

Employee Mental Wellbeing

Definition

There is a lack of consistent definition of mental wellbeing among scholars; however, most agree that it is not merely the absence of mental illness. A widely-used definition of mental wellbeing is *“a state of wellbeing in which the individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully and is able to make a contribution to his or her community”* (World Health Organisation, 2014). In a work context, poor mental wellbeing has been defined as *“a less than restive state that can result in anxiety, tension, stress, depression, somatic illness, and burnout brought about by negative work experiences”* (Baba et al., 1998).

Historically, mental wellbeing was viewed through a *eudaimonic* (refers to the quality or satisfaction of life one experiences by acting in accordance with one’s values and set goals) or *hedonic* (refers to how satisfying or pleasurable one perceives their life to be without regards to the source of the pleasure) lens. However, distinguished psychologists now recognise the benefits of both eudaimonia and hedonia and have adopted views that incorporate both traditions (Bakker & Schaufeli, 2008; Henderson & Knight, 2012; Hone, Jarden, Duncan, & Schofield, 2015). The integrated perspective of eudaimonic and hedonic wellbeing traditions is known as flourishing (Keyes, 2002). Within this perspective, high mental wellbeing reflects a presence of both eudaimonia and hedonia (Huta & Ryan, 2010).

The term flourishing was first used and developed by Keyes (2002). Keyes defined mental wellbeing as possessing both positive feelings and positive functioning. As such, to receive a mentally healthy diagnosis, one must demonstrate hedonic symptoms (positive feelings toward one’s life) as well as eudaimonic symptoms (positive psychological functioning). Keyes’ theory assumes that mental health and mental illness are not equivalent, however, correlated dimensions. Individuals diagnosed as mentally healthy are deemed flourishing and those diagnosed with a lack of mental health (however, not necessarily a presence of mental illness) are deemed languishing. From this perspective, wellbeing can be depicted as a continuum with languishing at one end and flourishing at the other (see Figure 1).

Figure 1. Languishing-Flourishing Continuum



Figure 1. The languishing-flourishing continuum adapted from Keyes (2002).

Non-work-related predictors of flourishing

One's mental wellbeing is not a set state and can change throughout one's life. There are numerous predictors that can influence one's state of mental wellbeing. It is important to understand these predictors so that preventative action can be taken if needed. Below are some common non-work-related predictors of flourishing.

A common group of flourishing predictors is health behaviours such as eating, sleeping, exercising, drinking, and smoking habits. Food intake is significantly important to health and vitality because it influences one's level of energy and nutrient intake (Dalton & Logomarsino, 2014). The food an individual eats can also affect how they feel, perform, look, and sleep (Hefferon, 2013). Sleep quality and quantity are also important predictors of flourishing because sleep not only plays a major role in mental health, however, also affects one's metabolism, memory and learning, reproductive system, and helps to restore the cells in one's body (Kryger, Roth, & Dement, 2011; Lewis, 2011).

Substance abuse can also have a significant effect on one's health. There is extensive evidence highlighting the risks associated with smoking cigarettes (Freund, Belanger, D'Agostino, & Kannel, 1993; Haas, Muñoz, Humfleet, Reus, & Hall, 2004; Orth, Ritz, & Schrier, 1997). For example, there are currently more than 24 different diseases linked to smoking. These include cardiovascular disease, respiratory disease, and 10 different types of cancer (Hammond, Fong, McNeill, Borland, & Cummings, 2006). Likewise, there is also significant research highlighting the negative effects of chronic alcohol consumption. These include liver disease, anaemia, and cancer (Eichner & Hillman, 1971; Maddrey, 2000; Zima et al., 2001).

Exercise is another health behaviour and one of the most important activities individuals can undertake to promote flourishing. People who engage in exercise regularly are less likely to develop heart disease, diabetes, and cancer, and are less likely to suffer from depression (Hyde, Maher, & Elavsky, 2013). Both monitoring food intake and exercising regularly can also help individuals maintain a healthy Body Mass Index (BMI) (Hefferon, 2013). While debate regarding the usefulness of the BMI in health research exists (Ashwell & Hsieh, 2005), BMI does give an indication of one's physical health, another driver of flourishing. Individuals within the healthy BMI range are less likely to develop chronic diseases (Ogden, 2012). The presence of such diseases also reflects one's physical health. Diagnosis of a chronic disease or illness not only impacts day-to-day flourishing, however, can also have long-term effects on one's health (Boehm & Kubzansky, 2012; Goetzel & Ozminkowski, 2008).

