# MIND HAND HEART: Expanding the Scope

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## Introduction

The Leader to Leader Mind Hand Heart wellness@MIT project team makes ten recommendations that we believe would significantly enhance wellness for staff at MIT, without significant cost. This is a particularly opportune time at MIT for these recommendations to be considered and adopted. The culture is newly primed to focus on staff wellness: There is a new emphasis from the highest levels of leadership – including President Reif -- on the human side of the experience at MIT. Executive Vice President and Treasurer Israel Ruiz has set a new goal that MIT be one of the very best employers. For this goal and the President's vision to succeed, MIT will need a new commitment of attention and resources to the quality of work life. In practical terms this is also an opportune time for MIT to focus on staff wellness: Human Resources has just launched the first full-fledged Employee Assistance Program, called My Life Services, adding a vast array of wellness services and programming to that already offered by many other entities at MIT.

With this new EAP and the wide range of pre-existing services, MIT already has in place the key elements for a strong wellness program for staff. What is needed is improved awareness of – and access to -- what is already available, and, importantly, the cultural change necessary to encourage staff participation. Support from key leadership is required to make wellness for staff a part of MIT's core culture, so that staff feel comfortable using the programs and services that exist.

Enhancing staff wellness is good business for MIT. Staff wellness supports recruitment and retention at a time when strong salaries alone are insufficient to attract and retain the best talent. The benefits we make available to staff are highly competitive, but could be enhanced by increased visibility of wellness as a priority. Particularly because MIT is self-insured, employee health is good for MIT financially in relation to disability, retirement, and related costs. The investment necessary to adopt these recommendations is a marginal cost compared with the ongoing challenges of investing in maintaining and expanding the physical campus infrastructure, and in maintaining competitive salaries and benefits, including and health care costs.

We focus on staff wellness and how best to coordinate and situate it on campus, given current organizational realities. This focus led us to interpret the original proposed direction of the project – expanding Mind Hand Heart beyond students – as a suggestion that we examine ways to improve wellness for staff at MIT, rather than specifically to expand the existing student-grant focused program known as "Mind Hand Heart." Here we lay out strategies that we believe manifest the deeper conceptual aim for a staff-focused wellness initiative at MIT that adds 'heart' to our lives here: one that attempts to unify mind, hand, and heart by identifying an organizational model and some strategies that are most appropriate to MIT's unique culture and structure.

Below we provide a concise list of our ten recommendations. They are fully explained in the main body of the report that follows, which also provides a summary of the resources we used in coming to these conclusions. We also include a copy of the poster we presented that summarizes the project and recommendations in Figure 1. Lastly, we want to thank our project sponsors, Dr. David Diamond, Dr. William Kettyle, and Maryanne Kirkbride, for the time, attention, wisdom, patience, and insights they shared throughout.

Mind Hand Heart **Staff Welless@MIT: Our Recommendations:**

- Maintain student focus for MindHandHeart program
- Coordinate promotion of staff wellness programs through a position in Human Resources
- Ensure messaging on wellness comes from senior leadership and that senior leaders model wellness by participating in wellness programming
- Lower barriers to participating in fitness programs by reducing user fees and expanding decentralized, custom programs
- Develop and offer health screening and prevention program for all MIT employees
- Create and use a metrics dashboard to assess and track employee wellness
- Establish protocols to limit managers' off-hour electronic communication with employees, encouraging work/life balance
- Revise management training and onboarding programs to explicitly incorporate a role in employee wellness
- Adopt mobile applications to increase accessibility and awareness of wellness services and programming, particularly by service/shift employees
- Reduce stress by promoting and supporting effective and low-cost public transit options

