

Buddying at onboarding



About this report

This report forms part of Wellcome's 2020 Workplace Mental Health Commission. The aim of the commission was to understand the existing evidence behind a sample of approaches for supporting anxiety and depression in the workplace, with a focus on younger workers.

You can read a summary of all the findings from Wellcome's 2020 Workplace Mental Health Commission on our website: <https://wellcome.org/reports/understanding-what-works-workplace-mental-health>

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Buddying at onboarding to prevent depression and anxiety in young adults in the workplace

Insight analysis report

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1. Executive summary

Depression and anxiety are a global problem, costing an estimated US\$1.15 trillion each year in lost productivity. Investing in employees' mental health makes financial sense for employers: in the UK it has been estimated that every £1 invested could generate a £5 return. However, employers need more information about what works and for whom.

We reviewed the evidence to assess whether buddying at onboarding could contribute to preventing depression and anxiety among young people (aged 16-25 years old) in the workplace. Buddies are co-workers who support the new employee during their first few months, and familiarise them with the organisation's people, processes, work environment and culture. We searched a variety of literature sources, and spoke to advisors in the fields of mental health and human resources. We reviewed 195 research papers and reports in detail and included 18.

We found that workplaces, including large multinational companies such as Microsoft, are already using buddying at onboarding. Their aim is not explicitly to support mental health, rather to help the new employee adapt to their role quickly, and increase their engagement and satisfaction with onboarding. There is some evidence that buddying does offer benefit in these areas.

Although the impact of buddying on anxiety and depression has not yet been directly assessed, there is indirect evidence to support its potential benefit. For example, we know that young people can find the transition from education to the work environment difficult, and value co-worker support, and buddies could complement more senior mentors.

By providing information and guidance buddies could help to reduce known work-based risk factors for depression and anxiety such as role stress, and help mitigate others, such as high job demands, by providing social support. Interventions similar to buddying (workplace mentoring and peer support for those with mental health conditions) and interventions aiming to prevent anxiety and depression in the workplace have been shown to produce small positive impacts on mental health outcomes.

Buddying is most likely to be effective if it is part of a wider workplace mental health strategy that targets multiple work-related risk factors, combines both organisational-level and individual-level approaches, and has clear support from the organisation's leadership. Researchers and employers should look to work together to evaluate the impact of buddying at onboarding on a range of organisational and mental health outcomes.

2. Introduction and background

Depression and anxiety are a global phenomenon. In 2019 depressive disorders and anxiety disorders caused 46.9 million and 28.7 million disability-adjusted life years (DALYs) globally respectively.¹ Depressive disorders were the second most common cause of years lived with disability globally.

The World Health Organisation (WHO) estimates that worldwide about 4.4% of the population suffer from a depressive disorder, and 3.6% from an anxiety disorder, although estimates from individual countries vary.^{2,3} Most people living with common mental disorders such as depression or anxiety are employed; between 20% and 40% of the workforce in Europe are estimated to be living with a mental health problem at any given time.⁴

Sickness absence linked to mental illnesses is one of the most costly to employers.⁵ In Great Britain stress, depression and anxiety caused over half (55%) of work days lost to ill health in 2019/20.⁶ Every year depression and anxiety are estimated to cause a loss of over 12 billion days of productivity, at a cost of US\$1.15 trillion globally.⁷ Most losses are caused by reduced productivity among employees working when they are unwell (presenteeism), and the remainder due to absences and turnover (estimated at 66%, 15% and 19% of losses in the UK respectively).⁸

Investing in employees' mental health makes financial sense for employers: in the UK it has been estimated that for every £1 invested they receive a £5 return.⁸ Workplaces in the US which are more psychologically healthy have also reported reduced employee turnover (7% compared to the national average of 38% annually).⁹

As with other chronic conditions, there is growing interest in how to prevent anxiety and depression. A recent review of mental health in the EU highlighted the role of the workplace "as both a major factor in the development of mental and physical health problems and as a platform for the introduction and development of effective preventive measures".⁴