Another common driver of flourishing is one's financial resources and behaviour. This is highlighted in recent research by Mackay, Prendergast, Jarden, and Schofield (2015) who found that higher incomes are linked to higher wellbeing. In their study, participants who felt they were living comfortably on their income were 12 times more likely to have high self-perceived wellbeing than participants who found it challenging to live comfortably on their income. Similarly, many studies have found a positive relationship between income and wellbeing, however, only to a certain degree (Ahuvia & Friedman, 1998; Diener, 2000; Schyns, 1998). Once a certain amount of money has been obtained, increased income no longer influences flourishing. In many countries, links between increased income and wellbeing have only been found among those at the lower end of the socio-economic ladder. It appears that once people earn enough money to get themselves out of poverty, then further increases in income have no further effect on wellbeing (Myers, 2000; Oishi, Diener, Lucas, & Suh, 1999; Tatzel, 2002). It can, therefore, be concluded that financial resources do influence one's level of flourishing; however, only to a certain threshold.

Work-related predictors of flourishing

There are many predictors that can influence employee mental wellbeing including those previously mentioned (e.g. exercise, nutrition, and sleep). However, this section will focus on the work-related predictors of employee mental wellbeing. These predictors can be organised into three groups (Danna & Griffin, 1999). The first group relates to the work

setting and includes factors such as health, safety, and other hazards that can impact employee wellbeing. The second group of predictors are personality traits such as Type A behavioural tendencies and locus of control. The final group of predictors are occupational stressors. This group includes factors such as one's role in the organisation, relationships at work, and home/work spillover, job demands, and job resources.

Work setting

Hazardous work environments can be a significant source of stress for employees which is no surprise considering the increasing toll of work-related injuries and fatalities. The Census of Fatal Occupational Injuries (1997) reported an estimated 6600 annual work-related fatalities dating from 1992. The most common cause of work-related fatalities is highway accidents which are largely linked to driver fatigue (Williamson, Lombardi, Folkard, Stutts, Courtney & Connor, 2011). This fatigue can arise when employees are made to work back to back shifts, are given insufficient breaks, or are given insubstantial stand down periods between shifts. Another common hazard to employees is chemicals used in their work environment. According to Emmet (1991), there are close to 65,000 chemicals used in the workplace with an estimated 700 new chemicals being introduced each year. These chemicals can result in over 35 known diseases and can have detrimental health effects for exposed employees (Baker & Landrigan, 1990).

An important determinant of an employee's health and safety is their organisation's safety culture (Dana & Griffin, 1999). A safety culture must ensure that safety responsibility is a key component of every employee's job. Senior staff must also be committed to safety management in order to ensure a sufficient safety culture (Champ, 1997). A well-established safety culture can help to maintain higher levels of wellbeing within an organisation. Some chemical plants in the U.S. have tried to maintain high levels of employee safety and wellbeing by introducing employee behaviour modification programmes (Foster, 1998). These programmes ask employees to raise awareness regarding unsafe practices they may observe in their workplace. For example, encouraging co-workers to wear safety goggles when handling hazardous materials. Over four years, the industry observed annual rates of illness and injury decline from 2.8 to 2.4 lost work days per 100 employees.

Personality

Personality traits are also linked to health and mental wellbeing outcomes. Typically, extraversion is linked to positive affect, and neuroticism is linked to negative affect. Correlations between these variables can be as large as .74 (Diener et al., 1999; Warr, 2007). Optimism is another trait associated with a higher wellbeing as optimistic individuals tend to view life events in a positive light, and view their goals as more attainable than pessimistic individuals (Brough, O'Driscoll, Kalliath, Cooper, Poelmans, 2009). Other personality traits such as openness and conscientiousness have no known links to mental wellbeing.