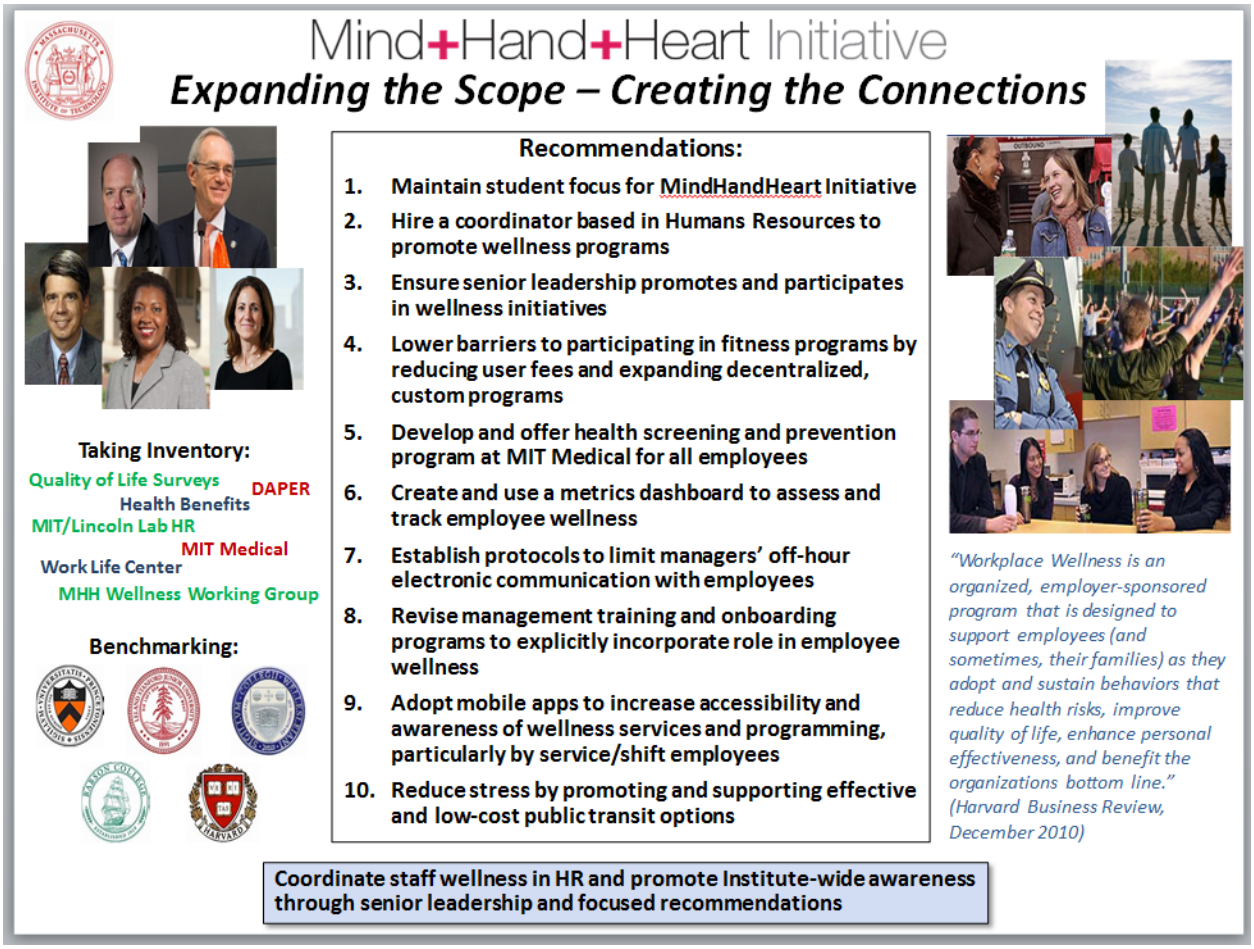



Figure 1: This summary of the project and recommendations was used in our group presentation and provides a high-level overview of what appears in this report.

## Recommendation #1: Maintain student focus for MindHandHeart program

MindHandHeart (MHH) is a campus-wide initiative sponsored by the Chancellor's Office and MIT Medical aimed at enhancing mental health and overall well-being for students at MIT. After interviewing Maryanne Kirkbride and multiple members of the steering committee, we felt it would be premature to recommend the MHH Initiative be expanded to staff and faculty at this time, though this was a suggested premise of our project. There are many students, staff, and faculty involved in MHH and expanding the scope at this time would only divert attention away from the current student focus. Instead, we recommend that the Institute move forward in creating a coordination of information about existing wellness resources and be poised to identify wellness contacts across Departments, Labs and Centers (DLCs) who could be key points of contact when the MHH Initiative is ready to expand to staff and faculty. During our meeting with the MHH Steering Committee, a number of committee members expressed the opinion that MHH must be expanded to faculty due to the feeling that faculty have a considerable effect on the wellness of their students. We recommend that the MHH Faculty Co-

Chairs consider this issue and whether or not they wish to invest time and resources to expanding the MHH Initiative to include faculty sooner rather than later. As the MHH Initiative enters its second year of a 4-year build out, the group is poised to demonstrate the proof of concept for students and recommend how staff and faculty can best participate and benefit in the future. However, we still believe that MHH should maintain a focus on students, and the following recommendations will discuss a path forward for staff wellness.

