

NAVIGATING UNCHARTED TERRITORY: A MIXED METHODS STUDY ON WORKPLACE WELLBEING WHILE WORKING FROM HOME IN INDIA DURING THE COVID-19 PANDEMIC

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A DISSERTATION

Presented to the Department of General Psychology program at Selinus University

Faculty of Psychology in fulfillment of the requirements for the degree of Doctor of Philosophy in General Psychology

2022

DECLARATION

I do hereby attest that I am the sole author of this thesis and that its contents are only the results of the reading and research I have done.

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ACKNOWLEDGEMENT

The pandemic has been difficult for all of us. It obviously shook the whole world at the core, but it also brought to surface several issues that we were perpetually sweeping under the rug. In a country like India where mental health is heavily stigmatized, organizations rose to the occasion of making mental health a part of their conference-room discussions as productivity fell, and despite the scarcity of job opportunities owing to hiring freezes, employees still chose to leave, prioritizing their mental health needs over economic incentives and stability. In a strange sense, I am grateful to the pandemic for sparking my curiosity to explore this issue deeper, and for the remote working situation that helped me actually sit down and work on this dissertation with care.

I am grateful to Selinus University for offering programs that enable international students like me to pursue our passion from the comforts of our home, and for ensuring we still have access to quality resources. I am thankful to the entire staff at Selinus University for answering all my queries patiently, and for ensuring I was on-track with my dissertation.

I would like to express my thanks to Prof. Salvatore Fava for taking time out to review my work and offering his valuable inputs.

This dissertation would not have been possible without the help of my family and friends who helped me spread the word for data-collection. I am especially grateful to all the participants who took time out to fill the questionnaires and give interviews.

Thank you, everyone!

ABSTRACT

The purpose of this study is to assess the effects of work from home on the wellbeing of Indian employees during the COVID-19 pandemic. The primary objectives of this research were to assess the effects of work-from-home on employee wellbeing during COVID-19, and the influences of workplace well-being or mental health programmes with respect to perceived support (organizational and supervisor support) of employees in organizations.

Methods: A sequential explanatory mixed methods approach was conducted, to test the hypotheses of the study. Quantitative data (N = 110) was gathered through an online questionnaire divided into two sections; data from the second half was analysed using t-test and then those findings were used to guide the analysis of open-ended interview responses. Four semi-structured interviews of working-professionals working from home during the COVID-19 pandemic (n = 2 males, 2 females) were analysed using grounded theory to explore nuances through the qualitative method.

Results & Discussion: Quantitative findings suggested that the majority of the employees were satisfied with working from home during the COVID-19 pandemic, and not much rise in professional conflicts with supervisors or colleagues were seen. Employees had a mixed experience of doing work more efficiently and their connectedness with the supervisor did not enhance that much for most of them. Most of them were not experiencing a better work-life balance, and relationships with colleagues took a toll. For the majority of them, work-related stress did not decrease and there was not much effect of remote work in preventing burnout. For most employees, the concentration at work did not improve as well. The findings indicated that presence of mental health programmes at the workplace does make a difference in enhancing the overall perceived organisational support by employees; also men and women perceive organisational support differently.

Conclusion: The study shed light on how the colossal shift to work-from-home following the outbreak of the COVID-19 pandemic has affected the wellbeing of employees in India. There is a need to implement wellbeing or mental health programmes at the workplace to positively affect employees' perceived support at an organizational and supervisory capacity.

Keywords: Workplace well-being, COVID-19, work from home, perceived organizational support, mental health programme

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CHAPTER 1: INTRODUCTION

Covid-19 or Corona viruses are a large family of viruses that cause illness ranging from the common cold to more severe diseases such as Middle East Respiratory Syndrome (MERSCoV) and severe acute respiratory syndrome (SARS-CoV). A novel corona virus (nCoV) was a new strain that had not been previously identified in humans until 2020.

The year 2020 will go down in history as being marked by the tumultuous pandemic that ravaged lives, destroyed livelihoods, shook economies, and disrupted virtually everything as we knew it. On 11 March 2020, the infectious coronavirus (COVID-19) was declared a pandemic by the World Health Organization (WHO, 2020). Following this, a nationwide lockdown in India was announced on 24 March that led to a drastic shift, from commuting to the workplace to working from home (hereafter referred to as "WFH"), to curb the spread of the virus (Hebbar, 2020). The four walls of employees' houses and online meeting-rooms became the new workplaces for jobs that permitted remote-working. Organizational culture and environment underwent significant changes as corporations were not equipped for the obligatory transformation to remote working and employees were forced to adapt WFH practices effectively, overnight, with little or no prior experience (Wang et. al., 2020).