One of the most extensively researched traits is Type A behavioural tendencies (Ganster, Schaubroeck, Sime, & Mayes, 1991; Rosenman et al., 1964; Smith, Kaminstein, & Makadok, 1995). An individual with Type A behavioural tendency is generally characterised as competitive, impatient, job-driven and hostile (Dana & Griffin, 1999). Researchers have found that there are certain illnesses that appear more commonly in Type A personalities. Cardiovascular disease is most commonly linked to Type A personalities as a result of elevated blood pressure (Dana & Griffin, 1999). A study by Ganster (1989) found that the hostility component of the Structured Interview measure (assesses Type A behaviour) was correlated with coronary heart disease, high physical reactivity and slow recovery. Moreover, adults with Type A personalities are more likely to suffer from a chronic heart condition, psychological distress, and burnout (Nowack, 1987; Dana & Griffin, 1999).

Another personality trait that is known to affect employee mental wellbeing is locus of control. Locus of control refers to one's perception of how much control they have over what happens to them. Individuals with an internal locus of control believe that their own behaviours and actions determine their outcome. On the other hand, individuals with an external locus of control believe that outside factors such as luck and the power of others determine what happens to them (Rotter, 1986). As such, employees with an internal locus of control are less likely to suffer from work-related stress because they believe that they themselves control work-related outcomes. For example, Kirkaldy, Furnham, and Cooper (1994) found that employees with a high perceived internal locus of control report less stress and higher job satisfaction than employees with a high perceived external locus of control. Employees with high perceived external locus of control also felt more tense, over-controlled, and helpless.

Occupational stressors

Occupational stress is a major problem for organisations due to lost productivity, absenteeism and the cost of stress-related disability claims (Cooper & Cartwright, 1994; King, 1995). Moreover, occupational stress can have a significant impact on individuals with known links to coronary heart disease, mental collapse, job dissatisfaction, accidents, and family difficulties (Cooper & Cartwright, 1994). Some of the causes of occupational stress are factors central to the job. These factors are best understood using the Job Demands-Resources model (J D-R) which postulates that working conditions can be divided into two categories: job demands and job resources (Demerouti, Bakker, Nachreiner, & Schaufeli, 2001). Job demands are aspects of the job such as work overload, emotional and physical demands, and work-life balance that require effort and can result in fatigue. Job resources are aspects of the job that encourage personal growth, learning and development, and motivation. These include factors such as autonomy, performance feedback, social support, development opportunities and support from a supervisor (Bakker & Demerouti, 2007; Bakker & Schaufeli, 2008).

Demands can cause both physical and psychological difficulties for employees. For example, work overload can cause physical problems such as joint pain. On the other hand, work underload can have a psychological effect (e.g. lowered self-esteem) causing behaviours such as increased smoking and substance abuse (Glowinkowski & Cooper, 1986). Demands are also positively correlated with mental wellbeing (Moyle, 1998). Furthermore, demands such as shift work are linked to increases in accident proneness while long hours have shown links to mild (headaches) and more severe (myocardial infarction) wellbeing outcomes (Bell & Telman, 1980; Sparks, Cooper, Fried, & Shirom, 1997).

The work/home interface is another type of demand that can be a source of occupational stress for employees. It can also be referred to as “spillover stress” because work-related stress can be brought home and interfere with family life, and family-related stress can be brought to work impacting work outcomes (Glowinkowski & Cooper, 1986). Boles, Johnston, and Hair Jr (1997), found both work and non-work-related domains were associated with the formation of work attitudes. They also found role conflict was correlated with emotional exhaustion and work-family conflict was correlated with emotional exhaustion and job satisfaction. Moreover, Caudron (1997) found that overwork

was related to marital conflict and Fletcher (1988) found that occupational stress can have an effect on both psychological and physical health, as well as life expectancy and marital satisfaction. Not only must these predictors of work-related wellbeing be considered; however, the potential individual and organisational consequences of poor employee mental wellbeing need to be established to form a rationale for mental wellbeing monitoring and measurement.