**Recommendation #2: Coordinate promotion of staff wellness programs through a position in Human Resources**

There is a wide range of quality health and wellness programs and benefits available to MIT staff. The different divisions that provide these services should continue to promote one another's work and try not to offer duplicative programs. However, there is no one person who serves as a clearinghouse for all this information. Nor is there a website, newsletter, or other form of communication that provides an overview of, or guides employees through, these different offerings. For an employee who may have a nascent interest in participating in these programs, just finding the time to figure out these different options could create a disincentive to participate, and the fragmented approach to marketing the programs likely means that many miss out on relevant programs.

Notably, when we spoke with other universities, such as Harvard and Princeton, we found that they struggled with the same issue. However, Harvard University does now offer coordination of information about wellness resources through a website called "HARVie – Harvard Information for Employees." *(Please see: http://hr.harvard.edu/healthy-harvard).* Princeton has both a newsletter and an umbrella list of links to make all their programs known through a single point of reference[1].

At MIT there are at least four divisions that are providing programs and benefits in the health and wellness arena (along with many other services specific to their area.) They include:

1. **The MIT Work Life Center** – (a division of MIT Central HR) - The MIT Work-Life Center offers a range of direct services and spearheads projects that enhance the quality of life for the MIT community. They serve as the vendor coordinator for MyLifeServices, MIT's Employee Assistance Program (EAP), Bright Horizons, MIT's Child Care provider and a host of other programs on issues such as elder care and job flexibility.

    a. **MyLifeServices** – MIT's EAP vendor provides services including mental health and substance abuse counseling and service coordination, nutrition and life coaching, sleep coaching and grief counseling. This new suite of services is a

[1] Princeton offers an umbrella **"**Thrive@Princeton" marketing effort, has a "Healthier Princeton advisory board", where all those doing health services meet twice per year, and they offer a "Healthier Princeton" newsletter

significant change to wellness services for staff, and was just launched in May 2016.

2. **MIT Benefits** – A division of MIT Central HR – administers the Blue Cross and Blue Shield health plan contract (which includes some wellness benefits) and other insurance benefits along with the $150 annual fitness reimbursement benefit.

3. **Department of Athletics Programs, Exercise and Recreation (DAPER)** – Through its Division of Recreation, DAPER offers fitness club memberships, group classes, nutritional counseling, on-site PT Pop-Up (explained is the previous recommendation).

4. **MIT Community Wellness** – Community Wellness at MIT Medical works with the entire MIT community to provide the resources and programs that can help members of the community make healthy choices. Their offerings include exercise and fitness, violence prevention & response, Spouses & Partners Connect, sleep, stress reduction, mindfulness and relaxation, sexual health, smoking cessation, health and wellness coaching, healthy eating, family support, and MedLinks.

Each of these divisions (or vendors) brings their own specific focus to these programs or benefits. For that reason, we are not recommending that these programs or benefits be consolidated under one organizational structure. Quite the opposite, we think the diversity of offerings and perspectives is one of MIT's strengths. Instead, we recommend that MIT create a position in the Department of Human Resources that will be responsible for developing an over-arching communications strategy—preferably with a single branding -- to promote these already existing programs. For example, if MIT launched a website similar to Harvard's "HARVie" website, then that website might contain a "Stop Smoking" tile that links to information about a smoking cessation program available at MIT Medical, an alternative program available through MyLifeServices, along with information about Blue Cross/Blue Shield's coverage of nicotine replacement products. MIT has already invested resources in developing "Atlas" as a portal for all different types of employee information. Rather than create another website, Atlas may already be well situated to serve as the location for a clearinghouse for information about employee wellness. We also recommend that there be a companion strategy for Lincoln Lab that provides employees with easy access to information that is specific to that location.