Over eighteen months in the trenches of the pandemic, and in the fears of the anticipated third wave, more service employees are telecommuting than ever before, prompting a worldwide investigation of virtual working (Kniffin et. al., 2021). While social distancing remains paramount and adjustments to the new dynamic continue, there persists a strain on the service industry and its operations (Finsterwalder and Kuppelwieser, 2020). The widespread pandemic-induced challenges of companies include struggles to stay afloat and maintain optimal work production, leading to dire consequences for employees and their wellbeing (Bloom et. al., 2015). Life is deeply affected by COVID-19 even for the ones who are not

infected as isolation, contact restrictions and economic shutdown have changed the social and economic scenario of India (Sharma et. al., 2021).

In June 2020, India became the third-worst affected country worldwide (Goel et. al., 2020). Initially, imposing a strict lockdown led to India having fewer cases and lower case fatality rates in comparison with numbers in many developed countries; however, economic constraints led to a staggered lockdown exit strategy which resulted in a spike of COVID-19 cases. Low spending on health as a percentage of gross domestic product (GDP) meant there was a shortage of hospital beds and ventilators and a lack of medical personnel, especially in the public health sector. The pandemic not only adversely affected the physical health of individuals, but it also brought forth significant changes in their lifestyle (Rawat et. al., 2021). A review of studies conducted on the Indian population (Rawat et. al., 2021) found the prevalence of stress among participants; weight gain and decline in physical activity were also observed. The study also found that the quality as well as the quantity of sleep was impacted due to COVID-19.

1.1 Defining Wellbeing

In general, wellbeing is viewed as a life that is well-lived. It is a broader concept which includes an individual's overall life, both, on and off the job (Diener, 1984). It is easily influenced by environmental events. Wellbeing refers to an individual's mental, physical, social, environmental status interacting with each other, and each having different levels of importance and impact according to each individual (Kiefer, 2008, Ebersole & Hess, 1994).

Largely, wellbeing has been defined according to two main, but distinct, perspectives. The hedonic perspective defines wellbeing as happiness (Ryan and Deci, 2001) and emphasizes the importance of three components: life-satisfaction, presence of positive mood, and the absence of negative mood (Diener et. al., 1998). The second perspective is eudemonic wellbeing which describes wellbeing in terms of self-actualization and proposes that true joy is found in

expressing virtue (Dewe & Cooper, 2012). According to the eudemonic perspective, engaging in activities that foster human growth – such as autonomy, personal growth, self-acceptance, life-purpose, mastery, and positive relatedness – are essential to wellbeing (Ryff & Keyes, 1995). Today, we recognize wellbeing as a multidimensional concept that comprises, both, hedonic and eudemonic aspects (Fisher, 2014).

Workplace wellbeing well-being relates to all aspects of working life, from the quality and safety of the physical environment, to how workers feel about their work, their working environment, the climate at work and work organization (ILO, 2009). Workplace wellbeing is defined as a subjective perception of general satisfaction with and positive feelings toward work (Keeman et. al., 2017).

Employee wellbeing, according to the Chartered Institute of Personnel and Development (CIPD, 2016) has been defined as "creating an environment to promote a state of contentment which allows an employee to flourish and achieve their full potential for the benefit of themselves and their organization." The CIPD (2016) believes "that employee well-being at work initiatives need to balance the needs of the employee with those of the organization." "Employee well-being is more than traditional occupational health and safety. It includes consideration of physical and psychological fitness that promotes individual, creativity, productivity, and commitment" (Campbell, 2002). From the viewpoint of well-being, a healthy workforce is indicative of the presence of positive feelings in an employee that should eventually result in happier and more productive employees (Harter, Schmidt, & Keyes, 2002). Today, a large number of jobs are driven by the knowledge economy, and employees are required to develop advanced skill sets that set them apart from others. Companies invest in employees to hone their expertise, and this makes it difficult for them to replace their trained employees (Hellgren et al., 2008). It is, therefore, in the organization's best interests to retain employees as a means of achieving organizational success (Keeman et. al., 2017). Feeling good

