/priv/sma16-4958.pdf and at https://store.samhsa.gov/sites/default/files/d7/priv/sma16-4955.pdf.

Environmental – Honoring the interdependent, dynamic relationship we have with our environment - whether social, natural, built or digital – and our responsibility for sustaining it; occupying pleasant, nurturing, safe and stimulating environments;

Financial – Having basic needs met and a positive relationship with money, applying resource management skills to live within one's means, making informed financial decisions, setting realistic financial goals, and preparing for short- and long-term needs or emergencies.

Intellectual – Finding ways to engage in lifelong learning, expand knowledge and skills, and interact with the world through problem-solving, experimentation and curiosity, as well as the ability to think critically, reason objectively and explore new ideas.

Occupational (or career) – Getting personal satisfaction and enrichment from work, hobbies and volunteer efforts, that are consistent with one's values, goals and lifestyle, as well as taking a thoughtful and proactive approach to career planning and growth.

Physical – Replenishing the body through physical activity, exercise, sleep, and nutrition; engaging in low-risk alcohol, tobacco and other drug use; conducting routine health exams/screenings; and adopting preventive measures such as vaccines and condom use.

Social – Connecting and engaging with others and our communities in meaningful ways, having a well-developed support system, being interculturally competent, and feeling a sense of belonging, and

Spiritual – Includes searching for and/or having a sense of purposeful existence and meaning in life, as well as seeking harmony with the universe, extending compassion towards others, practicing gratitude, and engaging in self-reflection.[30, 31, 32, 33]

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[30] Ibid.

[31] Refer to the "8 Dimensions of Wellness" developed by the University of Maryland at College Park, University Health Center at https://health.umd.edu/hpws/dimensions.

[32] Refer to the Global Wellness Institute webpage at https://globalwellnessinstitute.org/what-is-wellness/.

[33] The "8 Dimensions of Wellness" graphic is adapted from the University of Wisconsin-Madison; their graphic can be found at https://fonddulac.extension.wisc.edu/implementing-the-8-dimensions-of-wellness/.

The strategies available to the GT community also need to be defined. There is a lack of differentiation between training activities, educational interventions, health/wellness promotion activities, primary prevention efforts, and cultural change initiatives; while these all have some commonalities, they each advance different (albeit interrelated) intended outcomes and utilize distinctive frameworks, pedagogies, etc.

Term	Definition
Training	**Training** activities are generally designed to increase knowledge or awareness, for example regarding campus policies or practices. However, training on such things as unconscious bias has been found to be relatively ineffective in changing behaviors and outcomes when such an initiative occurs in isolation.[34]
Education	**Education** strives to provide information to inform individual decision-making and may also be designed to shift attitudes and beliefs; effective teaching draws on the literature on adult learning and on studies about engaged learning.
Health promotion	According to the WHO, **health promotion** is "the process of enabling people to increase control over, and to improve, their health."[35] In 2021, this definition was expanded to include that a foundation of well-being is "the focus of health promotion on empowerment, inclusivity, equity, and meaningful participation" as well as that "the role of health promotion is to catalyze and support [well-being] by: • Ensuring that people and communities are enabled to take control of their health and lead fulfilling lives with a sense of meaning and purpose, in harmony with nature, through education, culturally relevant health literacy, meaningful empowerment and engagement. • Enabling, mediating and advocating for a unifying approach to creating well-being societies by shaping the determinants of health in all settings. • Ensuring that promotive, preventive, curative, rehabilitative and palliative health and social services are of high quality, affordable, accessible and acceptable and are provided according to needs, especially for those often left behind."[36]
Primary prevention	**Primary prevention** efforts seek to ameliorate negative health conditions before they occur in the first place – generally for families and

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[34] Gino, F. & Coffman, K. (2021). Unconscious bias training that works. *Harvard Business Review*. Access at https://hbr.org/2021/09/unconscious-bias-training-that-works. Accessed 5 July 2022.

[35] World Health Organization (1986). *The Ottawa charter for health promotion*. Retrieved August 10, 2023, from https://www.who.int/teams/health-promotion/enhanced-wellbeing/first-global-conference/actions

[36] World Health Organization (2021). *The Geneva charter for well-being*. Retrieved August 10, 2023, from https://www.who.int/publications/m/item/the-geneva-charter-for-well-being

Term	Definition
	communities (not just individuals) and may rely on training and education strategies but also necessarily includes policy change at local, state and federal levels (across a number of social determinants), as well as surveillance and research.[37]
Cultural change	Merriam-Webster offers a simple yet intriguing definition for **cultural change**: "modification of a society through innovation, invention, discovery, or contact with other societies."[38] As David Knotts notes, "…culture change is not about seeking short term results, but rather investing in securing big change, secured over the long term."[39] Practitioners in higher education also recognize that authentic, lasting cultural change will necessarily require action and advocacy in both on- and off campus contexts.[40]

Table 3: Additional Definitions and Concepts used in this *Roadmap*

Furthermore, cultural change relies on all of the above strategies and then goes well beyond. The Cambridge Dictionary defines **culture** as "the way of life, especially the general customs and beliefs, of a particular group of people at a particular time; the attitudes, behavior, opinions, etc. of a particular group of people within society."[41]

Lastly, another contributing factor to well-being should be considered: belonging. Belonging has been found to enhance engagement and improve success in college.[42] **Belonging** is defined as a general sense that a person has about their connection with others, that they matter or are

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[37] See the CDC's Prevention section in the *Picture of America: Our Health And Environment Prevention Report* (2017) at https://www.cdc.gov/pictureofamerica/pdfs/picture_of_america_prevention.pdf. Accessed 5 July 2022.

[38] "Cultural change." Merriam-Webster.com Dictionary, Merriam-Webster, https://www.merriam-webster.com/dictionary/cultural%20change. Accessed 5 July 2022.

[39] David Knotts, et al., (2008, January). *Achieving Culture Change: A Policy Framework*. London: Prime Minister's Strategy Unit, Cabinet Office. Accessed 5 July 2022. [Note that this report offers very helpful insights into governmental efforts to promote culture change and is a helpful resource for those who wish to learn more about this approach to change: https://webarchive.nationalarchives.gov.uk/ukgwa/20100125070726/http://cabinetoffice.gov.uk/media/cabinetof fice/strategy/assets/achieving_culture_change.pdf.]

[40] *The Iowa and Minnesota Campus Compact*, which focuses on efforts to foster social justice and help campuses achieve their core purpose, offers a useful resource (the Social Change Wheel 2.0 Toolkit) on how to advance social change in the higher education setting, , which can be found at https://mncampuscompact.org/resource- posts/social-change-wheel-2-0-toolkit/.

[41] "Culture." Cambridge.org Dictionary, Cambridge Dictionary, https://dictionary.cambridge.org/dictionary/english/culture. Accessed 5 July 2022.

[42] National Academies of Sciences, Engineering, and Medicine. (2017). *Supporting students' college success: The role of assessment of intrapersonal and interpersonal competencies.* National Academies Press. Accessed July 22, 2022, at https://nap.nationalacademies.org/download/24697.

considered important by another individual.[43] Belonging can boost mental health and improve the likelihood of help-seeking behaviors.[44]

It is important to note that because well-being is subjective in nature, it is usually measured with instruments that rely on self-reports,[45] rather than the objective measures that may be used to assess or measure health and wellness outcomes. This leads to an important observation – well-being cannot be directly impacted by any one person, policy, or program. Rather, institutions of higher education can strive to impact and influence the context, climates, and correlates that are known to be associated with higher levels of well- being, but ultimately, the unique and complex array and interplay of conditions that contribute to well-being varies from person to person- and can also vary for any one individual throughout the course of their life. This aspect of well-being differs from health and wellness, where activities, interventions, policies, programs, and services designed purposefully – using available data and evidence - to shape individual- and community-level outcomes are more likely to result in a direct impact.

Another way to think about the interrelationship and interdependence between health, wellness, and well-being is to consider the wellness continuum. The GWI has identified a **wellness continuum**[46] that is captured graphically below. On this continuum, poor health is on the left end, while an optimal state of well-being is on the right end. To advance on the continuum from left to right, individuals, families, and organizations may rely on the medical paradigm to help people feel better, cure illness, treat diseases and disorders, or take other corrective action to address or remedy health problems. In large part due to scientific, pharmaceutical and technology advances, medical (and mental health) interventions can save lives and extend years of life. However, the medical paradigm tends to be more reactive, intermittent, and compartmentalized in nature; primary responsibility for action lies with the health care provider or clinician.

Conversely, the wellness paradigm focuses on helping human beings to thrive, prevent physical or mental health-related symptoms and diagnoses from occurring in the first place, and maintain or even improve health. The wellness paradigm tends to be more proactive and holistic in nature – integrated into one's life and sustained as an essential aspect of daily activities; primary responsibility for action lies with the individual, although consultation and collaboration with health care providers, wellness professionals, or community supports may be involved.[47]

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[43] Strayhorn, T.L. (2019). *College students' sense of belonging: A key to educational success for all students (2nd edition)*. New York: Taylor & Francis.

[44] Gopalan, M. & Brady S.T. (2019). College students' sense of belonging: A national perspective. *Educational Researcher*, 49 (2): 134–137, https://doi.org/10.3102/0013189X19897622.

[45] Larsen, R.J., Eid, M. & Diener, E. (2008). The science of subjective well-being. In Larsen, R.J. & Eid, M. (Eds.) *The Science of Subjective Well-Being*. New York: Guildford Press, pp. 1–12, as cited by the CDC.

