

Mental Health intervention among Executives in an industry for Work Life Transformation

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Abstract

Mental Health is a vital element in the labor market but much ignored concept too. In the recent past, Mental Health has gained its significance as it is one of the imperative components for better production and performance. Though work is a protective factor, it becomes a risk factor when the issues at work place are not addressed properly affecting mental wellbeing of the Executives. The researcher had conducted Focused Group Discussions among 52 Executives in a particular industry at Madurai to identify the socio economic stressors that affects their work as well as life. Warwick Edinburgh's (2007) Mental Wellbeing questionnaire was administered to identify the level of Mental wellbeing. Census method was adopted. A Mixed methodology, Concurrent Embedded Research Design was used. It was found that majority of the respondents had low level of mental wellbeing. The organization arranged for a series of online training programmes for the executives during pandemic. Mental Health interventions were given and over a period of time, there was an improved level of mental wellbeing resulting in work life transformation. Though there could be many claims for the work life transformation, the researcher suggests Mental Health intervention as an imperative factor had its significance for work life transformation. The study highlights the need for Mental Health intervention among Executives in Industry for work life transformation.

Keywords: Mental Health intervention, Executives, Work life transformation

1. Introduction:

Mental Well being is the state of well being in which the individual realizes his or her own abilities, can cope with normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his community (WHO). Mental well being includes cognitive, emotional and behavioral responses at a personal level. It is feeling good and functioning well. Well being includes subjective or hedonic or affective well being (feeling good) as well as psychological well being (functioning well). It is increasingly being recognized that the mental health of employees is a crucial determinant in their overall health and that poor mental health and stressors at the workplace can be a contributory factor to a range of physical illnesses like hypertension, diabetes and cardiovascular conditions, amongst others. Data from different countries around the world indicate that mental health problems are a

cause of a number of employees dropping out of work. Statistics shows that suicidal rates are high during pandemic due to varied reasons. Studies do show that Mental Wellbeing and job productivity are interlinked and have reciprocal relationship. In this paper, the researcher had discussed about the level of mental Well being, kind of Mental Health interventions given and the improvement thereafter among Executives in an industry with special reference to a particular reputed industry at Madurai. The results and the findings are discussed in length in this scientific research paper.

2. Review of Literature:

Lin, Yu & Yi (2014) conducted a quantitative study to understand the impact of positive affects, person-job fit and well-being on job performance. This study produced results which showed that well-being was influential in job performance. The results

showed that employees with a greater sense of well-being had an increased quality of work.

Shier & Graham (2011) completed a qualitative study of mindfulness practices among social workers who reported the highest levels of well-being. The study found that a use of mindfulness practices positively influenced the social worker's well-being. Mindfulness in particular regarding self-identify and work/life balance were especially influential.

Arrington (2008) reported that results from a study of stress and coping among social workers indicated that social workers employ a number of coping strategies to deal with the demands of their profession. Among these strategies, exercise was the most frequently reported. Meditation and therapy followed exercise. These are rather hopeful results as the most commonly used coping skills were reported as being effective and are also very healthy ways of managing stress.

Wright & Cropanzano (2000) conducted a study to better understand the relationship between psychological well-being and job performance. Their sample included human service workers and juvenile probation

officers. Their results indicated that psychological well-being is connected to job performance ratings. Their findings lend support to the basic proposition that "happy workers often have higher performance"

3. Research Methodology:

3.1. Objectives:

- i. To understand the socio demographic profile of the respondents
- ii. To know the level of mental Wellbeing pre and post mental health intervention
- iii. To give suitable mental health interventions for the respondents
- iv. To suggest suitable methods for improved level of mental wellbeing of Executives.

3.2. Hypothesis:

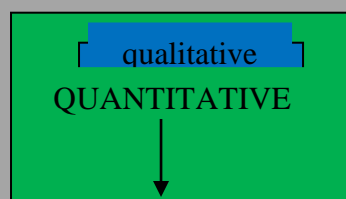
There is a significant difference in the level of Mental Wellbeing before and after Mental Health intervention.

3.3 Pilot Study:

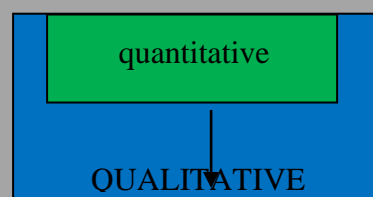
The researcher got to know the feasibility of the study by doing a study with few executives before the data collection

3.4. Research Design:

A mixed methodology, Concurrent Embedded Research design was used for the study.



Mental Health Intervention
Pre- Intervention
Analysis of Findings



Post – Intervention
Analysis of findings

Figure 1: Concurrent Embedded Research Design, Creswell (2012)

3.5. Data Collection:

Census method was adopted and the data were collected online through google forms and breakout rooms among 52 Executives.

Phase 1: The Google forms were sent and the level of mental Wellbeing was studied. As they completed it, Focused Group Discussion was conducted by adopting Conative approach

given by Mary Goodyear (2013) to understand the reason for less productivity in Job.

Phase 2: Based on the findings of quantitative and qualitative data, which showed varied socio economic stressors in life and low of mental wellbeing, series of online Mental Health interventions were given

Phase 3: After the final Session of Mental Health Intervention, Post study was done and

found the improved level of Mental Wellbeing and success stories of the Executives.

3.6. Tool for data Collection:

3.6.1 For Quantitative data:

The researcher used Warwick-Edinburgh Mental Wellbeing Scale (2007) which is a 14 item scale with 5 response categories, summed to provide a single score ranging from 14-70. The items are all worded positively and cover both feeling and functioning aspects of mental wellbeing. The reliability score is 0.83.