and functioning well at work positively influence a person's overall wellbeing; and various studies have shown that employees who experience a high level of wellbeing display a range of positive organizational attitudes like superior work-performance (Lyubomirsky et. al., 2005), low turnover intentions, low actual turnover (Boehm & Lyubomirsky, 2008), more thought and effort put into work, lower rates of absenteeism, and fewer work-related injuries (Keyes & Grzywacz, 2005). Unfortunately, organizations continue to focus their attention to reducing employee stress instead of increasing employee wellbeing (Hone et. al., 2015) despite the various positive organizational attitudes associated with employee wellbeing. Stress has been linked to decreased productivity and, therefore, reduced profits (Ford et. al., 2011), and workplace wellbeing interventions have focused on individual stress management which, unfortunately, are ineffective in the long run (LaMontagne et. al., 2007; Vanhove et. al., 2016). Stress and wellbeing are related, but different, concepts. Just like mental health cannot be equated to the absence of mental illness (Keyes, 2005), wellbeing cannot be equated by absence of stress. Seligman (2011) introduced the PERMA model of flourishing, in which he defined psychological wellbeing in relation to five domains: positive emotions (P), engagement (E), relationships (R), meaning (M), and accomplishment (A). Positive emotions refer to hedonic feelings of happiness (feeling content, joyful, and cheerful). Engagement refers to psychological connection to activities or organizations (feeling interested and absorbed in life). Positive relationships include feeling cared for, socially integrated, and supported by others, and satisfied with one's social connections. Meaning refers to having the belief that one's life is valuable and feeling connected to something greater than oneself. Finally, accomplishment refers to making progress towards goals, feeling capable of completing daily activities, and experiencing, overall, a sense of achievement. Thriving in life acts as a buffer against the negative effects of stress (Keyes & Grzwacz, 2005), and therefore, studies suggest that organizations ought to invest in the promotion of wellbeing of their employees to not just cause reduction of employee stress-levels, but also to provide them with the additional benefits associated with thriving at the workplace (Hone et. al., 2015).

An average Indian employee works for 48 hours per week (ILO, 2021), and work is an important part of their life for a variety of reasons, such as being a source of identity (Musroor, 2019), satisfying community and socialization needs (Dijkema & Gunderson, 2019), or for financial incentives. One's health is influenced by the hours one spends at work, the atmosphere of the workplace, and the nature of tasks executed (Nilsen et. al., 2016). Workplace wellbeing stems from work-productivity and "feeling good" at the workplace (Keeman et. al., 2017). Furthermore, employees with overall good health are more likely to perform optimally than their counterparts (Institute for Health and Productivity Studies, 2015). However, with the advent of COVID-19, the very definition of the workplace has changed thereby changing the nature of custom work and everything that is associated with it.

1.2 Factors Affecting Employee Wellbeing

1.2.1 Leadership

Employee wellbeing and engagement increases when they receive positive feedback and praise from their immediate managers and see themselves getting the leader's attention in terms of one-on-one conversations (Jha, 2013). Visionary and future-oriented leadership wherein the leaders involve their team-members in the decision-making process also improve employee engagement (Bhatnagar, 2008). Similarly, the quality of leader-member exchanges between supervisors and employees also impacts the levels of wellbeing of the employees in an organization (Agarwal et. al., 2012).

1.2.2 Work Environment and WFH

Many employees worldwide have been compelled to switch to work-from-home setups due to the ongoing COVID-19 pandemic. This has led to drastic changes in their work environments-causing far-reaching implications on their mental and physical wellbeing. Several studies have documented a significantly positive relationship between the work environment at home and employees' perceived psychological wellbeing and work-life balance (Mostafa, 2021; Filardi et. al., 2020). Conversely, some studies have reported increased stress among employees due to work overload, work-family conflict, and lack of resources in workfrom-home environments (Eddlestone & Mulki, 2015; Suh & Lee, 2017).

1.2.3 Perceived Organizational Support (POS) and Perceived Supervisor Support (PSS)

POS is defined as an employee's perception of their organization valuing their work contributions and caring about their wellbeing (Eisenberger, et. al. 2016; Krishnan & Mary, 2012; Rhoades and Eisenberger, 2002). This includes beliefs about whether the organization meets employees' socio-emotional needs, and how organizational responses to increased efforts at work (Eisenberger, et.al., 1986; Krishnan & Mary, 2012; Settoon et al., 1996). Some factors affecting POS are organizational rewards and job conditions, and perceived fairness (Baran, Shanock, & Miller, 2012). PSS refers to the extent to which employees form general opinions and beliefs about their supervisors valuing their contributions, offering assistance, and caring about their well-being (Cole, Bruch, & Vogel, 2006, Eisenberger et al., 2002, Kottke & Sharafinski, 1988).