Depression and anxiety in young people

In this report we focus on young people aged 16 to 25 years old. In 2020, individuals in this age group are split between Millennialsⁱ (also known as Generation Y) and the next generation, sometimes known as Generation Z. Millennials and Generation Z are estimated to currently form almost half of the global workforce.¹⁰

Young people aged 15-24 have similar rates of clinically diagnosed anxiety to older age groups, and lower rates of clinically diagnosed depression than most older age groups.² However, they are responsible for a greater proportion of ill health among younger people than older people. For young people aged 10-24 years old, depressive and anxiety disorders were the 4th and 6th most common causes of time spent living with ill health in 2019, ranking higher than in older age groups.¹

International surveys have found that almost half of Millennials and Generation Z (44% and 48% respectively) report feeling anxious or stressed most or all of the time, and between one in six and one in eight report suffering from depression.^{8, 11, 12} One survey found that young employees in the UK were more likely than older employees to report having a formal diagnosis of a mental health disorder (37% of those aged 18-29), with anxiety being the most common diagnosis (21%).¹³

There are also signs that mental health problems among younger people are increasing. Figures for England suggest that between 1999 and 2017 there was a 42% increase in depressive disorders in 11-15 year olds (from 1.8% to 2.5%), and an increase of 58% in anxiety (from 4.5% to 7.1%).¹⁴ The current covid-19 pandemic may also disproportionately affect the mental health of younger people.¹⁵

Factors influencing mental health in the workforce

Being employed and having “good quality” work is considered by employees to protect against depression and anxiety through increasing their wellbeing, allowing them to interact with peers, and providing financial stability.¹⁶ However, work can also have a negative impact on mental health through a range of mechanisms.^{16, 17} A survey in Great Britain suggested that the main contributing factors to stress, depression and anxiety in the workforce are workload (44%) and lack of support (14%).⁶ Only 8% of British employees

ⁱ Exact definitions of Millennials in the literature vary, with the earliest birth dates reported for the group ranging between 1977 and 1981 and the latest between 1994 and 2002. Also sometimes known as Generation Y, as they followed Generation X (those born between 1965 and 1980). They are followed by Generation Z (typically those born between 1997 and 2012).

report that their organisation is very good at preventing stress or anxiety in their employees.¹⁸

This review

As an organisation the Economist Intelligence Unit (EIU) has been implementing various strategies to support the mental health and wellbeing of employees across our offices internationally. Therefore as part of the evidence review team in the Health Policy and Clinical Evidence division we were very interested to be part of this commission looking at what works for improving mental health of young employees, to inform both our own organisation and also employers more widely.

We elected to look at whether buddying at onboarding could impact rates of depression and anxiety in young employees (aged 16 to 25 years old). The WHO's Healthy Workplaces model includes co-worker support as one way to lessen the impact of psychosocial risk factors on employees.¹⁹ Buddying is one form of co-worker support, and has been proposed as part of comprehensive approach to promoting mental wellbeing at work, both at onboarding for new employees and for those with existing mental health problems.^{20, 21}

Large businesses (250+ employees) are reported to have the highest rates of stress, depression and anxiety in the UK, and are also the most likely to have put mental health support measures in place for employees.^{6, 8, 13} Therefore we were particularly interested in the potential impact of buddying on mental health in the context of large, multinational organisations.

Buddying at onboarding is the practice of appointing an existing employee to help a new employee settle in when they first start in an organisation. The remit of a buddy usually includes giving practical help with orienting the new employee to the organisation's people, processes, work environment, and culture. As well as getting the new employee up to speed quickly, giving a positive experience at onboarding aims to improve employee engagement and reduce turnover.

3. Methodology

Our searches drew on social science approaches, which are designed to suit cross-disciplinary topics such as this (mental health, business, health promotion, young people).²²

We searched a wide range of sources including:

- Databases, including bibliographic databases (PsycInfo, Cochrane Library, EMBASE.com, Scopus, Social Care Online, British Library Business and Management collection), journal hosts (e.g. Wiley Online) and research databases (e.g. Researchgate)
- Organisational websites (e.g. Chartered Institute of Personnel and Development, WHO)
- General web search engines (Google)
- Reference harvesting and citation tracking.