[46] The wellness continuum concept was adapted by the GWI from Dr. John Travis' (1972) Illness-Wellness Continuum.

[47] Refer to the Global Wellness Institute webpage at https://globalwellnessinstitute.org/what-is-wellness/.
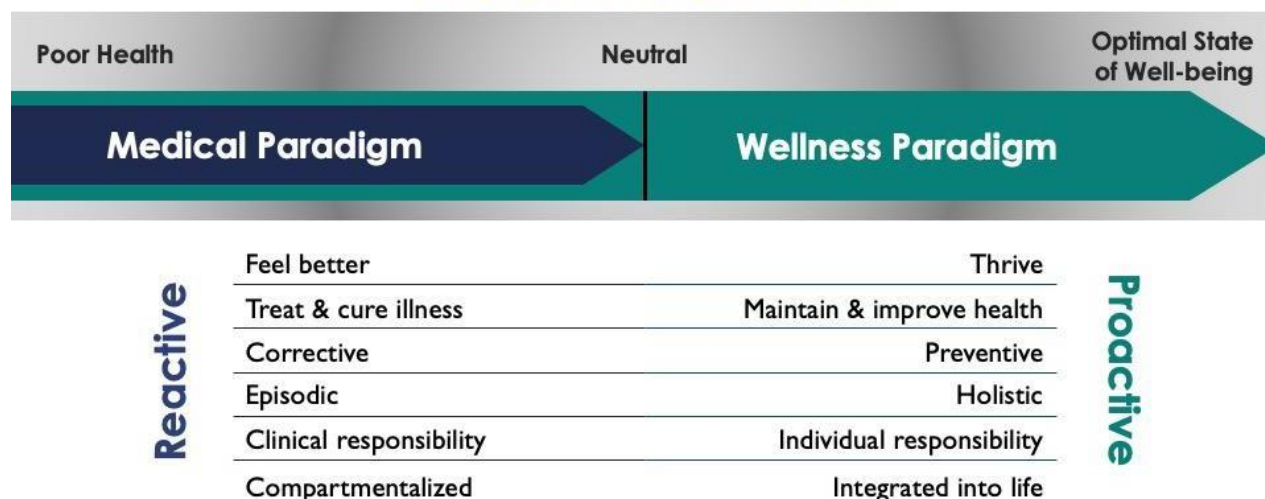
Figure 2: **The Wellness Continuum from the Global Wellness Institute**

International and U.S. Guidance

As an internationally recognized institution of higher education, Georgia Tech is a role model for how other complex organizations can cultivate well-being and draws inspiration from multi-level sources of public health guidance.

United Nations Sustainable Development Goals

To advance the Institute's mission and strategic plan, Georgia Tech President Ángel Cabrera charged leaders and units throughout the Institute to promote, implement and advance the United Nations Sustainable Development Goals at Georgia Tech. Five of the goals are particularly relevant to the work of cultivating well-being for faculty and staff.

SDG 3 - Good Health and Well-Being

- Target 3.4 By 2030, reduce by one third premature mortality from non-communicable diseases through prevention and treatment and promote mental health and well-being
- Target 3.5 Strengthen the prevention and treatment of substance abuse, including narcotic drug abuse and harmful use of alcohol
- Target 3.7 By 2030, ensure universal access to sexual and reproductive health-care services, including for family planning, information and education, and the integration of reproductive health into national strategies and programmes
- Target 3.8 Achieve universal health coverage, including financial risk protection, access to quality essential health-care services and access to safe, effective, quality and affordable essential medicines and vaccines for all

SDG 4 – Quality Education

- Target 4.a Build and upgrade education facilities that are child, disability and gender sensitive and provide safe, non-violent, inclusive and effective learning environments for all

SDG 5 – Gender Equality

- Target 5.1 End all forms of discrimination against all women and girls everywhere
- Target 5.5 Ensure women's full and effective participation and equal opportunities for leadership at all levels of decision-making in political, economic and public life

SDG 8 – Decent Work and Economic Growth

- Target 8.5 By 2030, achieve full and productive employment and decent work for all women and men, including for young people and persons with disabilities, and equal pay for work of equal value

SDG 10 – Reduced Inequalities

- Target 10.2 By 2030, empower and promote the social, economic and political inclusion of all, irrespective of age, sex, disability, race, ethnicity, origin, religion or economic or other status
- Target 10.3 Ensure equal opportunity and reduce inequalities of outcome, including by eliminating discriminatory laws, policies and practices and promoting appropriate legislation, policies and action in this regard

Increasing National and International Focus on Mental Health

Since the onset of the pandemic, the need for a holistic, strategic approach to employee health and well-being has never been more important. While some discomfort is necessary for growth and some stress and anxiety is expectable as we navigate daily life as human beings, when we manage those feelings in unhealthy ways or the feelings become unmanageable, our mental wellness may be compromised. The novel or exacerbated demands of functioning, or sometimes just surviving, during the pandemic and our ongoing recovery from that period all underscore sometimes unmanageable challenges to mental health.

Mind Share Partners published the *2021 Mental Health at Work Report* to investigate the lived workplace culture in the United States. Nearly three-quarters of full-time U.S. workers reported experiencing at least one symptom of a mental health concern in the past year, which was up from 59% in 2019. Commonly reported symptoms of a mental health concern in the workplace are burnout, depression, anxiety, eating disorders, phobias, and PTSD. Historically underrepresented groups, including LGBTQ+, transgender, Black, Latinx, women, non-binary respondents, younger generations (Gen Zs and Millennials), and caregivers, are more likely to experience at least one symptom of a mental health concern. An employee's role and position also significantly impact their likelihood of experiencing at least one mental health concern,

with Executive (82%) and C-level (78%) respondents more likely to report at least one mental health symptom, compared to managers (71%) and individual contributors (71%).[48]

In late October 2022, United States Surgeon General Dr. Vivek Murthy released a new Surgeon General's Framework for Mental Health & Well-Being in the Workplace, highlighting five distinct essentials for any employer's employee health and well-being strategies, including:

- Protection from Harm
- Connection and Community
- Work-Life Harmony
- Mattering at Work
- Opportunities for Growth

Encouragingly, in addition to the engagement initiatives already underway within the Employee Experience department within GTHR, partnerships have been established across campus to realize many of the suggestions provided within the Surgeon General's Framework, including psychological safety workshops with Georgia Tech Strategic Consulting; alignment with the L.O.V.E. GT campaign; and career latticing approaches through the Administrative Services Center and HR Transformation.

Loneliness and Social Connection

In May 2023, U.S. Surgeon General Dr. Vivek Murthy issued *Our Epidemic of Loneliness and Isolation: The U.S. Surgeon General's Advisory on the Healing Effects of Social Connection and Community*. This health advisory spotlights the alarming individual and community health consequences of isolation and the healing potential of social connectedness and provides six recommendations for workplaces:

1. *Make social connection a strategic priority in the workplace at all levels (administration, management, and employees).*
2. *Train, resource, and empower leaders and managers to implement and continually improve programs and practices that foster connection in the workplace.*
3. *Leverage existing leadership and employee training, orientation, and wellness resources to educate the workforce about the importance of social connection.*
4. *Create a workplace culture that fosters inclusion and belonging. Allow people to connect to one another as whole people, not just as skill sets.*
5. *Put in place policies that protect workers' ability to nurture their relationships outside work, while respecting boundaries between work and non-work time.*
6. *Consider the opportunities and challenges various work arrangements (e.g. remote, hybrid, and in-person) pose to workers' abilities to connect with others within and outside of work. Evaluate how these policies can be applied equitably across the workforce.*

The profound impact of belonging on health and well-being is already noted in this *Roadmap*

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[48] Mind Share Partners. (2021).

and practices highlighted in the Surgeon General's recommendations above are already interwoven with the action strategies presented later in this document.

Other guidance for creating and sustaining healthy workplace environments

When implementing this *Roadmap*, campus leaders and stakeholders are encouraged to consult these other sources of guidance for creating and sustaining healthy workplace environments:

- American College Health Association's Healthy Campus Inventory (requires a free account to view)
- American College Health Association's National Faculty and Staff Health Assessment.
- WELCOA's Well Workplace Checklist and 7 Benchmarks for designing strategic wellness interventions and supportive climates for wellness promotion
- Healthy People 2030 Workplace Objectives and Evidence-Based Resources

Quantitative Data

Consistent, longitudinal data for faculty and staff lags in comparison to that within the student space; however, various data sources can be evaluated when considering educational initiatives to meet current health and wellness needs. Both the University System of Georgia (USG) and the Institute deploy survey instruments to assess the health and well-being landscape at Georgia Tech.