While POS & PSS may appear to be the same, their difference lies in the source of the support - organization and supervisor. PSS is grounded in supervisor-employee interactions which can be positive or negative and ultimately increase or reduce PSS respectively (Cole, Bruch, & Vogel, 2006). Prior findings have suggested that higher levels of POS and PSS are associated with increased feelings of employee well-being (Chen, Powell, & Greenhaus, 2009; Kreiner, 2006; Lapalme et al., 2009; Ng & Sorenson, 2008; Pan & Yeh, 2012).

Employees' relationship with the organization can be influenced by the organizational decisions on providing support to employees during the COVID-19 pandemic (Mihalache & Mihalache, 2021). Actions perceived as supportive strengthen the organizational commitment of employees because they feel obligated to reciprocate (Eisenberger et. al., 2001; Rhoades et al., 2001). Strong organizational support also has the potential to create a shared sense of identity as the employee and the organization work together to try and defeat a common enemy: the COVID-19 pandemic (Caligiuri et al., 2020).

1.3 Impact of WFH During The COVID-19 Pandemic

Technological advancements have transformed traditional working habits, allowing many employees to work from just about anywhere (Henke et al., 2016). Prior to the pandemic, WFH has been advocated for the myriad of benefits it offered such as flexibility of time and location (Oakman et al., 2020), more intrinsic motivation (Rupietta and Beckmann, 2016) and a better work-life balance (Annie Rachel, N., & Rimo, Shibe., 2020). However, WFH can have a detrimental effect on employees' mental health and overall well-being owing to long working hours, and an absence of clear distinction between the personal and the professional (Allen et al., 2015).

With the rise of new mutations in an already fragile healthcare system, COVID-19 plummeted India into humanitarian and economic crises. The gross domestic product (GDP) growth for the financial year 2020-2021 was declared to be -7.7% by the Central Statistical Organization (CSO). India is still recovering from the effects of the lockdown that led to an all-time high unemployment rate of 24% in April 2020, which has since lowered to 6.5% as of March 2021. However, its lingering effects continue as women and youth bear the brunt of the trickling unemployment, with an estimated 4 million Indians below age 30 having lost their jobs (ILO, 2020). The lockdown led to women being seven times more vulnerable to job loss and eleven times more likely to not return to work thereafter (Rosa, Basole and Kesar, 2021). 52% of Indian employees were either dissatisfied or neutral with their company's efforts to adapt to the new normal, with 72% having job security concerns at varying degrees (Randstad India, 2020). 36% of India Inc employees also reported worsening of their mental health, with 50% experiencing stress due to future-related uncertainty (Hamsazwadhwani, 2020). Eighteen months later as India begins to show a semblance of normalcy, a critical thought to be explored is whether similar recent trends will translate into previously seen outcomes or if organizations will explore facets of employee engagement and create better workspaces to enable higher employee well-being.

The large body of evidence prior to the pandemic clearly illustrates the risk of remote working (Grant et al., 2013; Konradt et al., 2003). However, these may lack contextual relevance as they do not consider the unique challenges that COVID-19 poses. Keeping in mind that contributing factors and subsequent effects may differ because of the pandemic, this study aims to fill a gap in the Indian context and provides practical implications for organizations.

1.4 Rationale For The Study

The purpose of this study is to assess the effects of WFH on the wellbeing of Indian employees during the COVID-19 pandemic. Employee wellbeing and the perceived impact of remote working are explored through an array of life and career aspects such as (1) employee satisfaction, (2) professional conflicts, (3) higher task efficiency, (4) commitment to employer, (5) work-life balance, (6) relationship with colleagues, (7) stress management, (8) burnout prevention, (9) work concentration, (10) perceived organizational support, and (110 perceived supervisor support.

Employee well-being is directly related to employees' thoughts and feelings regarding their job and organisation hence it is very crucial then to find out the impact of the new scenario of the pandemic and new work settings on employees. There exists a strong gap in the existing literature pertaining to employee well-being in India, particularly in the context of the COVID-19 pandemic, and this study attempts to bridge the same.