We believe that the Director of Benefits, who reports to the Vice President for Human Resources, is best positioned to provide direct oversight of this initiative. All of the divisions and vendors involved in providing these programs and benefits should be active participants in a steering committee that guides this initiative. This steering or coordinating committee would be appointed by the VP for HR, and would meet on a regular, though not necessarily frequent, basis -- perhaps twice per year -- to keep each other informed on key issues and emerging needs, to coordinate programs, services, or marketing as needed/desired, and to consider how to best support the health of MIT staff through the full array of programs and services offered on campus.

MIT's goal should be to provide employees with easy access to well organized information about all available services and, in doing so, lower another barrier to employee participation.

**Recommendation #3: Ensure messaging on wellness comes from senior leadership**, including senior leadership participation in wellness programming

**Senior Leaders Must Promote – and Demonstrate - Wellness and Work/Life Balance**
Staff members at MIT receive countless messages every day. Some messages are in written form, such as emails, posters and websites. Other messages are communicated orally, such as informal performance feedback, formal presentations, and department meetings. Finally, and perhaps most importantly, messages are also communicated through the behavior of people in leadership positions such as a boss who appears calm and collected, or frantic and fatigued. The importance of wellness and work/life balance needs to be communicated by senior leaders through all three of these communication mediums. *Who is senior leadership?* At MIT, senior leadership consists of the President and Vice Presidents, the Provost and Associate Provosts, the Deans, the Chancellors and the Director of Lincoln Lab. The members of senior leadership are listed in the Institutes organization chart (http://orgchart.mit.edu/). We believe that all these leaders, along with formal and informal leaders throughout the Institute, need to promote and demonstrate wellness and work/life balance.

Wellness initiatives compete for the time and attention of staff members who have to get their work completed. A staff member may or may not have a supervisor who believes that it is okay to take a full lunch break or leave work at the traditional close of the business day. For an Institute that prides itself on having a culture that is described as "drinking from a fire hose", it is certainly understandable why some staff believe that absenting themselves from their cubicle in the middle of the day to attend a stretching and strengthening class is outside the spirit of the place – even if it is technically permissible.

For this reason, the behavior of leaders (both formal and informal) needs to demonstrate that wellness and work/life balance matters. If an employee sees a poster about an on-site yoga class that is good; if the Department Head mentions the class during a quarterly all-department meeting that is even better. However, if the Department Head actually attends the yoga class then that is the best way to communicate that wellness matters. MIT's Police Chief John DiFava is a regular fixture at the Zesinger Center weight room. His presence not only communicates that wellness matters, it also opens up an avenue for informal communication between a senior leader and the other members of the MIT community who use the fitness center.

We encourage the providers of our wellness programs (DAPER, Community Wellness, the Work/Life Center and MyLifeServices) to partner with senior leaders and feature those leaders in their promotional materials. We encourage leaders – formal and informal– to participate in wellness initiates for their own benefit as well as for the benefit of other community members who will be more likely to participate if they see that wellness at MIT is supported by its leadership both in words and in actions.

**Recommendation #4: Lower barriers to participating in fitness programs by reducing user fees and expanding decentralized, custom programs**

**User fees for recreational sports and activities at DAPER should be reduced. On site fitness programs should be expanded (alternative title)**

The MIT Department of Athletics, Physical Education, and Recreation - Division of Recreation (DAPER Recreation) operates three fitness centers on campus and one center at Lincoln Lab. Reducing or eliminating the cost of joining these fitness centers seems like a logical step if MIT wants to promote wellness. This idea has been raised many times and, most recently, the Union representing MIT's service employees proposed eliminating this membership cost during its contract negotiations.

DAPER is responsible for raising approximately 80% of its annual budget through user fees, including annual membership (enrollment fee), cost per class, and other utilization based charges. The Institute provides the remaining funds from the Student Activities Fee. (The Fitness Center at Lincoln Lab is an exception to this funding arrangement as it receives no funds from Student Activity Fees.) Consequently, DAPER Recreation would need a significant increase in funding from the Institute if it was to eliminate or reduce its enrollment fee. While this would be ideal, we do not think the DAPER Recreation enrollment fee serves as a major barrier for staff. If the $150 annual reimbursement that the Institute provides (through Blue Cross/ Blue Shield) is deducted from the total cost, the monthly enrollment cost for an individual membership at DAPER Recreation Facilities is $27.00 per month. While this cost is more than what staff pays at Harvard University, it is less than what staff pays at Boston University or Boston College. It is also less than the YMCA in Cambridge or the Boston Sports Club in Cambridge.