Since the spring of 2019, the University System of Georgia's Total Rewards staff and Steering Committee has produced a campus-level *Health Conditions and Prevalence Report*. For the 2022 report, claims data from 2020 and 2021 was pulled from USG's self-insurance program's medical claims administrator (Anthem BCBS), pharmacy benefits administrator (CVS Caremark) and, where coverage was available, the fully insured health maintenance organization (Kaiser Permanente), of which nearly 7,000 employees participate. As the report cautions, claims data is necessarily limited in scope and predictive ability, but can be used as opportunities for further exploration. While consistently reporting fewer claims than the average of other USG institutions, Georgia Tech has seen an increase in reports of hypertension, diabetes, depression, anxiety disorder, and osteoarthritis since the report's inception in 2019.
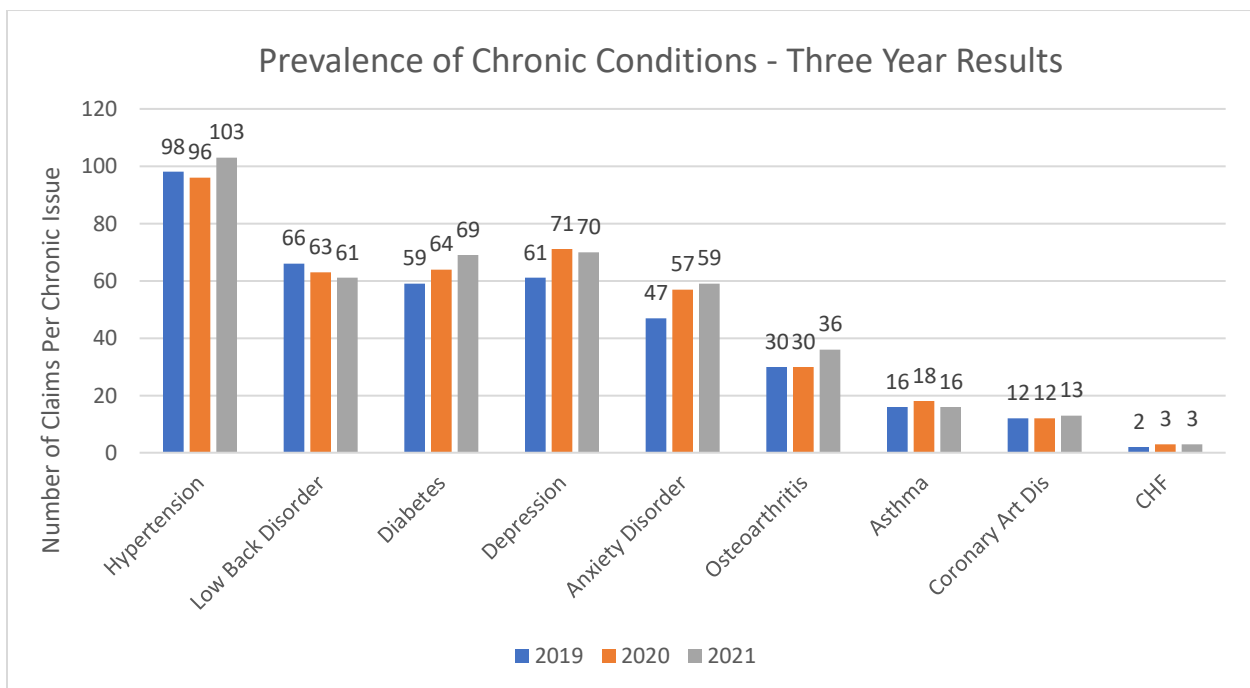

Figure 2: USG Health Conditions and Prevalence Report, 2019-2021

Georgia Tech's 2021 employee preventative screening percentage for cervical cancer, cholesterol, colon cancer, and mammograms ranks above that of the national average, but below the collective USG's for all but mammogram screening rates.
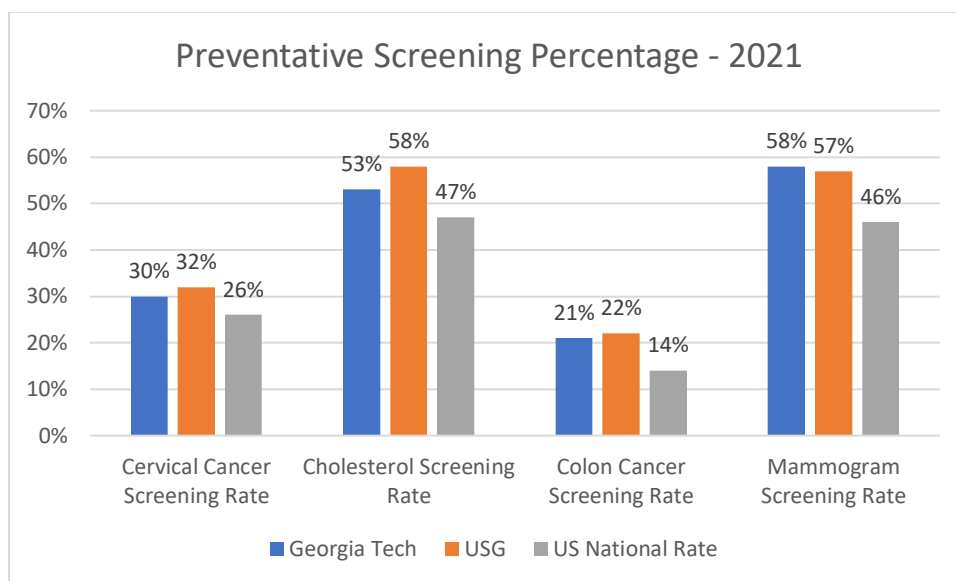

Figure 3: USG Preventative Screening Participation 2021

In addition to providing claims data, the report also shares wellness program participation and risk-assessment data from Virgin Pulse, Georgia Tech's wellness vendor. Out of our almost 10,000 eligible faculty and staff, 11% completed a self-reported health assessment in 2021. In that year, more than a quarter of the respondents indicated difficulty in the following areas:

- *Eating up to five fruits and vegetables a day*
- *Managing high stress levels*
- *Keeping their BMI lower than 30[49]*
- *Getting adequate sleep*
- *Participating in physical activity*

2022 data indicated almost 16% of employees completed a health assessment. While 2022 data has not yet been evaluated, we also know that close to 10% of employees self-reported receiving their COVID and flu vaccines that year, with the potential for even more who did not report through the Virgin Pulse platform.

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[49] Body Mass Index (BMI) is prioritized by the USG-provided benefits vendor, Virgin Pulse. However, in June 2023, the American Medical Association (AMA) adopted a policy identifying BMI as an "imperfect way to measure body fat in multiple groups given that it does not account for differences across race/ethnic groups, sexes, genders, and age-span." The policy suggests alternative measures for diagnosing obesity. https://www.ama-assn.org/press-center/press-releases/ama-adopts-new-policy-clarifying-role-bmi-measure-medicine

In summary, Georgia Tech faculty and staff who seek health care under the USG plans have a significantly *lower* prevalence of the top 5 chronic diseases compared to USG peers. And, encouragingly, over ninety percent of respondents answered "somewhat;" "quite a bit;" or "very much" when asked "How health-friendly is your campus?"

Kepro, Georgia Tech's Employee Assistance Program (EAP) provider, also shares relevant usage data on a quarterly basis. At the end of 2022, the YTD overall utilization rate of the EAP was 5.8%, indicating a possible area of opportunity for greater promotion of this service to increase utilization. While the data is not statistically significant, a plausible correlation with the USG's claims reports of depression and anxiety disorder can be inferred based on primary issues identified at intake. The most cited primary issues identified at intake from among a list of 10 concerns are Emotional Well-being (32%), Work Life (28%), and Relationships (15%), followed by Anxiety (13%) and Depression (8%).

Through the L.O.V.E. GT initiative, Georgia Tech created a *Culture Survey*, which was administered in 2022 and 2023. While the results from 2023 have not yet been shared Institute-wide, they will assist in guiding our strategies and as an appendix to this roadmap. 2022 *Culture Survey* results indicated that out of our nine values, "we nurture the well-being of our community" was noted as an area of opportunity amongst the 20% of staff and faculty who completed the survey instrument. In particular, employees ranked "we nurture the well-being of our community" the least likely to be demonstrated of all the nine strategic values, rated at 3.64 out of a 5-point scale. Behaviors and practices that the community indicated they "somewhat agreed with" included:

- *GT community members are provided with resources to foster their overall well-being*
- *GT leaders support the well-being of the community*
- *My colleagues/classmates show that they value the mental well-being of others*
- *The culture at GT fosters a healthy work-life balance*

In addition, when questioned regarding feelings relating to psychological safety and engagement, the assessment rendered four areas that could be further explored:

- *I would recommend GT to family or friends as a great place to work*
- *I feel a strong sense of belonging to GT*
- *I feel safe bringing up problems and tough issues*
- *I feel safe expressing points of view that are different from my colleagues/classmates*

Finally, Institute Diversity, Equity, and Inclusion conducted a 2022 *Climate Survey*, which was the third of its kind since 2013. The Office of Academic Effectiveness separated the results for faculty and staff, which yielded 15.4% and 25.9% response rates, respectively, for each employee class. Results are summarized in the table below.

Population	Key Findings from the 2022 *Climate Survey*
Faculty 15.4% response rate	Strengths Generally satisfied with the collegiality across campus and their relationships with peers, as well as the campus climate holistically. • However, tenure-track faculty and postdocs indicated the least satisfaction in terms of lack of support and cooperation. Areas of concern: • Tenure-track faculty and post docs indicated the least satisfaction in terms of a lack of support and cooperation. • Advice on the promotion/tenure and annual review process and mentoring for leadership positions, particularly when receiving support from their chairs. • A lack of clarity about grievance processes and promotion and tenure processes • Work-life integration, particularly amongst tenure-track faculty. • Women faculty respondents were much more likely to note marginalization based on their age or gender than their male colleagues • Non-white faculty respondents noted more marginalization based on their race or ethnicity than white colleagues.
Staff 25.9% response rate	Strengths • Generally positive perceptions around inclusion, collegiality, and support. Areas of concern • Support around career progression and Georgia Tech's ability to effectively address grievances. • Research staff tended to report more positive experiences than those of administrative staff, with those who supervise others tending to have greater concerns regarding work-life integration than those who do not have direct supervisory responsibilities. • Respondents who identify as women tended to feel more marginalized regarding gender, where non-white staff respondents felt marginalization in regard to race/ethnicity, immigration, and language. This, in addition to lack of career progression and mentoring for advancement.