Job demands are also linked to other negative work-related outcomes such as burnout and disengagement. However, the J D-R model suggests that job resources can reduce or buffer the effects of job demands on work-related outcomes (Demerouti et al., 2001). In other words, employees are less likely to experience burnout because of their job demands if they are given sufficient job resources. One such resource is supportive supervision. Managerial support is positively associated with job satisfaction (Moyle, 1998). Similarly, appreciation and feedback from supervisors influence work-related affect, flourishing and work-related wellbeing (Dickson-Swift, Fox, Marshall, Welch, & Willis, 2014; Hone, Jarden, Duncan, et al., 2015). Moreover, Moyle (1998) found that managerial support was positively associated with mental health. This suggests that targeting managerial support during interventions may help to improve employee wellbeing.

There are many other resources that can buffer the negative effects of job demands. Some of which include one's relationships at work, feeling part of the team, having control over important job aspects, being provided with sufficient tools/equipment as well as opportunities to learn and develop (Bakker & Demerouti, 2007; Bakker, Demerouti, & Euwema, 2005; Bakker, Demerouti, & Verbeke, 2004). These particular resources relate to SDT. As previously discussed, the main concern of SDT is the degree to which individuals can satisfy their three basic psychological needs: autonomy, competence, and relatedness. In a work setting, relationships and belonging reflect relatedness, having control of important job aspects reflects autonomy, and being provided with sufficient tools/equipment as well as opportunities to learn and develop reflect competence.

Workplace relationships are an important driver of wellbeing because they can have both positive and negative work-related outcomes. For example, negative relationships such as mistrust among co-workers are linked to higher role ambiguity, loss of communication between team members, lower job satisfaction and poor PWB (Cooper & Cartwright, 1994). Co-worker jealousy can also lead to aversive outcomes such as violence and harassment

(Vecchio, 1997). On the other hand, positive relationships with co-workers generate greater access to social support which is strongly linked to job satisfaction (Chiaburu & Harrison, 2008). Social support can also act as a buffer against stressful events or job demands and can increase positive affect (Terry, Nielsen, & Perchard, 1993). Additionally, a sense of belonging that one gets from feeling part of a work team is both a basic human need and component of employee engagement (Baumeister & Leary, 1995). Offering input in important decision making and having their opinions heard helps employees maintain an interest in their work. Furthermore, employees who identify their work as contributing to a meaningful purpose, are more likely to have a greater interest in their work (Harter, Schmidt, & Keyes, 2003).

Autonomy and control over important aspects of one's job are also important predictors of work-related wellbeing because they give employees the flexibility to manage their own workload and they are positively correlated with job satisfaction (de Jonge, Bosma, Peter, & Siegrist, 2000; Spector, Chen, & O'Connell, 2000). This kind of freedom helps to relieve occupational stress and burnout and has a negative association with perceived work overload (Ahuja et al., 2007). Not only does autonomy have work-related benefits, however, it also helps with work-life spillover as autonomy is correlated with reduced work-family conflict (Goldstein, 2003; Thomas & Ganster, 1995). This is due to the flexibility in the timing of work-related activities that autonomy allows. Lastly, giving employees control over important aspects of their job also has organisational benefits such as greater organisational commitment (Bailyn, 1989; Bélanger, 1999; Hill, Miller, Weiner, & Colihan, 1998).

Lastly, being provided with sufficient tools/equipment as well as opportunities to learn and develop helps employees to establish a degree of confidence and competence in their work. If employees are not given the appropriate tools or training needed to do their job well, then their performance will be significantly impacted. Competence not only affects work performance, it is also associated with task effectiveness and social integration (Kim, Cable, Kim, & Wang, 2009). Provision of development opportunities is also strongly linked to job satisfaction and employee retention (Egan, Yang, & Bartlett, 2004; Hone, Jarden, Duncan, et al., 2015; Rowden, 2002). Therefore, paying for training and provisions may be less costly for organisations long-term.