In addition to the annual enrollment cost, MIT staff that have already paid the enrollment cost, must pay additional utilization fees to participate in some classes and activities, such as certain group exercise classes, personal training, swimming instruction, figure skating and golf. Both DAPER Management, and MIT staff who we spoke with, believe that these post-enrollment utilization costs are more likely to discourage ongoing participation than the initial enrollment cost. We believe that if the Institute is prepared to make an additional investment of fund into DAPER then those additional funds should be used to reduce or eliminate on-going utilization fees (like costs per class) rather than to reduce or eliminate the cost of the initial enrollment fee. We also think that if additional funding became available, DAPER should explore an incentive program that rewards employees for participating in their programs. For example, an employee could earn points that would translate into Tech Cash each time they use a DAPER facility. (We recognize that decisions around funding and distribution of resources are always complicated, and we make this recommendation with the assumption that DAPER Management would be directly involved in deciding how best to use any additional funding.)

When we spoke with DAPER management we learned about an initiative that they have promoted for several years. This initiative is called "Pop Up PT". The purpose of this initiative

is to eliminate all of the logistical barriers that staff confronts when trying to exercise. DAPER Recreation staff members go on site in DLCs and conduct fitness programs. These programs are of a low intensity so people of all abilities can participate. They also don't require the participant to change their clothes – which reduces another obstacle to participation. While these programs may not fundamentally change someone's fitness profile, they do serve to introduce - or reintroduce - people to exercise in a way that is as convenient and non-threatening as possible.

DAPER Recreation staff members are enthusiastic about this program and have already had some notable success stories in a handful of DLCs (The Medial Lab and Hayden Library for example.) Impressively, over 150 hours of Pop Up PT has already been scheduled for FY' 17. However, DAPER staff are necessarily dependent on the presence of a DLC based staff member who is willing to coordinate the program and encourage his/her colleague to participate in that program. Success is much more likely if there is someone in a highly visible position willing to play this role. However, it is fair to assume that absent a DLC based internal champion, the program will be lost among many other well intentioned programs.
We recommend that the Pop Up PT program be expanded as part of a three-year pilot program. As part of this program, some organizational unit (e.g. VPF, Sloan, or SHASS) that has not already hosted a Pop Up PT program would commit to hosting at least one program once a year for three years. With the Pop Up PT program, we believe DAPER management has already demonstrated their ability to create and offer innovative programs to promote fitness. We now need to help this program grow by making a more deliberate attempt to promote the initiate in the DLCs.

**Recommendation #5: Develop and offer health screening and prevention program for all MIT employees through MIT Medical**

MIT Medical currently provides resources to all members of the community under a tab titled "Stay Healthy at MIT" which includes links to Classes and Programs, Support Groups, and timely information such as Flu Information. Under the Campus Employees section on MIT Medical's main webpage there is information about all of the resources of MIT medical but it is mainly directed towards those employees who choose to enroll in the MIT Traditional Heath Plan, which requires employees to receive their care at the MIT Medical Center. (The alternative plan is the MIT Choice Plan, which allows employees to receive care from providers who are not on staff at the MIT Medical Center.) We recommend that MIT Medical review whether or not they can provide more robust wellness prevention screenings and services for all staff regardless of healthcare insurer/provider, similar to services they provide all staff for annual flu shots. By offering employees wellness screenings and health assessments, MIT can support positive health outcomes by empowering employees through creating awareness and encouraging preventative behaviors. MIT Medical is well positioned to partner with MIT HR in promoting a culture of wellness for MIT and promoting the value of protecting staff health through regular free screening and prevention (i.e. BMI, smoking cessation, stress testing, etc.). It would be beneficial for MIT to offer a "health risk appraisal" as part of a new employee's onboarding that targets employee education and engagement about their own health behaviors and health

promotion programs. As part of this recommendation, we encourage MIT Medical to again look at the pilot *Well Check* program previously proposed by Dr. David Diamond and Maryanne Kirkbride for components that could help make this a reality for staff wellness.