For the non-bibliographic database searches (e.g. searches of organisational websites), only potentially relevant articles were added to the Endnote reference management database for further screening.

Searches used a variety of phrases including combined terms from the facets of:

- **Population:** new employee, new recruit, early career, recent graduate, Millennial, Generation Y, Gen y
- **Intervention:** mentor*, buddy* (mentoring, buddying)
- **Intervention:** onboarding, support, orient*
- **Setting:** work, employment, workplace, (large/multinational) company, corporation
- **Outcomes:** depression, anxiety, wellbeing, well-being, engagement, retention and satisfaction.

In addition we spoke to advisors working in the field of mental health and human resources to identify any additional literature we may have missed, and to gain insight into implementation of buddying programmes within our organisation:

- Anne Thomas, Director of Business Development Employability and Training, Mind in the City Hackney and Waltham Forest
- Michael Thomas, Learning and Development Director, The Economist Group
- Aakriti Sharma, HR Manager – India, The Economist Group
- Christine Hancock, Founder and Director of C3 Collaborating for Health

- Tom Sandford, C3 Collaborating for Health associate in nursing, mental health and community development.

References were assessed for inclusion based on direct relevance to the review scope, or utility in making inferences about the possible impact of buddying. No study design limitations were placed on studies of buddying. For the wider literature we focused on systematic reviews in order to obtain a high level overview of related topics outside of our scope. Overall 195 references were added to our Endnote reference database and reviewed in detail. We included 3 studies describing buddying, and 15 providing indirect evidence on its potential impact. Few references focused on young employees specifically.

4. Results

Direct evidence: Buddying at onboarding and mental health

No studies were identified which assessed the impact of buddying at onboarding on depression and anxiety among employees of any age.

We identified two qualitative studies reporting on the experiences of Millennials in the workplace that touched on buddies.^{23, 24}

The first reported on the experience of Millennials (n=6) who had had completed a graduate programme (which included assignment of a buddy) in the retail sector in Ireland.²³ One emergent theme was the importance of a sense of support, including from buddies and informal peer mentors, and the positive impact this had on their work. The second explored Millennials' experience of the work environment (n=10), not specifically at onboarding.²⁴ One participant who had experienced mental health-related absence described the value of having a buddy who noticed when they were exhibiting unhealthy behaviours (working late or not taking breaks) and talked to them about it so they were able to take measures to avoid progression.

Business case studies

There is evidence that companies are utilising buddying systems at onboarding.^{25, 26} One example is Microsoft, a large company with over 120k employees, whose successful pilot of onboarding buddies for 600 new employees led to them expanding the initiative.²⁶

They found that buddies helped new employees become productive more quickly. Over half of new employees (56%) who met with their buddy at least once in their first 90 days reported that the buddy helped them to quickly become productive in their role. This proportion increased with more frequent meetings, reaching 97% in those who met their buddy eight times or more.

New hires with buddies were 36% more satisfied with their onboarding experience compared with those without a buddy at 90 days. New employees with buddies also felt more actively supported by their manager and the broader team.

Their learnings from their pilot were that:

- Buddies should be given enough time to fulfil their buddying role
- Clear time boundaries should be communicated to both the buddy and new hire

- Buddies should have strong job performance, a good understanding of the new employee's role, and ideally the same line manager
- The buddy system also helped buddies to develop their managerial skills, and to deepen their knowledge through teaching.²⁶

Buddying at the Economist Intelligence Unit (EIU)

Buddy at onboarding is suggested for all new EIU employees globally. In the last two years it has become a formal part of onboarding in our India office (called the Peer Assist Programme). This was initiated largely because new employees in the India office tend to be relatively young, with 70% of them being on their first job.