3.6.2 For Qualitative data:

Focused Group Discussions were used to understand and highlight the factors that affect their mental well being. Focused Group Discussion was conducted by adopting Conative approach given by Mary Goodyear (2013) comprising the model introduction, group discussion using Focused Group Script and Closing summary. The methodology adopted for the study was based on (Krueger and Casey, 2000). The content validity of the questions were based on the opinions of the experts in the field

3.7. Pre Test:

The researcher administered the tool among few respondents and included only the socio demographic data along with the Warwick Edinburg scale. Since, there was no need to change any variable in the tool, the researcher used the same for data collection.

4. Findings:

4.1 Related to socio demographic variables

- Nearly half of the respondents (46%) were belonging to the age group of 37 to 46 years
- More than half of the respondents (65%) were Post graduates
- Majority (71%) of the respondents were receiving monthly salary upto Rs.30000/- only
- 39% of the respondents had experience between 5 to 10 years, 25% of the respondents had working experience more than 15 years in that industry and 21% had less than 5 years of working experience.
- Majority (81%) of the respondents were married. 15 % were single and 4% were in divorced state of marriage.
- Majority (83%) of them were in nuclear family and only 17% of them were in joint family

- More than half (52%) of the respondents had 2 children, 29% of them had only one child and the remaining 19% are yet to get married or yet to get a child.

4.2 Findings related to Socio – Economic factors affecting their Mental Wellbeing:

- Focused Group Discussion (FGD) results show that Family Stress, Emotional Maltreatment, Economic instability in the family, loss of loved ones, feeling depressed, finding no purpose or meaning for life, sadness, tearfulness and loss of interest in usual enjoyable activities, feeling stressed or overwhelmed, racing thoughts, restlessness or agitation, difficulty concentrating or sleeping, feeling disconnected from others, restriction to go to public places and trouble relaxing.

4.3 Findings related to level of Mental Wellbeing (Before intervention):

- Majority (60%) of the respondents had low level of mental wellbeing. 12% had moderate level of mental wellbeing and 21% of the respondents had high level of mental wellbeing and only 7% of the respondents had very high level of mental wellbeing.

4.4 Findings related to level of Mental Wellbeing (After intervention):

- Majority (81%) of the respondents had high level of mental wellbeing and the remaining 19% of the respondents had very high level of mental wellbeing.

4.5 Findings related to tests of statistical significance:

- There is a statistical difference in the level of mental wellbeing before and after the mental Health Intervention. 't' test was applied and found that the difference is statistically Significant. ('t' value = -13.23, p value = 0.000, p < 0.05, **Significant**)
- There is no statistical difference in the level of mental wellbeing between the nuclear family and the joint family ('t' value = 0.620, p > 0.05, Not significant)
- There exists a strong relationship among the age groups and the level of mental wellbeing. It is statistically highly significant ('r' value = 0.877, p < 0.01 level, strongly correlated, highly significant)

- There is no relationship between the years of experience and the level of mental wellbeing (r value = 0.115, $p > 0.05$ level, Not significant)
- There is no association between level of education and the level of mental wellbeing (χ^2 value = 0.057, $p > 0.05$, Not significant)

4.6 Findings related to Hypothesis:

't' test was applied and found that there is a statistical difference in the level of mental wellbeing before and after Mental Health Intervention among Executives. Hypothesis is accepted. ('t' value = -13.23, p value = 0.000, $p < 0.05$, **Significant**)

5. Mental Health Intervention:

The following Mental health intervention was given in three phases:

- 5.1. Developing coping strategies among the respondents by suggesting to accept reality in the new normal situation and to cope with it by staying positive, focused, accepting new normalcy, involve in singing / listening to music to empower them, make small progress, hold on to a hope, journaling and to focus on internal locus of control
- 5.2. Mindfulness meditation exercise and Breathing exercises training
- 5.3. Disputing irrational beliefs by using Rational Emotive Behavior Therapy of Albert Ellis.
- 5.4. Exercise on growing the tree of sustenance as developed by NIMHANS to use during disaster management programme
- 5.5. Developing Resilience by identifying the protective and risk factors
- 5.6. To grow in spiritual strength
- 5.7. Motivated to have a purpose driven life.
- 5.8. Offering Free Mental health Helpline services to 93754 93754.

6. Salient Findings:

- 6.1. Before intervention, majority (60%) of the respondents had low level of mental wellbeing. 12% had moderate level of mental wellbeing
- 6.2. Many socio economic stressors were identified through focused Group Discussion
- 6.3. There exists a strong relationship among the age of the respondents and the level of mental wellbeing. It is statistically highly significant (r value = 0.877, $p < 0.01$ level, strongly correlated, highly significant)

6.4. After intervention, majority (81%) of the respondents had high level of mental wellbeing and only 19% of the respondents had very high level of mental wellbeing.

6.5 **There is a statistical difference between the level of mental wellbeing before and after the mental health intervention.** ('t' value = -13.23, $p = 0.000$, $p < 0.005$, **Highly Significant**).

7. Suggestion

- Mental Health Intervention is the need of the hour in every industrial setting / workplace.
- Govt. should ensure Mental Health of all the employees through a Counseling and Psychotherapy unit in each workplace as they have enforced ESI or other labor welfare measures.
- To do periodical mental Health assessment and to do necessary mental health intervention based on the need.

8. Conclusion

The research study can be concluded highlighting the need for mental health intervention in the new normal situation for all the employees in the industry for a better work life transformation. Mental Health definition of WHO states that a person can be contributive and work productively in a mentally healthy state. Hence, for bringing transformation in the work life, mental health intervention matters.

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