1.4.1 Working Definitions

Employee Satisfaction: Employee satisfaction may be defined as a positive emotional state that derives from how the employees perceive their work, work environment, work experience, and all other elements related to their work and workplace (Tomaževič et al., 2014). Professional conflicts: Professional conflict may be defined as a process arising when an employee discerns differences or friction between themselves and another employee or group about work-related issues or values that matter to them (Sonnentag et al., 2013; Gelfand et al., 2012).

Higher task efficiency: The ability to reach organizational goals or complete tasks by utilizing minimal resources may be described as higher task efficiency (Tabassi et al., 2012). Commitment to the employer: Commitment to the employer, or organizational commitment may be defined as a force that binds employees to an organization and thereby decreases the probability of turnover (Meyer et al., 2004).

Work-life Balance: Work-life balance may be succinctly defined as the degree to which an individual takes part in and is satisfied with their work role as well as the family role (Brough et al., 2020).

Relationship with colleagues: An individual's relationship with their colleagues is a unique, multifaceted interpersonal relationship that can have important implications for the individuals themselves, as well as the organization they are working for (Khairuddin et al., 2021). Stress management: Stress management refers to the wide range of tools and techniques that may help an employee to control or reduce their stress levels (Richardson & Rothstein, 2008). Burnout Prevention: Burnout prevention may be defined as the strategies or techniques that can be used by organizations and employees to reduce the psychological syndrome of reduced personal accomplishment, feelings of depersonalization, and emotional exhaustion (Honavar, 2018).

Work concentration: Work concentration may be defined as the degree of attentiveness demonstrated by employees in the workplace (Rahaman et al., 2020).

CHAPTER 2: METHODOLOGY

2.1 Aim

The aim of this study is to assess the effects of WFH on the wellbeing of Indian employees during the COVID-19 pandemic.

2.2 Objectives

The primary objectives of this research are to:

- 1. Analyse the effects of WFH on employee wellbeing during the COVID-19 pandemic.
- Evaluate the influences of workplace wellbeing or mental health programmes with respect to perceived support (organizational and supervisor support) of employees in organizations.

The blurring of the personal and professional has posed challenges for many employees in the country (Allen et. al., 2015; Oakman et. al., 2020). Remote working has led to higher rates of burnout and negative impacts on wellbeing (Forbes India, 2020). Exploring the aforementioned questions will enable organizations to understand how to develop workplaces that will cater to raising overall employee wellbeing, and the methods to do so. This will give a practical insight to the policymakers and employers to prioritize these techno-stress-creators and take appropriate measures in order to reduce them.

2.3 Hypotheses

H1: To assess the extent of the effect of WFH on employee wellbeing during the COVID-19 pandemic.

 H_02 : There is no significant difference between the perceived support of employees in organizations with and without wellbeing or mental health programmes.

 H_A2 : There is a significant difference between the perceived support of employees in organizations with and without wellbeing or mental health programmes.

2.4 Research Methodology

Research refers to the "systematic method in which a problem is enunciated, formulation of hypothesis, collection of the facts or data is done, further facts are analysed and finally, the researchers reach to the conclusions either in the form of solution towards a certain problem or some theoretical formulation," (Kothari, 2004). The present study used sequential explanatory mixed methods approach (Creswell & Plano-Clark, 2018). Therefore, the author first analysed the quantitative data, and then used those findings to guide their analysis of open-ended interview responses.

2.4.1 Quantitative Method

For the present study, the quantitative analysis was based on the interpretation derived from the specially framed questionnaire. Standard quantitative research procedure was followed.

2.4.1.1 Variables

Independent Variables:

In the present study, the following are independent variables:

- (a) COVID-19 pandemic
- (b) Work from Home (WFH)
- (c) Wellbeing or Mental Health Programmes

Dependent Variables:

In the present study, the dependent variables are as follows:

- (a) Employee wellbeing
- (b) Perceived Support
 - (i) Perceived Organizational Support
 - (ii) Perceived Supervisor Support

2.4.1.2 Sample Design

2.4.1.2.1 Population and Sample

The population selected for this study consisted of Indian working professionals. The sample chosen from the selected population included private and public sector employees, and employees who identified as males and females. All the participants who had been working from home at their respective organizations for at least a year during the pandemic were included in the study.