Managing employee mental wellbeing

Prevent

According to Hewitt (2018), when it comes to employee mental wellbeing management, organisations should *prevent, identify, and act*. Important prevention techniques include leading by example and encouraging a healthy work-life balance. Confidential employee helplines and mental health courses for team leaders may also be beneficial. One of the critical prevention techniques is creating a psychologically safe workspace so employees feel they can speak up should a problem arise. A study by Google (2015) also demonstrated that psychological safety is the number one predictor of high performing teams. Other studies have found that psychological safety enables moderate risk-taking, freedom to speak one's mind, fosters creativity, and accountability without fear (Dollard & Bakker, 2010; Kostopoulos & Bozionelos, 2011; Zhang, Fang, Wei, & Chen, 2010). Psychological safety brings about positive emotions such as trust, curiosity, confidence, and inspiration. These emotions enable people to broaden their psychological, social, and physical resources.

There are many ways in which teams and organisations can create a climate of psychological safety. The following six examples are suggested by Santagata (2017). First, "approach conflict as a collaborator, not an adversary". This is achieved by asking questions such as "How could we achieve a mutually desirable outcome?". Second, "speak human to human". In most negotiations, both parties aim to depart happy and respected. It is important that both parties remember, the other has beliefs, perspectives, opinions, anxieties, and vulnerabilities. Third, "anticipate reactions and plan countermoves". This enables one to prepare answers, actions, and questions to any likely reactions. Fourth, "replace blame with curiosity". This can be achieved by stating problematic behaviours using neutral language. For example, "over the past couple of weeks, there has been a noticeable drop in your team participation". From there one can explore with the employee why this might be. Uncovering possible reasons behind the drop in participation with the employee and asking the employee what they think the best solution may be, allows one to collect all the information needed and will foster trust between the employee and their mentor/supervisor/co-worker. Fifth, "ask for feedback on delivery". This allows employers to gain insight into any areas where they may be lacking and this will also foster trust in the leadership and in the organisation. Lastly, "measure psychological safety".

Measurement allows organisations to pinpoint individuals, teams, and tiers where psychological safety may be lacking and thus where these guidelines can be applied.

Identify

Measuring mental wellbeing enables organisations and teams to determine whether they have any significant issues or drawbacks. More importantly, measurement can help organisations and teams identify which individuals may be struggling so support resources are better deployed. Common and valid scales used to measure mental wellbeing are the 'DASS 21' (Depression, Anxiety, Stress Scale) and The Flourishing Scale (Diener et al. (2010).

DASS 21

The Depression Anxiety Stress Scale (DASS) was developed by Lovibond and Lovibond (1995) and was originally designed as a 42-item scale consisting of three self-report measures (depression, anxiety and stress measures). The depression measure examines dysphoria, hopelessness, devaluation of life, self-deprecation, lack of involvement, anhedonia, and inertia. The anxiety measure examines autonomic arousal, skeletal muscle effects, situational anxiety, and subjective experience of anxious affect. The stress measure examines difficulty relaxing, nervous arousal, irritability, impatience and agitation. The DASS also has a 21-item version (DASS 21) which contains seven items per measure and is useful in employment settings.

The depression measure contains statements such as "I felt down-hearted and blue". The anxiety measure contains statements such as "I experienced breathing difficulty (e.g., excessively rapid breathing, breathlessness in the absence of physical exertion)". The stress measure contains statements such as "I tended to over-react to situations". Respondents rate the degree to which they have experienced the symptoms throughout the past week using a 4-point Likert scale. Responses range from zero indicating "Did not apply to me" to three indicating "Applied to me very much". Overall scores for each measure range from zero indicating selection of "Did not apply to me" for all statements, to 21 indicating selection of "Applied to me very much" for all seven items. Overall scores for the scale (all three measures) range from zero to 63.

High scores for the depression measure reflect individuals with characteristics such as blue, low-spirited, self-disparaging and pessimistic. These individuals also feel that their life has little or no meaning, are uninvolved and find it difficult to experience joy and satisfaction. High scores for the anxiety measure reflect individuals who are worried, nervous, and shaky. They also have difficulty breathing, experience dryness of the mouth, frequent heart pounding, and sweaty palms. High scores for the stress measure reflect individuals who are often tense, easily upset, and find it difficult to relax. The individuals are also easily startled and do not welcome interruption or delay. Low scores for the overall scale reflect individuals who cope well with the pressures of work and life. On the other hand, high scores for the overall scale reflect individuals who struggle to cope with life pressures and who may benefit from seeking professional advice.