Table 4: *2022 Climate Survey* Summary of Responses Disaggregated by Faculty and Staff

Generally, among faculty, respondents are satisfied with the collegiality across campus and their relationships with peers, as well as the campus climate holistically; however, tenure-track faculty and postdocs indicated the least satisfaction in terms of lack of support and cooperation. Areas of concern for faculty respondents included advice on the promotion/tenure and annual review process and mentoring for leadership positions, particularly when receiving support from their chairs. A lack of clarity about grievance processes and promotion and tenure processes was noted as a top concern, as well as work-life integration, particularly amongst tenure-track faculty. There are no formal grievance policies for postdocs. Women faculty respondents were much more likely to note marginalization based

on their age or gender than their male colleagues, where similarly non-white faculty respondents noted more marginalization based on their race or ethnicity.

While sharing the faculty's sentiment of positive perceptions around inclusion, collegiality, and support, staff respondents also expressed concern regarding support around career progression and Georgia Tech's ability to effectively address grievances. Research staff tended to report more positive experiences than those of administrative staff, with those who supervise others tending to have greater concerns regarding work-life integration than those who do not have direct supervisory responsibilities. As in the faculty's experience, women respondents tended to feel more marginalized regarding gender, where non-white staff respondents felt marginalization regarding race/ethnicity, immigration, and language. This, in addition to lack of career progression and mentoring for advancement, are areas that merit further discussion.

Qualitative Data

In addition to the survey data summarized above, **seven themes emerged from listening sessions with faculty and staff**. The creation of Student Engagement & Well-Being and the appointment and arrival of the inaugural Vice President responsible to lead this new cabinet area beginning in August 2021 afforded Georgia Tech the opportunity to engage in a self-study and environmental scan to inform the development of the Cultivate Well-Being portion of the Institute Strategic Plan. Through a series of listening sessions in a variety of settings with staff and faculty throughout academic year 2021-22, along with ongoing participant-observation of the Institute's administrative, programmatic, and operational practices, and prevailing organizational/cultural norms, an informative picture of faculty and staff needs, and priorities emerged. The dominant themes are identified and described below.

Theme 1: Broad Institute-wide awareness of the importance of cultivating well-being and clear commitment to this work, beginning at the very top. That cultivating well-being is visibly highlighted as one of six focus areas in Georgia Tech's 10-year strategic plan sends a strong message about the importance of this work to the Institute's administration, faculty, and staff. Numerous committees and work groups have emerged throughout various cabinet areas, colleges, divisions, and departments to examine issues of well-being and identify interventions; while more have focused on students, efforts through the Office of Human Resources have focused on staff. The President routinely references the centrality of well-being when speaking publicly with a wide range of constituents and stakeholders. Coalescing this commitment into a coordinated set of purposeful activities has been more challenging; in addition, there is not a clear consensus on what exactly is needed to demonstrably move the needle when it comes to enhancing well-being, especially for faculty and for staff.

Theme 2: Respondents from among *both* faculty *and* staff feel overwhelmed by a workload that is only seemingly increasing, with many new demands made in recent years. Both faculty and staff repeatedly reported feeling "initiatived-out" – they felt proud of all of Georgia Tech's growth, increasingly global footprint of excellence, and impact in the academic, research and

service sectors. However, considering the proliferation of numerous strategic priorities, increasing external mandates (e.g., addressing post-tenure review, additional reporting requirements, new compliance responsibilities), pivoting to respond to COVID-19, and responding to increasing enrollments at both the undergraduate and graduate levels, faculty and staff report feeling stretched to and beyond their capacities.

Difficulties associated with the "great resignation" have left many departments feeling understaffed and overburdened; recruitment to fill vacant positions is extremely challenging, and many current staff are fulfilling responsibilities for several positions at the same time. These challenges were further exacerbated by what faculty and staff reported as significant administrative inefficiencies, as well as excessive bureaucratic processes that often lack transparency and were lengthy and/or difficult to navigate. In many cases, faculty and staff reported that Georgia Tech has far more cumbersome processes and procedures than sister USG campuses where they had worked prior. Faculty and staff have requested that we either slow down the rate of new initiatives, or purposefully try to curtail existing initiatives, so as to ensure that faculty/staff do not burn out.

Theme 3: **Faculty and staff perceive they must sacrifice their own well-being to support student well-being.** This was perceived as a trend that became most observable during the Institute's response to COVID-19. Faculty, for example, perceived that administration was asking them to demonstrate flexibility and support student mental health by offering make-up exams; however, these make-up exams required extra investment of personnel time, labor, and effort (e.g., create an alternative exam, additional proctored sessions); yet it did not seem additional resources were forthcoming to assist in this regard. Similarly, staff reported feeling that they had to engage in extra efforts in order to reduce the public health risks of offering on-campus interactions, activities, events, programs and services, e.g., offering events in hybrid format, which also required additional effort. Recent research has indicated that women in general and women of color in particular experienced disproportionally greater stressors and negative workload impacts throughout the COVID-19 pandemic – a trend that has continued as we enter the post-pandemic era.[50]

Theme 4: **Faculty and staff desire having readily accessible, affordable well-being support services for them on campus**. Similar to how students can access the Center for Mental Health Care & Resources in the event of a crisis, faculty/staff felt underserved by not being able to access a similar program at Georgia Tech. Those who were aware of Employee Assistance Programs indicated that while those benefits were valued, there were times when they wanted immediate access to a real human being to help get through a crisis. Similarly, staff – in particular who serve in some of our lowest compensated positions – indicated that basic needs assistance would be beneficial to help tide them through difficult times; being able to access a food pantry or emergency housing would be desirable services. Faculty and staff both

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[50] https://www.mckinsey.com/featured-insights/diversity-and-inclusion/seven-charts-that-show-covid-19s-impact-on-womens-employment

expressed the desire to have more support to practice health-enhancing and wellness-promoting behaviors as part of their workday; for example, could faculty/staff be provided with free access passes to the Campus Recreation Center? Could release time be provided to engage in well-being activities such as meditating, taking a walk, or going to a yoga class? In addition, faculty and staff requested more options for healthy eating at campus dining.

Theme 5: The lack of affordable housing near and around the Georgia Tech campus makes finding a sense of community challenging. Families who wish to purchase a home generally have to look to areas further out from the Midtown Atlanta area in order to afford the mortgage. Rent also becomes more affordable as one move further away from the Georgia Tech campus. As a result, faculty and staff need more flexible working arrangements such as telecommuting to reduce the impacts of commuting time. In addition, the need to get home in a timely manner also means faculty and staff are making choices to forego opportunities to engage with colleagues after-hours, for example, or to participate more actively in student life, e.g., advising a Registered Student Organization (RSO), attending events. These are activities that help to build a sense of connection amongst Georgia Tech community members, as well as foster belonging; however, the economic reality makes this more difficult. This impact appeared to be more pronounced for new faculty and staff who had recently relocated to Atlanta to work at Georgia Tech.

Theme 6: Faculty and staff would like Georgia Tech to better acknowledge their human "beingness," not just their human "doingness." Many faculty and staff agreed that Georgia Tech has been good about sharing the successes of its faculty in the areas of innovation, research, scholarship and teaching (although staff would like to see their efforts better reflected). And, throughout a number of flashpoint incidents, such as natural disasters and conflicts around the globe, as well as traumatic incidents closer to home here in the United States. Students, faculty and staff looked to the administration to help make meaning, offer statements of compassions and support, provide information about available resources, and in general reiterate our common humanity and sense of shared community. For a variety of reasons, the administration was not always perceived as timely in their response, and in some cases, questions were raised about why we failed to respond at all. While these are difficult situations to navigate under the current "culture wars" context – some with potential political fallout associated – faculty and staff would like to see an increased affirmation that our lives are not just about what happens at work, but rather that we live holistic lives impacted by the events around us, including what happens to our colleagues, friends, and family.

Theme 7: Communication in all directions needs improvement. Staff reported that managers and supervisors frequently did not share information with them that was needed to perform their duties effectively, thus resulting in anxiety and stress. This was the commonly reported concern about communication. While faculty and staff appreciated the entrepreneurial and "can do" attitude at Georgia Tech, the many silos and fragmented efforts were a frequent

source of frustration, with individuals reporting not being aware of what others were working on and duplicating efforts or engaging in efforts that were at odds.

Further, transparency was raised as a concern; faculty and staff often reported that they did not understand why certain decisions had been made and did not feel that they had a chance to be consulted on decisions prior to their finalization – particularly if they had operational knowledge that could have helped to inform the decision (for example, changes to policies, procedures, organizational structures). Lastly, staff in particular also reported that they often learned about things after the fact - for example, an event or workshop they wanted to attend - and wished that they had known about it in a timelier manner. Similarly, staff reported wanting to know more about resources available to support their professional development and advancement, as well as personal health and wellness.

These themes provide valuable insight for crafting future assessments and for informing the action strategies outlined later in this *Roadmap*.

Stakeholder Review

In addition to the quantitative and qualitative sources identified above, another round of campus input occurred during a stakeholder review period of a final draft of this *Roadmap* in June 2023. To facilitate the campus-wide review, faculty and staff were invited to read the draft and provide feedback through either survey responses or direct emails. Email invitations were sent through campus communicators, to all summer instructors of record, past ISP wellbeing working group members, Staff Council, Well-Being Activators, Faculty Executive Board, ISP Initiative leaders, and ERG contacts. Feedback was offered through 19 direct emails, one phone call, and 26 survey responses. The authors synthesized the input and added suggested edits. Suggestions outside the scope of this document were forwarded anonymously to leaders in the relevant units.