2.4.1.2.2 Sampling Method

Purposive sampling technique was used to take out the sample from the target population.

2.4.1.2.3 Sample Size

The sample size for the present study included 110 participants who were working professionals in India.

2.4.1.3. Criteria

Inclusion Criteria: This criterion stipulated that the participants should be above 18 years of age and Indian citizens residing in India, employed with the same company for over a year, and be working from home for a minimum period of a year.

Exclusion Criteria: Employees who were commuting to their place of work during the COVID-19 pandemic, were frontline workers, and were either not Indian citizens and/or were not residing in India were excluded from this study.

2.4.1.4. Demographic Characteristics

Age: The ages of participants ranged from 18 to 51, and above. 60.9% of the participants (67 participants) were in the age range of 18-30, followed by 13.6% (15 participants) between 31-40 years, 20.9% (23 participants) between 41-50 years, and 4.5% (5 participants) were 51 years and older.

Sex: The sample consisted of 59.1% men (65 participants) and 40.9% women (45 participants).

Work Experience: 70% of the participants (77 participants) had worked with their current organization for 1-5 years, followed by 17.3% of the participants (19 participants) for 6-15 years, 8.2% of the participants (9 participants) for 16-25 years, and lastly, 4.5% of the participants (5 participants) for 26 years and more.

Job Sector: An overwhelming majority of 87.3% (96 participants) of the participants worked in the private sector and the remaining worked in the public sector (12.7%; 14 participants). The sample consisted of a wide variety of occupational categories. About half of the participants were managers, assistant managers, senior managers, executives or senior executives including founder and managing directors. Others worked professionally as teachers, associates, consultants, engineers, assistant professors, accounts officers or accountants, advocates, team leaders, individual contributors or independent contractors, assistant buyers, assistant general managers, chairman and managing directors, deputy general managers, psychologists or counsellors, research assistants, junior management or trainers. *Presence of a well-being/mental health programme:* 51.8% (57 participants) of the sample had a well-being/mental health programme at their workplace while 48.2% (53 participants) did not.

2.4.1.5 Data Collection

Data was collected on the basis of purposive sampling through an online questionnaire using Google Forms from May 2021 to August 2021. Information on the sociocultural and psychological perspectives of the study area had been collected keeping in view certain parameters such as age, gender, sector of work, years of working at the current organization, designation, and presence of mental health programme at the workplace. The participants indicated their responses on a five-point Likert scale ranging from "completely disagree" to "completely agree" for the first half of the questionnaire, and on a seven-point Likert scale ranging from "strongly disagree" to "strongly agree" for the second half. The responses of both sections were scored accordingly. For the second section which measured perceived support, the responses were compiled, and a t-test was performed using Statistical Package for the Social Sciences (SPSS).

2.4.1.5.1 Tools Used

 Perceived Impact of Extended Telework During The COVID-19 Crisis On Various Life And Career Aspects Survey Questionnaire by Baert, S. et. al., (2020): This scale included statements about WFH during the COVID-19 crisis and assessed employees' perceived impacts towards extended WFH using the following measures: (1) employee satisfaction, (2) professional conflicts, (3) higher task efficiency, (4) higher commitment to employer, (5) work-life balance,
(6) relationship with colleagues (7) stress management, (8) burnout prevention, (9) work concentration (Baert et al, 2020). Responses to each of the statements were obtained by using a five-point Likert-type response format with response options ranging from 1 = 'completely disagree' to 5 = 'completely agree' to see the extent to which an employee agrees with a statement. 9 of the original 14 items were selected following the pilot study to make it suitable for the Indian context (see 2.4.1.6 Questionnaire Development). Reliability of the scale indicates the goodness of the scale as Cronbach's alpha value of the scale is more than 0.721. 2. Survey of Perceived Organizational Support (SPOS) by Dr. Eisenberger (2002): Different versions of scales derived from SPOS were used to measure Perceived Organizational Support (POS) and Perceived Supervisor Support (PSS). The three-item version of the POS measure, consisting of items 1, 4, and 9 from the original 36 items, was chosen (Eisenberger et. al., 2002). The internal consistency reliability (coefficient alpha) was reported as $\alpha = 0.75$ (Eisenberger, et al., 2002; Worley 2006). In accordance with previous studies (Eisenberger et. al., 2002; Kottke and Sharafinski., 1988), PSS was measured by adapting three items (Items 10, 27, and 35; Eisenberger et al., 1986) from the SPOS. Here, the word 'organisation' was replaced with the word 'supervisor'. Both the measures consisted of a seven-point Likert scale with response options ranging from 1 = 'strongly disagree' to 7 = 'strongly agree'.