**Recommendation #6: Create and use a metrics dashboard to assess and track employee wellness**

It is widely understood that "if you measure it, you'll manage it." Certainly if you don't measure something, you won't have a foundation to make informed, productive decisions about it. MIT has some metrics about staff wellness; for example, the Quality of Life Survey (see section on Asset Inventory) provides metrics on organizational culture around wellness, including sleep patterns and other key data. However, there are large areas related to staff wellness where MIT lacks data to support resource allocation and program development. Wellness programs can pay off in higher morale, greater productivity, and lower costs (see Berry et al*), but to develop and direct wellness services and programs effectively, and then to assess them, MIT needs supporting data.

We recommend that MIT establish a dashboard to track relevant data from the Quality of Life survey, and to gather and track employee wellness participation data (e.g. as outlined by Berry et al *) including utilization of programs, penetration (proportion of employees participating), and sustainability (number of employees who sustain a positive health or wellness practice), as well as data on MIT's success as an organization in terms of supporting healthcare and safety (e.g. medical care and pharmaceutical costs and utilization, disability costs, and worker's compensation costs; productivity; safety incidents; voluntary turnover).

With the recent roll-out of a new Employee Assistance Program (EAP), such a dashboard could be designed to assess the impact of that important investment in a vetted? wellness service.

**Recommendation #7: Establish protocols to limit managers' off-hour electronic communication with employees, encouraging work/life balance**

We recommend that best practices be developed for managers modeling work/life balance. Such best practices should include avoiding sending (or expecting) email on the weekend or other off-hours. Managers could be provided with information about, and encouraged to use, available tools (e.g. Outlook's option for delayed sending times) when it is absolutely necessary to compose email during off-hours. Training should include encouraging managers to ask themselves questions before sending an email during weekend hours, e.g. "Is it important for staff to know this for a Monday meeting?" If so, that could be a reason to send the email. Otherwise, if the staff would not need it to change something they would do or prepare for a Monday meeting, it should not be sent.

This program would have to go beyond the provision of a "cheat-sheet" or one-off training session to succeed. It would require an educational/marketing campaign and senior leadership support, as noted elsewhere in our recommendations.

**Recommendation #8: Revise management training and onboarding programs to explicitly incorporate role in employee wellness**

We recommend that the topic of supporting and promoting wellness and work/life balance be added to management training and onboarding, including for internally promoted managers. This topic should be a required part of management training and onboarding. Managers should be encouraged to make wellness not only discussable, but routinely discussed.

We would like to eventually see wellness training raised to a similar level as Security Training at Lincoln Lab, for example. Security is a ubiquitous part of working at Lincoln. Staff are required to complete initial Security Training and then yearly recurring training. Also, there are posters and signs everywhere – many displaying key leaders at Lincoln -- reminding staff about the importance of security and security requirements. So, the idea of security surrounds staff, and it is always on their minds. A future vision would be to see Staff Wellness viewed in a similar manner.

**Recommendation #9: Adopt mobile applications to increase accessibility and awareness of wellness services and programming, particularly by service/shift employees**

We recommend that a coordinating wellness group (see recommendation above) evaluate equity in access to wellness programming and make any needed adjustments. In one move toward equitable access, we recommend that all wellness programming be promoted through mobile-friendly applications to ensure that those whose work doesn't put them in front of computers – such as service and/or shift workers – know about wellness programming. While we did not see data from the recent survey that indicated service workers have less access to wellness programming and information about it, DAPER has confirmed that service/shift workers do not use the athletic facilities or wellness programs, and benchmarking at other universities (e.g. Princeton and Harvard) indicated that this is a widespread issue on campuses. In addition, in our interview with VP for HR Lorraine Goffe-Rush, she indicated that staff in security, for example, are frequently are not able to participate in wellness programming.

Beyond access to information, we recommend that all staff be made to feel welcome to participate in wellness programming and services. This will require leadership from top levels of MIT, as indicated above.

**Recommendation #10: Reduce stress by promoting and supporting effective and low-cost public transit options**

We recommend that MIT reduce stress among staff by providing as much support for public transit and shared transit options as possible, including both financial supports (such as the recent move to provide free T passes) and allowing for flexible schedules to assist in reducing commuting time. Support for bicycle commuting, including use of Hubway, should be

continued, and possibly expanded, especially in relation to bicyclist safety in Cambridge, evaluated.