Data Limitations

First, it must be stated that no personally identifying information was accessed or shared in the development of this *Roadmap*. Data were anonymized and provided and interpreted in the aggregate. Secondly, this *Roadmap* was developed with data available at the time and there are limitations to the generalization of results. For example, the *Health Conditions and Prevalence Report* is limited just to those staff and faculty making use of USG healthcare benefits and specifically those health plan members who presented for care or services (or received a diagnosis) during the time period under review. Furthermore, the impact of COVID and recent early retirements may have changed the age distribution among plan beneficiaries, making comparisons across years difficult to interpret and reducing reliability of results. The *2022 Climate Survey* researchers acknowledge a possibility for non-response bias in their survey and attempted to mitigate this with weighting of respondents to match the overall population demographics (including division, gender identity, and race and ethnicity). And the qualitative

themes summarized above represent the faculty and staff who participated in listening sessions, but those individuals may not be representative of faculty and staff overall.

For future data collection and analysis, every attempt should be made for representative samples and the ability to disaggregate at a minimum by staff, faculty, or postdoc classification. Ideally, disaggregation would also be available by staff class, faculty type, proportion remote worktime compared to on-site worktime and by location, including GT sites outside the United States, as well as key demographic categories for the purpose of exploring systemic health inequities.

Current State of Faculty and Staff Wellness Resources

Current State of Dedicated Faculty/Staff Wellness Personnel

At Georgia Tech, the responsibility for faculty and staff health, wellness and well-being is distributed across multiple entities in varying capacities. In 2020, a year after an Employee Experience department was established within Georgia Tech Human Resources (GTHR), a Program Manager position was created to establish a more centralized focus on employee health and well-being. Prior to that, employee health and well-being services were incorporated into a subset of responsibilities through departments within the Student Engagement and Well-Being cabinet area. Various volunteer organizations provide periodic outreach initiatives, including our Wellbeing Activator program and Health and Well-Being subcommittees on Staff Council and other unit-level staff advisory councils. Much of the additional employee-focused programming and initiatives are provided through established partnerships within the University System of Georgia, including the Employee Assistance Program (EAP) managed by Kepro and the online well-being platform Virgin Pulse.

Faculty well-being is supported through the benefits, programs, and services available to all staff as well as tailored leadership, mentoring and career development offered by the Office of the Vice Provost for Faculty (VPF). In 2022, the Office of Faculty Professional Development hired an inaugural director to expand professional development opportunities for faculty. Additional faculty-specific tools and resources for building community, enhancing belonging and professional development are offered through the Center for Teaching and Learning and GTRI.

Postdoctoral well-being is supported through the same benefits, programs, and services available to employees, as well as via workshops on job search strategies, leadership and project management, mentoring, and fellowship and grant proposal writing through the Office of Postdoctoral Services. In 2021, the Office of Graduate and Postdoctoral Education hired an inaugural Assistant Director for Postdoctoral Services to enhance postdoctoral training across campus and to advocate on issues that affect the experience of postdoctoral scholars. Additional postdoctoral-specific resources for teaching and career advising are offered through the Center for Teaching and Learning and through the Career Center.

While our community should consider faculty and staff health and well-being as a priority and not just dependent upon the aforementioned entities, strategic partnership, commitment, and measurement must be implemented to create a comprehensive, seamless approach. While the USG provides monthly programming and preventative training opportunities, they are under-utilized and generic in scope. We currently do not receive data to assess the impact nor behavioral change in our employees from Kepro or the USG. No dedicated employee health and well-being budget exists; therefore, programming and initiatives are formed by requesting grant monies from the USG or from organizations across campus utilizing their own respective resources. We strive to align this *Roadmap* with USG services while also being responsive to the needs of GT's faculty and staff.

Current Faculty and Staff Wellness Offerings at Georgia Tech

When assessing current programs and initiatives, Georgia Tech provides at least some level of support for faculty and staff along each of the eight dimensions of well-being. The following chart provides a snapshot of the resources, recognizing that the list is not completely exhaustive. While all dimensions are fulfilled in some capacity, an assessment should be done to ensure the programs fulfill the needs of faculty and staff within those dimensions.

Social:
GTHR Sponsored: Be Well Series, Employee Resource Groups, Recognition programs, People Leaders Network Newsletter, Monthly wellness tips
Vice Provost for Faculty (VPF) Sponsored *for faculty only*: Annual New Faculty Dinner, Receptions for Newly Tenured Faculty, Promotion to the Highest Rank Celebration
Executive Vice President for Research (EVPR) Sponsored: Research Administration Buzz (RAB) quarterly meetings
USG Sponsored: Wellness Wednesdays
Other Sponsored: Staff Council, Volunteer opportunities, Tech Rec, Paper and Clay, Six Flags night, Ferst Center for the Arts, sporting events
Physical:

GTHR Sponsored: Be Well Series, Biometric Screenings, People Leaders Network Newsletter, Monthly wellness tips
USG Sponsored: Wellness Wednesdays, KP Run/Walk and Roll, Diabetes Prevention Program
Other Sponsored: CRC (fitness classes, facilities, personal training, massage, special events and more), Tapping, Biking Program, Flu shots, Free HIV Screening

Financial:

GTHR Sponsored: Be Well Series, Perks and Programs, People Leaders Network Newsletter, Monthly wellness tips
VPF Sponsored *for faculty only*: COVID Faculty Relief Program, Faculty Active Service Modified Duties (ASMD)
USG Sponsored: Kepro (Employee Assistance Program), Money Mondays, Perks at Work
Other Sponsored: SMART Park Program

Spiritual:

GTHR Sponsored: People Leaders Network Newsletter and Monthly wellness tips
USG Sponsored: EAP, Wellness Wednesdays, People Leaders Network Newsletter
Other Sponsored: Tapping, Reflection at EcoCommons, The Reflection Space at the John Lewis Student Center

Intellectual:

GTHR Sponsored: Be Well Series, Employee Resource Groups, Staff Tuition Reimbursement Assistance Program, People Leaders Network Newsletter, Monthly wellness tips
VPF Sponsored *for faculty only*: Mentoring Scholars, Writing Scholars, Faculty Writing Retreats
USG Sponsored: Wellness Wednesdays and Tuition Assistance Program
Office of Postdoctoral Services Sponsored *for postdocs only*: Postdoctoral Research Symposium, Leadership and Management in Action Series, Project Management Series
Other Sponsored: LinkedIn Learning, Inclusive Leaders Academy, Clifton Strengths-Effective Team Dynamics, Women Leading @Tech, Leading Edge Coaching Program, Workplace Learning and Professional Development Courses, Inclusive Leaders Academy

Environmental:

GTHR Sponsored: Lactation Room Support, People Leaders Network Newsletter, Monthly wellness tips
Other Sponsored: Work Green at Georgia Tech, Aware Program, Earth Day, Hammocks, Art installations across campus, Community-Supported Agriculture, MARTA partnerships, Community Garden, Bee Sanctuary, Bird-watching tours from Kendeda, Increased biking efforts

Occupational:

GTHR Sponsored: Employee Resource Groups, Staff awards, Service recognition, Performance Management process, People Leaders Network Newsletter, Monthly wellness tips

VPF Sponsored *for faculty only*: Celebrating Tenure, Promotion to the Highest Rank Celebration, New Faculty Academy, New Faculty Leaders Academy, Chair Shares, Associate Dean for Faculty Development Biweekly Check-Ins
EVPR Sponsored: Research Faculty Mentoring Network, Research Faculty Coaching and Development, Research Faculty Hiring and Promotion Guidelines, Workshops and Policy, Research Employee Appreciation Day, Research Faculty Welcome Wagon
Office of Postdoctoral Services Sponsored *for postdocs only*: Faculty Career Advancement groups, Professional Development hub, mentoring workshops
Other Sponsored: LinkedIn Learning, Workplace Learning & Professional Development programs, Campus Learning Directory, GT1000 instruction, Women Leading @Tech, Impact Series, Inclusive Leaders Academy, Thank a Teacher, Mentor Tech

Emotional:

Georgia Tech Human Resources (GTHR) Sponsored: Be Well Series, Employee Resource Groups, People Leaders Network Newsletter, Monthly wellness tips
VPF Sponsored *for faculty only*: Burnout Support Group for Women+ Faculty, One-on-One Professional Development Coaching and Consultations for Faculty, "Saying No" Professional Development Workshop for Faculty
USG Sponsored: EAP and Wellness Wednesdays
Other Sponsored: Staff Council Health and Well-Being Committee, Volunteer opportunities, Tech Rec, Paper and Clay, QPR Training, Psychological Safety trainings, Pet Therapy

Goals and Action Strategies

Starting from the Institute's *Cultivate Well-being Action and Transformation Roadmap with a Focus on Students*, the four priority goals and updated eight dimensions of wellness can be applied to faculty and staff well-being and provide consistency between the two *Roadmaps*.

The following proposed action strategies emerged from several quantitative and qualitative sources including aggregate data from the 2019 Institute Strategic Plan's appreciative inquiry process, the President's 2022-2023 goals and GTHR's 2022 Strategic Plan. In addition, there is dynamic interdependence between these proposed action strategies and other initiatives advancing the ISP Goals, including the Comprehensive Campus Plan (active, accessible, outdoor environments); the Diversity, Equity and Inclusion Plan (this *Roadmap* and the Collective Impact model for implementing it both center equity); Research Next (Research Faculty Engagement and Career Development, All Members of the Research Enterprise Feel Connected); Transformative Teaching/Learning (emphasis on high impact and transformative practices and creating conditions for meaningful experiential learning); Arts@Tech; L.O.V.E. GT and Working@Tech (employee engagement).