2.4.1.6 Questionnaire Development

A questionnaire divided into two sections was developed in order to gather the responses from the Indian employees belonging to an array of industries to perceptualize the scope keeping in view the objectives of the research. In the first section, responses were obtained on a five-point Likert scale (where 1 = completely disagree to 5 = completely agree) with the help of the 'Perceived Impact of Extended Telework During The COVID-19 Crisis on Various Life and Career Aspects Survey Questionnaire' (by Baert. S. et. al., 2020). Modifications included replacing words like 'globally' to 'overall', 'homework' to 'work from home', 'manager' to 'supervisor', and 'telework' to 'remote working'. Following the pilot study, 9 items from the original 14 were selected for the main study.

The items (items 2, 4, 5, 6, 7) were completely withdrawn on the basis of the pilot study to suit the local context. The overall Cronbach alpha value was 0.721.

In the second section of the questionnaire, the 6 item Survey of Perceived Organizational Support scale was added. The questionnaires are provided in Appendix A.

2.4.1.7 Pilot Study

After the development of the questionnaire, a pilot study was carried out to assess the extent of the effect of WFH on employee wellbeing during the COVID-19 pandemic. "The main purpose of the pilot study is to evaluate questionnaire items and to assess the suitability of the wording, layout, response rate and sequence of questions" (Cooper & Schindler, 2010). To evaluate the suitability of the questionnaire according to the context of the study, a pilot study was done after the modification of words in a few items.

The questionnaire with 14 items was circulated as a Google Forms link via WhatsApp among working professionals in close circles of the researchers. It was completed and submitted by 18 Indian employees. Data was gathered and analysed through SPSS Statistics. The reliability of the scale, analysed through Cronbach alpha, was 0.721 for 9 items after excluding 5 items from the original scale. The questionnaire was finalised after removing items 2, 4, 5, 6, and 7 through data analysis that was not suitable and relevant based on the context of the study.

2.4.1.7.1 Validity and Reliability

The content validity of the questionnaire was established by pre-testing the questionnaire focusing on scale clarity, question-wording, and validity by administering it on 18 Indian

employees through the pilot study. An analysis of the data resulted in a modification of the questionnaire. Reliability analysis of the scale used is Cronbach's alpha whose value was more than 0.721. This indicates the goodness of the scale.

2.4.2 Qualitative Method

The qualitative method used grounded theory analyses of individual semi-structured interviews. As there exists a strong gap in the existing literature pertaining to employee wellbeing in India, particularly in the context of the COVID-19 pandemic grounded theory method has been used. Grounded theory has been viewed as appropriate for studying people's understandings of the world and how these are related to their social context (Potter, 1998). Gathered data was analysed using thematic analysis.

2.4.2.1 Individual Interview Participants and Procedure

A total of 4 working professionals who were working from home during the COVID-19 pandemic were individually interviewed (n = 2 males, 2 females). All participants confirmed that they were employed at their respective organizations for at least a year. Table 5 displays the demographic information of participants.

Convenience sampling was used in a group of participants who agreed to be contacted for a follow-up interview. The type of interview used in the present study was semi-structured and the interviews were conducted with an exploratory perspective based on the new ideas posited by the participants. To this end, to get a better idea of each participant's situation the interview included 4-5 basic questions as a starting point. These questions were used only as an outline to return to for brief moments while the broader direction that the interview took was guided

by the responses of the participants. The interviewers ensured that open-ended questions were asked, and clarification was used where necessary.

Following a verbal greeting and a few moments of general conversation to get used to the screen-to-screen interaction and to establish rapport, the participants were made aware of what to expect from the interview as well as their rights as participants to anonymity and confidentiality. The following was communicated to each participant at the start of the interview: "Hi! Thank you for joining me today for the follow-up interview. Before proceeding, I would just like to confirm a few details of yours based on your responses. Is that all right?"

All the participants were interviewed via a video call on Zoom Meetings. The interviews lasted between 30 and 40 minutes and were recorded and transcribed. The interviews were recorded using Zoom's inbuilt recording feature. 3 of the 4 participants were employees, while 1 participant was a supervisor who had other higher-ranking executives above them in the organization. A semi-structured questionnaire was used for the interview. Five questions were designed for employees and four questions were designed for supervisors, as is given in Annexure 1.