Having convenient showers and changing areas made available for biking and running commuters—regardless of their membership in DAPER—is and extremely important component to promote these healthier and potentially less stressful commuting methods. MIT has already invested in some shower facilities, including showers for the entire MIT community in building 32, and -- for Sloan, Economics and Political Science only—in building E62. Information about these facilities was not readily discoverable through searches of MIT's website and none of our team was aware of them before we began consulting with the parking/commuting office and facilities planning experts at Sloan. Should the interest in these facilities prove too limited once awareness is raised, we recommend expanding such facilities, particularly to make them accessible to all parts of the campus, and providing adequate maintenance so that they are welcoming and comfortable to use. We learned from Lucinda Hill, Director of Sloan Facilities and Space Planning, that having showers for commuters provides credit towards the Leadership in Energy and Environmental Design (LEED Gold) certification process as a "green" building, so shower availability would not only support wellness, it would support sustainability objectives as well.

MIT should lobby and continue to provide its expertise to the MBTA to support improvements in subway reliability, operation and commuting infrastructure. We learned from Chancellor Barnhart that there have been ongoing and extensive efforts by the MIT Transit program to provide guidance and direction to the MBTA, and that this relationship supported the recent move to free MBTA passes for MIT employees. While we had initially thought we would recommend that such support be offered pro bono, we have learned that funding for graduate students and postdocs in the Transit Program emerges from the existing relationship and that free consulting does not align with this important means of building new leaders in mass transit. We therefore recommend that the Transit Program continue to prioritize building and maintaining ties with the MBTA and offering expertise to the MBTA in ways that are feasible for maintaining their program, but which also encourage the MBTA to innovate and advance in ways that might not otherwise be possible but which support improved commuting to MIT.

*Leonard L. Berry, Ann M. Mirabito, and William B. Baun, "What's the Hard Return on Employee Wellness Programs?" *Harvard Business Review*, December 2010.

## Asset Inventory

Our team used the following data gathering methods to establish an inventory of assets and needs for employee wellness:

- Reviewed summary of most recent MIT Quality of Life Survey
- Interviewed the following individuals -

  Internal interviews at MIT included the following:

  Dave Diamond L2L ’08 (L2L Project Co-Sponsor)

  Maryanne Kirkbride L2L ’06 (L2L Project Co-Sponsor)

  Eva Cardarelli (Employee Relations, Lincoln Lab)

  Katherine Barlett (Program Manager at Lincoln Lab)

  Maria Barrios (Health and Welfare Benefits)

  Ronnie Mae Weiss (Work Life Center)

  Bara Littman (Work Life Center)

  Alexis Ertzner and Liz Looker (Co-Chairs of the Wellness Working Group of the MHH Steering Working Group)

  Tim Mertz (DAPER)

  Julie Soriero (DAPER)

  Lorraine Goffe Rush (MIT HR)
- We conducted benchmarking with other universities:
  - Princeton
  - Harvard
  - Stanford
  - Wellesley
  - Babson
- Reviewed the following journal articles:

  “What’s the Hard Return on Employee Wellness Programs?” Harvard Business Review (December 2010)

  “A Cost-effectiveness and Return-on-Investment Analysis of a Worksite Vitality Intervention Among Older Hospital Workers.” Journal of Occupational and Environmental Medicine (March 2013)

  “Medical Care Savings from Workplace Wellness Programs - *What Is a Realistic Savings Potential?*” Journal of Occupational and Environmental Medicine (January 2013)

  “The Workforce Wellness Index - *A Method for Valuing US Workers' Health.”* Journal of Occupational and Environmental Medicine (March 2013)

  “Wellness now, value later - *Workplace programs have benefits, though not in the short run.”* Modern Healthcare. (July 2013)

  “The Association Between Optimal Lifestyle-Related Health Behaviors and Employee Productivity.” Journal of Occupational and Environmental Medicine (July 2014)
- Reviewed Existing programming and services at MIT:

  Wellness programming and services at MIT are currently organized in a decentralized manner and fall into several areas that include MIT’s Work-Life Center (MIT HR), Community Wellness at MIT (MIT Medical), the Department of Athletics, Physical Education and Recreation (DAPER), and within MIT’s DLCs.