In acknowledgement of several of the themes identified above, especially concerns about staff and faculty burnout, a goal of this *Roadmap* is to leverage the strengths and resources already in existence rather than thoughtlessly striving for "new" and "more." There will be gaps to identify and address, but the capacity and well-being of our human resources are front of mind.

The goals and strategies below are a framework, a starting point on our *Roadmap*. More detail will come as an Advisory Board for Faculty and Staff Well-Being is established to operationalize these strategies with specific tasks, timelines, and units responsible. The most effective public health interventions are tailored to a specific audience so the Advisory Board will also help identify which strategies can be uniformly applied to all personnel (staff *and* faculty), those that address the relationships *between* faculty and staff and those that need to be differentiated and tailored to specific job types (staff *or* faculty).

Goal One: Culture Change

Catalyze cultural, transformational change at Georgia Tech so that the places, practices, policies, protocols, people, and philosophies that have a demonstrated positive contribution to well-being for faculty and staff are adopted, advanced, expanded and/or strengthened, while those aspects of Institute culture that impede health and wellness are minimized.

> **Strategy 1A – Assess Needs and Take Responsive Action**: Establish and enhance a campus wellness culture, review data at regular intervals, communicate findings, and take responsive actions to address opportunities for improvement. Eliminate ineffective programs and services, while strengthening, expanding, or scaling up what is already working well. Use data to inform decision-making, synergize action across units, publicize use of data in decision-making to reinforce staff and faculty participation in survey efforts.
>
> Examples:
> - To supplement GT surveys including the *Climate Survey* and *Culture Survey*, evaluate the utility of employing nationally recognized survey instruments including the *National Staff and Faculty Health Assessment* from the American College Health Association, *Gallup National Health and Well-Being Index*, and the *Collaborative on Academic Careers in Higher Education* (COACHE) survey.
> - Share valid and reliable survey items to measure program and service outcomes so that all units can use consistent measures, encourage the use of dashboards, infographics, and other visual displays of data.
>
> **Strategy 1B – Provide Services for Life-Work Integration:** Provide services that help staff and faculty navigate the holistic human experience. Create a caring community in which faculty and staff are "seen" and acknowledge and build resilience to accommodate life's ups and downs. Strive to ensure work supports/embraces personal and family dynamics and overall quality of life. (GTHR Life-Work Integration Goal)

Examples:

- Consider microlearning strategies to improve participation and utilization rates of educational offerings on work-life integration and other wellness topics.
- Provide on-campus childcare and emergency back-up childcare options.
- Offer vetted, high-quality resources and referrals for elder-care, care for family with disabilities and parenting skills training, including how to support neurodiverse family members of all ages.
- Provide vetted, high-quality resources and referrals for adoption, surrogacy, and family planning.
- Assess ROI for expanded parental leave for birth or adoption.
- Explore options to increase readily accessible, affordable wellness support programs and services on campus. Prioritize programs and services that address conditions that even limited data indicate are the most pressing needs for prevention, treatment and management among GT staff and faculty: chronic illness; anxiety and depression; high levels of stress; overweight and obesity (only when an accurate measure of health risk, see critiques of BMI as a risk measure above); and a lack of adequate or restful sleep. Remove barriers to protective behaviors such as vegetable and fruit intake, regular physical activity, and routine screening for preventable diseases and conditions.
- Conduct a cost-effectiveness analysis for an in-house EAP and/or crisis line to meet expressed needs for services to promote mental well-being and manage mental health concerns, and then make a recommendation on implementation accordingly.

Strategy 1C – Champion a Culture of Wellness: Champion a culture of flexibility, wellness, and work-life integration by assessing our current policies and procedures, aligning with work occurring in various other Institute Strategic Priority areas, and ensure systemic changes are enacted. Advance strategies that may mitigate staff and faculty concerns that they are stretched to and beyond their capacities. Leverage the Georgia Tech Leader Competency Model to build the capacity of people managers to lead through a well-being lens. Enhance feelings of belonging through recognizing staff and faculty for career achievements and personal successes.

Examples:

- Assess current committees/entities (e.g., Staff Council committees, councils in the Colleges and units) engaging in wellness work across campus and streamline efforts through collaborative meetings/projects.
- To reduce the negative impact of back-to-back meetings on productivity and well-being, pilot alternatives that would allow travel and break time between meetings.

- Reduce the number of or sunset existing committees that do not have a demonstrable desired impact or have outlived their utility or purpose.
- Explore ways to protect regular focus time in one's schedule and how best to set boundaries with colleagues.
- Before initiating new programs and projects, leaders should conduct a thorough review of the resources necessary for successful implementation (including personnel time).
- Given currently high rates of personnel turnover and early retirement, units should prioritize succession planning and a transfer of institutional knowledge.
- Explore and consider the more strategic use of sabbaticals to promote rejuvenation, reflection and professional growth.
- Extend the compassionate consideration of personal and family medical challenges, and grief, that emerged during COVID. Consider whether COVID impact statements should be an ongoing practice.
- Encourage supervisors to develop equitable systems for coverage outside of normal working hours and at special events so that it is not assumed that certain staff will always provide coverage based on relationship or parent status.
- Send congratulations for promotions, degrees earned with USG benefits (TAP and STRAP), volunteering for shared governance positions, and other career milestones.
- Create regular events for more meaningful interactions and employee recognition. (2022 GT *Culture Survey* Action Planning and Next Steps and Research Next)
- Identify opportunities to recognize individuals as they advance through each stage of the employee lifecycle.

Strategy 1D – Leverage Communications & Marketing: Develop a comprehensive communications and marketing strategy to a) reduce messaging strategies that unnecessarily retraumatize faculty and staff, and b) actively promulgate faculty and staff data on health and wellness and propagate more authentic narrative on faculty and staff wellness-related choices and experiences across all eight dimensions– including an emphasis on an ethic of self-care, spirituality, and meaningful social connections.

Examples:

- Convene an ad hoc group and discuss a cogent approach for responding to critical incidents that balances the political context in which we work with our strategic mandate to cultivate well-being. Continually review and refine media and communications policies and practices at the Institute-, cabinet-,

departmental-, and college-levels, especially around flashpoint incidents[51], e.g., war, earthquake, SCOTUS decisions, mass violence incidents, etc.

- Develop a marketing and communications plan to ensure programs are widely communicated throughout campus so that faculty and staff are optimally aware of the suite of programs and services available to them. (GTHR Life-Work Integration Objective 2)
- Explore a centralized communication platform so that information is accessible and shared more consistently across all units and job types.
- Promote wellness resources, programs, and services that ensure work supports overall quality of life by incorporating the eight Dimensions of Wellness. (GTHR Life-Work Integration Objective 1)
- Include a campaign, repeated at regular intervals, that disrupts misperceptions of health-related norms, destigmatizes mental health challenges and destigmatizes physical and intellectual challenges, including learning differences, celebrating the multiple ways staff and faculty demonstrate talent and competence and the diversity in how we "show up" at work.
- Emphasize balancing rigor and compassion. Acknowledge that professional success is not synonymous with personal success or personal value. As an Institute, let's interrogate what it means to have purpose and promote that one's value as a person is unconditional.
- Establish a searchable wellness portal or centralized repository of wellness resources.
- Promote conflict resolution resources as well as safety resources including the Threat Assessment Task Force.
- Promote awareness of and increased utilization of ergonomic solutions for the reduction of lower back pain, eyestrain, carpal tunnel, etc. Include options for telework settings. https://www.ehs.gatech.edu/general/occupational-safety/ergonomics
- Promote and continually update resilience resources such as those created through the Resilience Employee Resource Group.

Goal Two: Capacity & Creativity

Continue to improve the quality of and ease of access to equity-literate and trauma-informed health promotion interventions while also improving programs and services that focus on the primary prevention of health-related symptoms, diseases, and disorders; the promotion of wellness in a holistic manner; and the creation of conditions which cultivate and sustain well-

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[51] EAB. (2018). *Addressing Campus Climate Flashpoints* [White Paper].

being for faculty and staff, inclusive of all identities and backgrounds, including opportunities to be creative during the workday and to appreciate the arts.

Strategy 2A – Enhance Operational Effectiveness: Conduct an environmental scan of all programs, projects, initiatives, and efforts to promote faculty and staff health, wellness, and well-being; identify areas of overlap, duplication, and inconsistency; determine gaps and areas that need additional attention; and generate a more coordinated, cogent, and collaborative approach to the delivery of programs and services in support of health, wellness and well-being that is resource efficient and operationally effective.

Examples:

- Document the evidence for each program and consider sunsetting programs that do not have measurable, desired outcomes, particularly if they require considerable staff time to implement without proportional outcome benefits.
- Consider utilization of the CDC Worksite Health Scorecard or similar assessment strategy and implement the selected tool.
- Audit peer institutions' wellness release time policies and then make a recommendation on implementation accordingly.

Strategy 2B - Reduce Health Disparities: In support of the *Diversity, Equity and Inclusion Blueprint* strategic initiative, disaggregate and analyze faculty and staff data on health, wellness, and well-being to identify health disparities and institute evidence-based interventions that close health equity gaps.

Example:

- Explore and propose actions to mitigate and/or remunerate the disproportionate emotional, structural, cultural, and functional labor provided by many BIPOC and/or woman-identified faculty and staff.