The volunteer buddies are briefed about the role by HR and meet with HR regularly throughout the program. The buddy acts as a sounding board and offers encouragement to the new employee. They tend to be selected from the same team as the new employee and have gone through the same process themselves in the last 2 years. Their responsibilities include:

- Familiarising the new employee with company culture and values
- Introducing the new employee to others in the unit and throughout the company
- Taking the new employee on a tour of the workplace and campus
- Answering questions e.g. about basic role-related and operational issues, and pointing the new employee to the appropriate resources
- Supporting the new employee through their induction.

The program lasts for 6 months, with weekly meetings in the first month, followed by fortnightly or monthly catch ups. Anecdotal feedback on the program has been positive. The program has continued through the covid-19 pandemic, and now offers another way for new employees to keep in contact with co-workers while working remotely.

Indirect evidence: Work-related risk factors for depression and anxiety

As we did not identify any research directly on the impact of buddying on mental health we have looked at the evidence on work-related risk factors for the development of depression and anxiety, to determine whether there is a theoretical basis for buddying having an impact.

Harvey et al. conducted a systematic review (search date 2016) of systematic reviews (a meta-review) of work-related risk factors for depression, anxiety and stress.¹⁷ They found

moderate evidence of an association between a range of factors and increased risk of these common disorders, including:

- High job demands
- Low job control
- Low social support in the workplace
- High effort–reward imbalance
- Low relational and procedural justice
- Role stress
- Bullying.

The review considered specific factors involved in various models of work stress, and we discuss those most relevant to buddying here.

The **job demand–control–support (JDCS) model** proposes that when jobs with high demands (high workload/time pressure) are combined with low control (minimal decision-making) this creates a ‘high-strain’ situation where there is the greatest risk of illness and poor wellbeing. High levels of social support in the workplace may moderate this effect. Four moderate quality reviews included by the meta-review provided good evidence for a prospective association between high job demand, low job control and low social support and poorer employee mental health.

The **organisational justice model** relates work stress to the fairness of rules and social norms within companies, specifically:

- How resources and benefits are distributed (**distributive justice**),
- The methods and processes governing that distribution (**procedural justice**) and
- Interpersonal relationships (**interactional justice**), which includes two elements:
 - **Relational justice**, the level of respect and dignity received from management
 - **Informational justice**, the presence or absence of adequate information from management about workplace procedures.

Most studies have focused on relational justice and procedural justice. One moderate-quality review found that low relational justice and low procedural justice were strongly associated with an increased likelihood of stress-related disorders including adjustment disorder (based on one study with 2 large prospective cohorts), while a second moderate-quality meta-

analysis (5 prospective studies) found more limited evidence for an impact on depression symptoms.

The review also addressed **role stress**, including:

- **Role ambiguity**, where an employee lacks information about their role's responsibilities and objectives
- **Role conflict**, where there are two or more opposing expectations about an employee's role.

One moderate quality meta-analysis found that role conflict and role ambiguity were related to significant increases in depression symptoms.

Some studies also found an association between **longer working hours** and poorer mental health. One moderate quality meta-analysis of 6 prospective studies found limited evidence of an association between longer working hours and increased depression symptoms. Two low quality reviews found associations between working more than 40 to 48 hours a week and risk of developing symptoms of depression and anxiety (3 cross sectional studies and 4 prospective studies) or poorer psychological health (19 studies).

A moderate quality meta-analysis also found an association between **workplace bullying** and increased depression symptoms (3 prospective studies, weighted odds ratio (OR) 2.82, 95% CI 2.21 to 3.59), which was supported by a second meta-analysis. There was limited evidence of an impact of conflict with superiors or co-workers on depression (3 prospective studies).