**The MIT Work-Life Center** meets the personal and professional needs of our diverse, global community — whatever they may be. Whether you are a member of the faculty or staff, a student or postdoctoral associate or postdoctoral fellow, call on us whenever you need a solution, big or small. Whatever your phase of life, whatever your challenge, we're here to lend support and connect you to resources and support systems, no matter where you are located. In addition to one-on-one consultations, we offer a wide range of programs that address specific life issues and events. **The MIT Work-Life Center's** newest benefit is MyLife Services—a free, confidential MIT benefit. One call puts you in touch with a network of experts who can provide emotional and behavioral counseling, work-life consultations, and personalized referrals. The MIT Work-Life Center offers a range of direct services and spearheads projects that enhance the quality of life for the MIT community. Services such as consultations and referrals are available at no cost to MIT students, staff, and faculty, as well as to their partners and families. While the Center delivers important services to individuals, they also focus on the high-level systems and infrastructures that affect the quality of life at MIT, promote best practices in national and international work-life forums, and assist in the development of new policies and services. The Center operates within the Institute's Human Resources Department.

**Community Wellness at MIT** includes programs and services that support the entire MIT community.

**Community Wellness at MIT Medical** works with the entire MIT community to provide the resources and programs that can help you make healthy choices. Offerings include:

- Exercise and Fitness: Maintain or improve your fitness through classes, our annual getfit@mit fitness challenge, and more.
- Violence Prevention & Response: Get support and assistance in dealing with sexual violence or stalking, and participate in educational programs.
- Spouses & Partners Connect: Programs to help MIT spouses and partners develop social and professional networks.
- Sleep: Learn relaxation techniques and other ways to improve your sleep schedule.
- Stress Reduction, Mindfulness, and Relaxation: Learn to manage stress though classes and workshops, audio files, and in-person consultations.
- Sexual Health: Information, supplies, and counseling about sex and sexuality.
- Quit Smoking: Our certified tobacco treatment specialist and clinicians can help you quit smoking for good.
- Health and Wellness Coaching: Trained coaches can help you achieve greater physical and mental wellbeing through goal setting, accountability, and support.
- Eating Healthfully: Learn to make healthy eating choices, and recognize the warning signs for eating and body-image problems.
- Family Support: Resources for childcare while attending classes, working, or meeting other responsibilities.
- MedLinks: Trained student liaisons work with undergraduates and MIT Medical, supporting students' health in living groups and in the MIT community.

The mission of the **Department of Athletics, Physical Education and Recreation (DAPER**) is to bring students, faculty, and staff together in educational activities that promote healthy lifestyles, enhance a sense of community, foster growth in leadership and teamwork skills, and encourage the pursuit of excellence.

MIT's Departments, Labs, and Centers also provide a range of services locally and find ways to connect with centralized offers in MIT HR and MIT Medical. (Can provide examples here)

## Staff Mind Hand Heart wellness@MIT: Lessons learned

Our work as a project team allowed for numerous opportunities to put our experience and learning to work. Key learnings included:

- Know the culture and work within it:
    - Wellness is newly important in MIT's culture and is a priority President Reif. This is an appropriate moment to increase support for staff wellness.
    - Any wellness program recommendations for staff must fit MIT's decentralized structure and culture.
    - Ironically, even the members of our team experienced how hard it can be to change both culture and habits when we found ourselves violating our own wellness recommendation by sending emails back and forth over the weekend non-work hours.
- Prioritize sense-making - Deborah Ancona's work on how successful teams operate and the 4 Capabilities of Leadership reminded us of the importance in prioritizing sense-making for our project. In order to fully scope our project, we needed to gather information broadly at MIT, using networks including Leader to Leader in order to understand the needs and issues before driving to any conclusion or in the end our vision for changes.
- Build shared understanding - Any cultural change to support wellness will need to begin with a shared understanding of what staff wellness means.
- Be strategic – We needed to consider how we could best leverage and maximize the opportunities of rollout of MIT's first full Employee Assistance Program and identify an organizational umbrella for staff wellness that positions wellness for the broadest reach and success.