Strategy 2C – Ensure Healthy Dining: Engage with Auxiliary Services, Tech Dining, Campus Sustainability (Climate Action Plan) and third-party food vendors/caterers across the campus to ensure that meal and beverage options, service delivery, and other aspects of dining services at Georgia Tech facilitate affordable choices that support good nutrition, physical wellness, and effective management of chronic illnesses for staff and faculty, as well as reflect a diverse array of cultural cuisines reflective of our staff and faculty communities and a reduction in food waste.

Strategy 2D – Explore Basic Needs: Assess faculty and staff food insecurity, housing insecurity and temporary assistance needs.

Example:

- Engage in further analysis and inquiry regarding staff and faculty's basic needs and determine gaps in programs, resources, and services (inclusive of food, housing, and learning technology); identify and implement viable solutions to increase capacity, expand access, and promote equity, including a potential emergency funding program for faculty, staff and other employees.
- Explore low-cost employee housing as nearby areas are redeveloped.

Goal Three: Community & Connection

Increase, expand and generate broader awareness of and access to faculty and staff engagement experiences across Georgia Tech that contribute to and facilitate the factors that comprise well-being, including sense of belonging and connection, purpose and meaning, happiness, resilience, self-awareness, and self-efficacy, as well as support living and leading in a manner that is consistent with one's personal values.

Strategy 3A – Honor Our Holistic Selves: Create an environment where people have a sense of belonging and can bring their whole selves to work without bias or discrimination. Relevant identities include, but are not limited to, sexual orientation, gender, gender identity, physical or mental disability, veteran status, race, ethnicity, citizenship, or any other unique characteristic. (GTHR Inclusion Goal)

Examples:

- Provide an accessible environment where all team members are considered equally valued contributors. This could include automatically scheduling an appointment with every new team member to review workspace needs for ergonomic equipment or furniture. (GTHR Inclusion Goal, Objective 1)
- Support community-building at the unit and division levels with strategies (not limited to surveys) leaders can implement to assess staff and faculty needs for informal spaces to gather, network and brainstorm with colleagues, create recommendations and take actions to implement.
- Increase opportunities to improve relationships *between* faculty and staff, not just among faculty and among staff, to promote community-building and mutual respect.

Strategy 3B – Amplify Practices for Healthy Onboarding and Professional Growth: Enhance onboarding and ongoing learning by faculty and staff as key steps for ensuring a healthy learning, living, and working environment.

Examples:

- In partnership with GTHR, VPF, and EVPR inventory all orientation and onboarding programs and initiatives across the Georgia Tech campus and

consider infusion of content that improves knowledge, influences attitudes, shifts behaviors, and positively impacts decision-making as they relate to health and wellness for faculty and staff in the learning-working environment. Once successful practices are identified, add a toolkit to support the Leader Competency performance expectation.

- In close collaboration with Human Resources and the Office of the Vice Provost for Faculty, infuse an unwavering commitment to advancing and supporting faculty and staff wellness and well-being by incorporating relevant expectations in all position descriptions, evaluating employees on their contributions in this regard, and providing ongoing development opportunities to build the capacities of faculty and staff whose roles are not in the primary purview of health and wellness to serve as positive agents of change via their respective roles and responsibilities in a health- promoting campus context.
- Support the effectiveness of the performance management cycle/process ensuring faculty and staff are continuously setting, referencing, and realizing career and personal development goals. (GTHR Fulfillment Goal, Objective 2)
- HR and VPF should collaborate with GT Workplace Learning and Professional Development to foster environments that promote and highlight opportunities for career progression and lifetime learning. (GTHR Fulfillment Goal, Objective 1)
- Share resources that help employees resolve work conflicts and promote fair and equitable work experiences and opportunities. Clarify grievance procedures. (GTHR Employee Experience Goal, Objective 3)
- Outline and communicate engagement activities that employees can participate in organizations, groups, volunteering to assist within the Tech community and with students. Engage employees throughout their employment to proactively identify areas of opportunity for enhanced experience. (GTHR Employee Experience Goal, Objective 2).
- Encourage top-down leadership support to urge employees to attend scheduled campus events and workshops that support wellness. (2022 GT Culture Survey Action Planning and Next Steps)
- Prioritize documentation of institutional wisdom and unit policies and procedures so that the ripple effects of turnover can be minimized, and new personnel can transition quickly and effectively.
- Identify clear advancement options, expectations, and timelines for staff roles. Make it easier for supervisors to promote staff without the administrative burden and delay of creating new position numbers.
- Reinstitute "job shadowing" for employees to explore skills or jobs of interest. (2022 GT Culture Survey Action Planning and Next Steps)

Goal Four: Commitment & Continuity

Appoint an *ad hoc* study group comprised of a diverse range of Institute-wide constituents and representative of all Georgia Tech community stakeholders – including but not limited to students, faculty, staff, administrators, and alumni – to review the feasibility of formally adopting (or adapting) the action framework for higher education that is outlined in the [Okanagan Charter: An International Charter for Health](#) [Promoting Universities & Colleges](#)[52] and subsequently incorporating the framework into Georgia Tech's ongoing administration, culture and operations for the foreseeable future, beginning no later than 2030 when the prevailing Institute Strategic Plan period is slated to end; make a recommendation to the President accordingly. Implementation would begin in academic year 2025-26. As of May 2023, fifteen campuses in the U.S. have adopted the Charter, including the University of Michigan and Cornell University. The action framework is summarized below:

Okanagan Charter: An International Charter for Health Promoting Universities & Colleges Action Framework (2015)	
Call to Action 1: Embed health into all aspects of campus culture, across the administration, operations, and academic mandates.	1.1 Embed health in all campus policies.
	1.2 Create supportive campus environments.
	1.3 Generate thriving communities and a culture of well-being.
	1.4 Support personal development.
	1.5 Create or re-orient campus services.
Call to Action 2: Lead health promotion action and collaboration locally and globally.	2.1 Integrate health, well-being and sustainability in multiple disciplines to develop change agents.
	2.2 Advance research, teaching and training for health promotion knowledge and action.
	2.3 Lead and partner towards local and global action for health promotion.

Table 6: **Components of the *Okanagan Charter***

This *Roadmap* has highlighted several sources of data regarding faculty and staff wellness needs. To facilitate transparency and accountability, the following table identifies how the proposed action strategies align with the qualitative and quantitative data shared above.

Demonstrated Need, Theme or Data Point to be Addressed	Corresponding Strategy/ies Proposed
Acknowledging Human-ness, not just Busy-ness; of Human Being not just Human Doing	1B, 3B
Back Pain	1B, 1D, 2A
Burnout, Overwhelming Workload	1B, 1C

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[52] The full text of the Okanagan Charter can be accessed at this link: https://www.acha.org/documents/general/Okanagan_Charter_Oct_6_2015.pdf

Chronic Illness, Rates of	1D, 2A
Communication, from managers, about resources, during flashpoint events	1B, 1D, 3B
Community, Low Sense of	1C, 1D, 3A
Cooperation and Support in Unit	3A, 1B, 1C
Data, Lack of Longitudinal Data about Faculty and Staff Well-Being	1A
Fruits and Vegetables, Low Consumption of	1D, 2A, 2C, 2D
Grievance Processes, Lack of Clarity	1B, 3B
Marginalization, Experience of	2B, 3A
Mental Health, Crisis Care	1B, 2A
Mental Health, including Anxiety and Depression	1D, 2A
Physical Activity, Insufficient	1B, 2A
Preventive Screenings, Low Participation in	1B, 1D
Promotion, Tenure and Career Progression, Lack of Clarity	1B, 3B
Release Time for Wellness Activities	2A
Sacrificing one's own well-being for student well-being	3B
Sleep, Insufficient	1B, 2A

Table 7: **Summary of Ways the Proposed Action Strategies Align with Demonstrated Needs, Themes and Data-Points**

Closing Reflections

As we strive to lead by example and create a workplace environment where people are engaged, feel a sense of belonging, and thrive, it's imperative that we prioritize the health and well-being of faculty and staff. While many disparate initiatives exist across the Institute, the need for a centralized, dedicated faculty and staff health and wellness department to organize our efforts and transform the culture of well-being for our people has never been greater. A dual approach is needed in addressing employee health and well-being – emphasis must be given to management training and leader development as they lead through a lens of employee health and well-being while also focusing on individual support and resources for all employees.

A philosophy and vision are needed for faculty and staff health and well-being, reflected in a robust strategy to lead our faculty and staff into the future of work and wellness. In addition to creating repositories of resources, which was an identified need within the past few years, professionals are needed to create dedicated and intentional programming and services for varying departmental needs across campus. We must develop programming to reflect the *Surgeon General's Framework*, including, but not limited to, exploring your passion, finding meaning at work, building resilience, harnessing happiness, and identifying/coping with burnout, as well as the eight dimensions of wellness.

Above all else, data must be collected, analyzed, and leveraged to provide intentional outreach and support Institute-wide for our unique employee populations: managers and direct reports

and faculty and staff, etc. Annual initiatives should be established that provide continuity and consistency, while distinctive efforts designed around our data are created and routinely evaluated to determine effectiveness.

Next Steps

The goals and proposed action strategies in this *Roadmap* identify the "what" of cultivating well-being at GT. The "how" will be achieved using a Collective Impact model.

> The work of shifting health, wellness, and well-being outcomes necessarily requires a **socio- ecological model of prevention**, which considers individual, relationship, community, and societal factors both to understand enabling conditions for health and wellness and the barriers. This model has been advanced by the CDC to address a wide range of community health challenges, such as violence[53] and suicide.[54] As a result, this *Roadmap* advances and reflects a **cultural change model** - one which necessarily requires the interest, investment, involvement, and innovation of all cabinet areas, colleges, divisions and departments - or collective impact.