Based on the findings of this review, buddying in its current format could contribute to reducing the risk of mental ill health in the workplace mainly through:

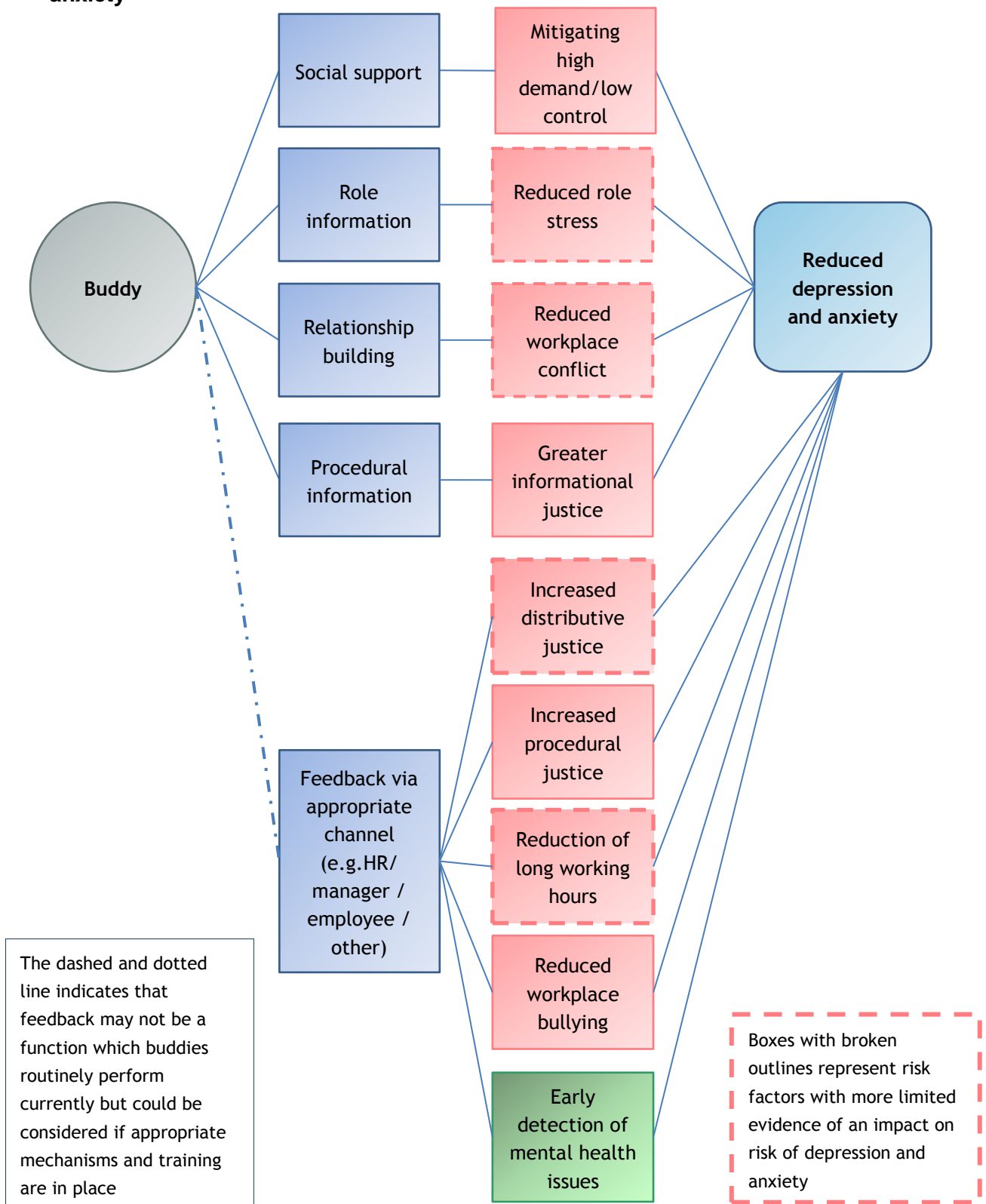
- **Providing social support:** both directly and by helping the new employee to build their organisational network.
- **Reducing role stress:** by providing information about the new employee's role, expectations of them, and tips on prioritisation.

Buddying, either in its current form, or with additional adaptation, could also conceivably:

- Improve **informational justice** by ensuring new employees have enough information about workplace procedures, including how resources and benefits are distributed so that feelings of **procedural injustice** do not arise through a lack of understanding.