The psychometric properties of the DASS 21 have been tested by Henry and Crawford (2005). Their findings suggest that the DASS 21 demonstrates both reliability and validity. The three sub-measures all demonstrated internal consistency with alpha scores of 0.82 (depression), 0.90 (anxiety), and 0.93 (stress). Alpha level for the overall scale was 0.88. The DASS 21 also demonstrated both convergent and discriminant validity when compared to other validated measures of depression and anxiety such as the Hospital Anxiety and Depression Scale (Zigmond & Snaith, 1983), and the Personal Disturbance Scale (Bedford & Foulds, 1978). Factor analysis was also performed confirming the expected 3-factor structure of the scale.

The Flourishing Scale

The Flourishing Scale was developed by Diener et al. (2010) in order to assess social-psychological prosperity and provide information which could assist or complement other commonly used SWB scales. The measure was originally designed as a 12-item scale and deemed the Psychological Wellbeing Scale; however, has now been reduced to the eight-item Flourishing Scale. The scale measures respondents' subjective success in domains such as relationships, self-esteem, purpose and optimism. Diener et al. (2010) assessed the scales using a sample of 689 college students from six different locations.

Items of the Flourishing Scale are positively phrased. For example, "I lead a purposeful and meaningful life" and "My social relationships are supportive and rewarding". Respondents answer all eight items using a 7-point Likert scale which ranges from "Strongly Disagree" to "Strongly Agree". Selecting "Strongly Disagree" reflects a score of one for the item and

selecting “Strongly Agree” reflects a score of seven for the item. As such, the minimum overall score is eight (“Strongly Disagree” selected for all items) and the maximum overall score is 56 (“Strongly Agree” selected for all items). High scores represent respondents who perceive high success in important domains of human functioning. Low scores represent respondents who perceive low success or improvement needed in important domains of human functioning.

The Flourishing Scale demonstrates excellent psychometric properties exhibiting both reliability and validity. Diener et al. (2010) found an alpha level of 0.87 reflecting the high internal consistency and a temporal stability level of 0.71 reflecting the scales consistency across time. The scale also showed high convergence with other similar scales such as the Satisfaction with Life Scale (Diener et al., 1985), UCLA Loneliness Scale (Russell, 1996), and the Life Orientation Test (Scheier, Carver, & Bridges, 1994). Psychometric properties of the Flourishing Scale were also tested by Hone et al. (2014) who used data from New Zealand’s Sovereign Wellbeing Index (Jarden et al., 2013). Findings from their study were consistent with that of Diener et al. (2010). Alpha levels for internal consistency were high with an ICC of 0.91. The Flourishing Scale also demonstrated strong positive correlations with single-item happiness and life satisfaction questions and strong negative correlations with the Centre for Epidemiological Studies Depression Scale (Radloff, 1977) reflecting both convergent and discriminant validity. Factor analysis confirmed the 1-factor structure of the Flourishing Scale.

Act

Using scales such as the DASS 21 and The Flourishing Scale will allow organisations to identify any individuals that may need help and thus will enable organisations to allocate their resources effectively. Research has shown that employees suffering from mental wellbeing issues may benefit from a flexible work environment (Hewitt, 2018). This can include reducing one’s hours, allowing employees to work from home when needed, and extending deadlines. Open communication has also shown to be beneficial because it allows employees to express what they need rather than organisations telling them what they need. One of the most beneficial methods to approach employee wellbeing is utilising employee mental wellbeing programmes. For every \$1 spent on employee mental wellbeing programmes, organisations can expect an average return of \$4.20 (Farmer &

Stevenson, 2017). Above all, when trying to manage employee wellbeing, organisations should seek advice from medical professionals, rather than relying on intuition. Mental wellbeing can be a sensitive and unpredictable issue so it is always best to seek the advice of professionals in the field

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