Collective impact "is a network of community members, organizations, and institutions that advance equity by learning together, aligning, and integrating their actions to achieve population and systems-level change." It recognizes that

> *"…large-scale social change comes from better cross-sector coordination rather than from the isolated intervention of individual organizations. Evidence of the effectiveness of this approach is still limited, but [available] examples suggest that substantially greater progress could be made in alleviating many of our most serious and complex social problems if nonprofits, governments, businesses, and the public were brought together around a common agenda to create collective impact. It doesn't happen often, not because it is impossible, but because it is so rarely attempted*."[55]

The five conditions for collective success include (1) a common agenda and common understanding of the problem and the proposed solutions; (2) shared measurement systems and agreement on how success will be measured and reported; (3) mutually reinforcing activities, where each partner undertake specific initiatives in which they have expertise or strengths, and coordinates them with other partners; (4) continuous communication so as to build and sustain trust as well as enable accountability; and (5) a backbone support organization with dedicated staff separate from the participating divisions and departments

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[53] Refer to the CDC's webpage at https://www.cdc.gov/violenceprevention/about/social-ecologicalmodel.html

[54] Cramer, RJ & Kapusta, ND. (2017, October 9). A Socio-Ecological Framework of Theory, Assessment and Prevention of Suicide. *Frontiers in Psychology*, 8. Accessed at https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5640776/pdf/fpsyg-08-01756.pdf. Accessed 1 July 2022.

[55] Kania, J., Williams, J., Schmitz, P., Brady, S., Kramer, M., & Splansky Juster, J. (2022). Centering Equity in Collective Impact. *Stanford Social Innovation Review*.

who can coordinate structured decision-making processes, as well as plan, manage and support the initiatives through ongoing facilitation, logical and administrative support, and technical assistance.[56, 57]

To better support this collective impact approach to cultivating well-being at Georgia Tech, a decision was made in 2022 to not establish a sub-division of health and wellness, led by an Associate/Assistant Vice President, administratively located in the Division of Student Engagement & Well-Being, with the relevant experience and expertise; such an organizational structure will emphasize isolated impact, whether intentionally or unintentionally, as well as potentially signals a singular focus on students. Based on a diagnosis of the root causes of Georgia Tech's unique leadership challenge in advancing health, wellness, and well-being, a collective impact approach is more appropriate and viable – and better addresses the comprehensive needs of students, faculty, and staff.

The Office of the Vice President for Student Engagement & Well-Being, with support from the Institute via the strategic planning process, and in close collaboration with GTHR and VPF, has committed to providing the backbone support organization for implementing this Roadmap.

For each action strategy, we will identify:

- A **lead partner** or point of contact.
- A detailed **outline for implementation**, including milestones and a projected timeline (subject to revision as needed).
- **Metrics for measuring success**, including both quantitative and qualitative measures, as well as incorporating more impact measurements (not just input measurements) as part of assessment, and
- **Contingency measures** for either pivoting or disinvesting in the event a particular action strategy is not yielding desired impacts.

An Advisory Board for Faculty and Staff Well-Being will be convened in Fall 2023 to begin a collective impact process to improve the well-being of faculty and staff. The inaugural Office of Cultivate Well-Being Action and Transformation, established in January 2023, will provide the backbone support necessary to coordinate this process, in close consultation with GTHR and the VPF. Among the initial charges for this Advisory Board will be to identify the strategies necessary to achieve the four goals outlined above, develop a philosophy and vision for faculty and staff well-being and identify meaningful baseline and target data points.

This *Roadmap* would not be complete without emphatically reiterating that the work of public health and social justice must necessarily be integrated, interdependent, and intersectional. Health and wellness cannot be advanced in the absence of justice, and essential indicators of

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[56] Ibid.
[57] Refer also to the Collective Impact Forum (a project of the Aspen Institute) webpage at https://collectiveimpactforum.org/what-is-collective-impact/.

justice are associated with well-being. As such, our work should be guided by the Robert Wood Johnson Foundation's "Culture of Health Action Framework" which has a focus on equity as foundational to improving population health and well-being. These action areas include:

1. Making health a shared value.
2. Fostering cross-sector collaboration to improve well-being.
3. Creating healthier, more equitable communities, and
4. Strengthening integration of health services and systems.[58]

Figure 4: Culture of Health Action Framework, Robert Wood Johnson Foundation
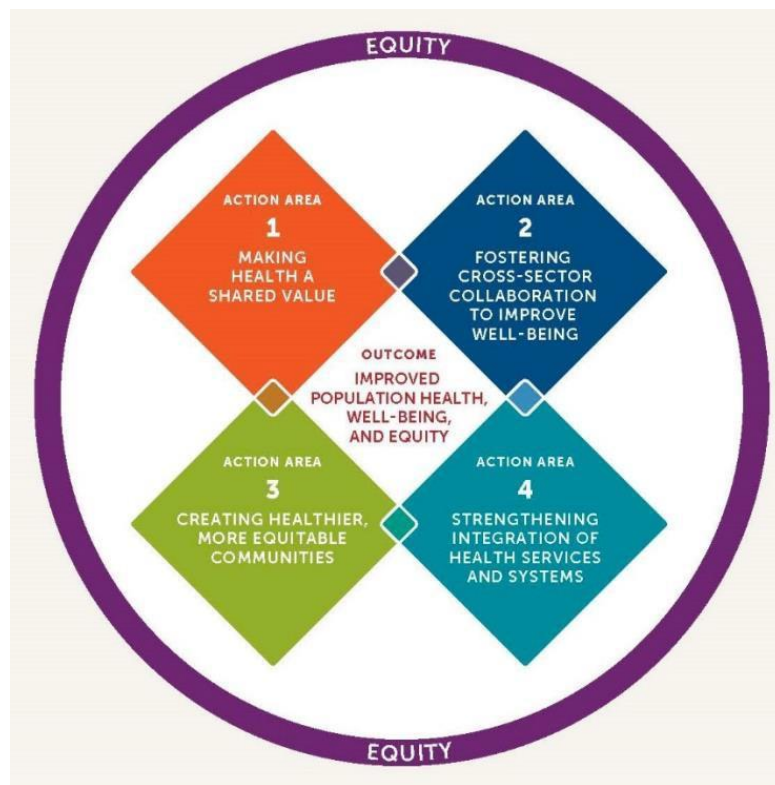
Georgia Tech has the opportunity to become a national and global higher education leader in improving health, promoting wellness, and enhancing well-being for faculty and staff. We are home to some of the most talented scholars, researchers, and practitioners in the world; and we have a legacy of unquenchable optimism, tenacity and can-do attitude that paves the way for success.

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[58] Robert Wood Johnson Foundation. (2018). *Moving Forward Together: An Update on Building and Measuring a Culture of Health*. https://www.rwjf.org/en/library/research/2018/05/moving-foward-together--an-update-on- building-and-measuring-a-culture-of-health.html. Accessed 1 July 2022.

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Cultivate Well-Being Action & Transformation Roadmap Summary Chart

Strategy statements have been condensed below. Please see pages 32-41 for full descriptions.

GOAL	Start AY 2023-2024	Start AY 2024-2025	Start AY 2025-2026
Goal 1: Cultural Change	**Strategy 1A**: Establish and enhance a campus well-being culture, review at regular intervals, communicate findings, and take responsive actions to address opportunities for improvement. Eliminate ineffective programs and services while strengthening, expanding, or scaling up what is already working well. **Strategy 1C**: Champion a culture of flexibility, wellness and work-life integration by assessing our current policies and procedures, aligning with work occurring in various other Institute Strategic Priority areas, and ensuring systemic changes are enacted..	**Strategy 1B:** Provide services that help faculty and staff navigate the holistic human experience. Strive to ensure work supports/embraces personal and family dynamics and overall quality of life.	**Strategy 1D**: Develop a comprehensive communications and marketing strategy to a) reduce messaging strategies that unnecessarily retraumatizes faculty and staff, and b) actively promulgate faculty and staff data on health and wellness and propagate more authentic narrative on faculty and staff wellness-related choices and experiences across all eight dimensions – including an ethic of self-care, spirituality, and meaningful social connections.
Goal 2: Capacity and Creativity	**Strategy 2A:** Conduct an environmental scan of all programs, projects, initiatives, and efforts to promote faculty and staff wellness; identify areas of overlap, duplication, and inconsistency; determine gaps and areas that need additional attention; and generate a more coordinated approach to the delivery of programs and services that is resource efficient and operationally effective.	**Strategy 2B:** Disaggregate and analyze faculty and staff data to identify health disparities and institute evidence-based interventions that close health equity gaps. **Strategy 2D:** Assess faculty and staff food insecurity, housing insecurity and temporary assistance needs, and implement viable solutions.	**Strategy 2C:** Ensure that meal and beverage options and other aspects of dining facilitate affordable choices that support good nutrition, physical wellness, and effective management of chronic illnesses for staff and faculty, as well as reflect a diverse array of cultural cuisines reflective of our staff and faculty communities and a reduction in food waste and climate emissions.
Goal 3: Community and Connection	**Strategy 3A:** Create an environment where people have a sense of belonging and can bring their whole selves to work without bias or discrimination.	**Strategy 3B:** Enhance onboarding and ongoing learning by faculty and staff as key steps for ensuring a healthy learning, living, and working environment.	
Goal 4: Commitment and Continuity	Review the feasibility of adopting (or adapting) the action framework for higher education that is outlined in the *Okanagan Charter: An International Charter for Health Promoting Universities & Colleges* to incorporate into Georgia Tech's ongoing cultivate well-being efforts.		