- Pick up and feedback warning signals about **organisational injustice**, **excessive work hours** or **bullying**, using anonymised or confidential channels as needed e.g. anonymised surveys or through HR.
- Help the employee to avoid or resolve any issues with **workplace conflict**.
- Signpost employees to any additional mental health support available at the organisation if they are concerned about their wellbeing.

Figure 1: Mechanisms by which buddying could influence risk of depression and anxiety



Indirect evidence: Millennials and Generation Z in the workplace

The UK's Chartered Institute for Personnel and Development's (CIPD) research has highlighted that the transition from education to employment can be disorienting and traumatic for 16–24-year-olds.²⁷ A key part of this transition involves learning how to work in a professional environment.^{27, 28} Buddies can help facilitate this and answer questions that young people may feel less comfortable in asking their manager initially.

Buddying support may be particularly important for younger individuals taking on apprenticeships and in non-graduate roles, where they may not have experienced the sort of opportunities for workplace preparation that are offered in higher education.²⁷

Young people have highlighted their challenges in building a good work network.²⁷ Communication skills, team-working, and confidence have been reported to be the most important skills to develop in young employees in their first year at work by HR professionals. Buddies could support development in these and other skill areas through direct interaction, helping the new employee build their networks, informal knowledge sharing, and signposting to training opportunities in the organisation.

Millennials themselves recognise the importance of support from colleagues, and have been found to value mentoring.^{28, 29} For example, a survey of 4,364 Millennial graduates from around the world entering the workforce for the first time found that working with coaches or mentors was the training and development opportunity they most commonly selected as being of value (selected by 28%).²⁸ However, over a third (38%) said that older senior management did not relate to younger workers. Peer-based buddying may complement traditional mentoring by providing a more relatable ear.

Buddying also has the potential to support young people at key junctures in their careers other than when they first start. For example, Millennials report valuing working abroad.²⁸ Those working for multinational organisations who get the chance to move country to work in another office could benefit from a buddy scheme to create new networks and assist in the settling in process, even if they are not new employees.

Indirect evidence: Mentoring, peer support and preventive interventions in the workplace

Mentoring

Mentoring generally involves a senior employee (the mentor) providing career-related and psychosocial support for a more junior employee.³⁰ Therefore there are similarities to buddying, and mentoring may be seen as the natural progression in providing employees with extra support after they have moved on from the buddying stage. As such we looked at the mentoring literature to determine its impact on mental health, as well as any lessons on what works and not that may be applicable for buddying.

Eby et al. 2008 reviewed the impact of mentoring across three areas: youth mentoring, academic mentoring, and workplace mentoring.³¹ They found that mentoring had a consistent, but often small, positive impact on a range of outcomes including behavioural, attitudinal, health-related, relational, motivational, and career outcomes (all fixed-effects analyses). The smallest impact was for psychological stress and strain (20 studies, 6,232 participants).

In subgroup analysis, workplace mentoring significantly reduced psychological stress and strain (9 studies, 3,146 participants), and improved satisfaction with work and commitment to the organisation, performance, interpersonal relations and helping others, and motivation. Additional studies would be needed to determine to what extent buddying has a similar effect, given its differences from mentoring.

A scoping review (search date 2014) specifically evaluated mentoring of young people (up to the age of 25) for promoting wellbeing and preventing emotional and behavioural difficulties.³² Most research has been in educational settings, and most of the mentors were adults. However, slightly older peers (generally at least 2 years older) were increasingly recognised as having potential as mentors.

The review found that longer relationships (over 3 months) may have bigger impacts. Matching on personality and interests (including career interests for work-based mentoring) rather than demographic matching (e.g. based on ethnicity) seemed most beneficial. However, screening of mentors, and ongoing training and supervision were identified as potentially more important than matching. Mentors who were confident and knowledgeable tended to be more successful. These findings may have implications for the selection of buddies.

Peer support

Buddying is a form of peer support, which can be broadly defined as “people drawing on shared personal experience to provide knowledge, social interaction, emotional assistance or practical help to each other, often in a way that is mutually beneficial”.³³

A large review (search date 2015) looked at the evidence on peer support, focusing largely on studies involving people with long term physical or mental health conditions and their carers.³³ Overall it concluded that peer support can help people feel more knowledgeable, confident and happy and less isolated and alone. Evidence of health benefits was more mixed, and there was little research on cost effectiveness.

The review reported that there was evidence that peer support for people with mental health issues can improve their experiences, psychosocial outcomes, behaviour, health outcomes, service use and cost. However, not all studies have found benefit. Studies which assessed outcomes for the peer supporters themselves tended to find benefit.

It reported that the most promising forms of support included:

- those that focus on emotional support, sharing experiences, practical activities and education
- one-to-one support offered face-to-face or by telephone
- those where support is offered regularly (such as weekly) for three to six months.

However, some caution is needed in interpreting the results as more robust evidence from systematic reviews and RCTs tended to have less positive findings than other study types.

Interventions to prevent depression and anxiety in the workplace

In general, evidence from systematic reviews and meta-reviews on the impact of interventions to prevent depression and anxiety in the workplace suggests that they can have a small positive impact on outcomes such as depressive symptoms, burnout and work-related stress.^{4, 16, 34-38} There is also preliminary evidence that some workplace health promotion programmes can reduce presenteeism.³⁹ Common features among successful programmes include involvement of organisational leadership and a supportive workplace culture.^{39, 40}

Existing research on mental health promotion in the general population (including workplaces) largely focuses on individual-level approaches, often targeting existing mental

illness or improving resilience.⁴¹ A buddying programme at induction is one type of organisational-level intervention. Organisational interventions change the psychosocial work environment by changing some aspect of the organisation, such as structures, policies, processes, culture, programmes, roles or tasks.³⁸

The outcomes of existing research on organisational interventions is mixed, which is unsurprising given the heterogeneity of approaches and organisational contexts in which they could be implemented.³⁶⁻³⁸ However, there are signs that they can be beneficial. For example, one systematic review found that combined organisational- and individual-level approaches tended to produce longer-lasting positive effects on burnout than individually-oriented interventions alone.⁴⁰ Another systematic review similarly found that more comprehensive workplace interventions targeting different types of risk factors simultaneously, including organisational-level factors, were more likely to be successful than interventions targeting single risk factors.³⁷ A third systematic review found low-quality evidence that organisational interventions improve wellbeing and retention rates among teachers.³⁸

5. Discussion

Our rapid review identified no research on the impact of buddying at onboarding on depression and anxiety in any age group. However, there was evidence that buddying at onboarding is being implemented.^{23, 25, 26} One evaluation found that onboarding buddies in a large, multinational organisation helped new employees become productive more quickly and increased their satisfaction with onboarding.²⁶ Two qualitative studies suggested that Millennial employees value buddies.^{23, 24}

In the absence of direct evidence of benefit for buddying we drew together other strands of evidence to assess what impact buddying might have and how it might best work.

Evidence from research on mentoring and peer support suggest that buddying could have small impact on outcomes such as stress, and psychosocial and mental health outcomes, but this needs to be formally assessed.^{31, 33} Buddies could help to make the transition from education to employment less disorienting and traumatic for young people, and may be particularly helpful for those who have had little previous exposure to the work environment e.g. those from disadvantaged backgrounds or younger individuals.^{12, 27}

Buddying could contribute to reducing a range of work-related risk factors for depression and anxiety (see Figure 1), mainly by providing social support and reducing role ambiguity and role conflict.¹⁷ They could also potentially reduce feelings of distributive or procedural injustice, reduce informational injustice, and feedback on issues such as excessive workload or workplace bullying. However, the need for trust and confidentiality between the buddy and new employee means that feedback may need to be collected anonymously and in aggregate.

Buddying schemes are an organisational-level approach. Based on the hierarchy of risk control organisational-level interventions could have greater impact than individual-level interventions, but they are less frequently studied and implemented.^{37, 42-44} The potential for such approaches is recognised by the UK's National Institute for Health and Care Excellence (NICE) which recommends that individual-level interventions should be complemented by organisation-wide approaches to mental wellbeing at work.⁴⁵ Preventive interventions involving large-scale culture change or organisation-wide initiatives are also among the approaches suggested to have the greatest financial returns.⁸

Effective collaboration is needed between employers and academia to design robust evaluations of the impact of preventive organisational-level interventions such as buddying on mental health outcomes.

Buddies are just one potential source of support for employees, and the success of buddying programmes are likely to be dependent on wider organisational context and culture. By itself buddying is unlikely to have a significant impact if there are major occupational risk factors that it cannot resolve. Therefore studies should take into account these wider factors, and use multi-faceted interventions aimed at the identified risk factors where possible.

Approaches such as intervention mapping could help in designing these interventions.^{46, 47} Research should also investigate organisations' existing buddying schemes and new employees' experiences of these, to help build a better picture of current best practice.

Outcome measurement also needs to be carefully considered. It has been estimated that a trial of over 60,000 participants would be needed to demonstrate a 15% reduction of new cases of depression over one year with a universal prevention programme.⁴⁸ In addition, employees with mild depressive symptoms may account for a greater loss of productivity than those reaching the threshold for clinical diagnoses, based on their higher prevalence.⁴⁹ Therefore continuous measures of mental health and psychological wellbeing should also be measured rather than solely clinical diagnoses. Trials should also include outcomes that matter to employers such as presenteeism, absence and turnover, and process measures to aid in interpretation of how these interventions have an impact and what factors influence whether they work.^{39, 50}

As with all research, this rapid review has limitations. For example, we have not looked in depth at specific professions where mentoring is common such as nursing, or at peer support for those with existing mental health problems, which may offer additional insights. The body of evidence reviewed also has limitations, in that it is often observational and cross-sectional, so attributing causality is not possible. More in depth review and research should be conducted to inform the development and implementation of buddying interventions.

6. Recommendations

Buddying at onboarding is considered good practice, particularly for young employees. It may improve productivity and satisfaction, although its impact on mental health is not known. Employers should consider trialling buddying schemes if they are not already in place.

Based on current practice and the available research, using the following approach to buddying may make the scheme more successful:

- The formal buddy relationship should be time-bound, and last for at least 3 months
- Meetings between the buddy and the new employee should happen regularly, ideally weekly for the first month at least
- Meetings should be face-to-face, with teleconferencing likely to be the best substitute if such meetings are restricted by covid-19
- Buddies should be:
 - Managed by the same person or in the same role or team as the new employee
 - Matched to new employees on career goals and interests if possible
 - Someone with 1 to 2 years of experience with the organisation
 - Committed to their buddying role
 - Performing well in and knowledgeable about their work role
 - Allowed time to fulfil their buddying role
 - Approachable, confident and with good interpersonal skills
 - Able to access support from HR when needed.

Employers setting up and running buddying schemes should consider what training for buddies would be valuable. As a minimum they need to understand the aims and remit of the role and have the relevant information available to them, including on the wellbeing and mental health support on offer. If prevention and detection of stress and mental health issues is one of the aims then the role remit and training should take this into account.

Employers should look to evaluate the impact of their buddying schemes and ideally publish their experiences so that other organisations can benefit. Where possible they should also consider partnering with academic institutions to robustly assess the impact of buddying schemes on mental health outcomes.

7. Conclusion

There is currently no research evidence on the impact of buddying at onboarding on depression and anxiety among young people in the workplace. Evidence on the causes of these conditions in the workplace suggest that buddying could potentially counteract some of the risk factors, including role stress, and mitigate others such as job demands by providing social support. There is evidence that workplaces, including large multinational workplaces such as Microsoft, are using buddying at onboarding and finding it beneficial for outcomes such as new employee satisfaction and productivity.

More evidence needs to be collected to evaluate the benefits of buddying on a range of business and mental health outcomes. Buddying at onboarding is a relatively short-term intervention and is likely to be most effective when implemented as part of wider workplace-based programmes to improve mental wellbeing.

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