2.4.2.2 Data Analysis

Step 1: Each interview was transcribed using Grounded Theory. The transcriptions were coded using focused coding and then proofread for potential errors while playing the video recording of the interview. The transcribed interviews can be found in Appendix B. Alongside proofreading, the author brainstormed codes and subthemes and then allotted each to a paragraph in the transcripts.

Step 2: Using thematic analysis, each paragraph was read and reread to make digital notes to reflect the conveyed meaning, and the subthemes were decided which are given in Table 6. These notes representing each paragraph from the transcription were organised under themes

of "managing transitions", "through the laptop screen", "organizational perceptions", and "maybe you should talk to someone".

Step 3: The second round of interpretation was conducted after analysis alongside a simultaneous construction of themes. At this point, the researcher pondered upon the employees' WFH experience, the magnitude of the impact of the novel coronavirus, and the role of workplace mental health programmes in alleviating concerns. The researcher marked key phrases and terms and then organized reflections under the emerging themes and subthemes the researcher had already created.

Step 4: This step involved drawing out tentative themes and sub-themes.

2.4.3. Research Procedure

After finalising the questionnaire for the main research study on the basis of the pilot study, a new Google Forms link was circulated to gather data from the selected population. Participants were recruited via social media and other networking platforms (such as Instagram, WhatsApp, LinkedIn, Facebook). Upon opening the questionnaire link, participants were given a brief overview of the purpose and goals of the study and were assured of the confidentiality of their responses. As a majority of the data was collected during the second wave in India (May-June 2021), hard copy consent forms were not used, and informed consent was acquired through the questionnaire itself. Participants were also asked if they would be interested in a follow-up interview. A total of 123 responses were recorded. However, 13 data were excluded because the respondents had not worked from home for the entire duration of the pandemic.

2.4.4. Statistical Tools

The data gathered from the participants was analysed and interpreted with the help of Statistical Package for the Social Sciences Software Version 26. For analysing, t-test was used to evaluate if there is a significant difference between the mean of the two groups. Independent t-test was

used for the testing of hypotheses in order to find the variance in perceived organizational support and perceived supervisor support between the two groups with a mental health programme at their workplace and without a mental health programme at their workplace.

2.5.5. Ethical Considerations

Prior to participating, the objectives and goals of the study were explained to all the participants and informed consent was obtained by emphasising voluntary participation. The participants were assured of the confidentiality and anonymity of their responses, and of their prerogative to withdraw from the study at any time without any consequences. The purpose of recording the interview for transcription was described and permission for the same was acquired at the start of each interview.

CHAPTER 3: RESULTS

The quantitative data was first analysed by adopting a sequential explanatory mixed methods design (Creswell & Plano-Clark, 2018). Guided by those findings, thematic analysis of qualitative data was conducted to explore nuances.

3.1 Quantitative Data Analysis

Quantitative analysis of employee well-being impacted by COVID-19 while working from home is based on the interpretation derived out of the specially framed questionnaire. A questionnaire divided into two sections, consisting of two scales, was developed in order to gather responses from the Indian employees belonging to an array of industries. Here, the first section focused on statements related to employee well-being while working from home during the COVID-19 pandemic and the second section focused on statements related to perceived support (perceived organizational support and perceived supervisor support).

After the data was collected through Google Forms, the 110 responses were compiled together and an independent t-test was performed using IBM SPSS Statistics Version 26. The test was carried out assuming the variance of the two populations (employees with a workplace mental health programme and employees without a workplace mental health programme) with normal distribution. In the present study, the research statements are given, followed by the corresponding null and alternate hypotheses with the level of significance for the test set at 5 per cent. The gathered data after performing SPSS gave the results shown in Table 2 which were interpreted later. The first section of the questionnaire focused on employees' perceived impact of work from home (WFH) during the COVID-19 pandemic. There were 9 statements to assess the effect of COVID-19 on the well-being of employees during work from home. The first item focused on employee satisfaction, (item 1: Overall, I am satisfied that I am working more at home because of the corona crisis); majority of the employees either somewhat agreed (37.3%) or completely agreed (27.3%) indicating satisfaction working from home due to COVID-19. Some employees felt neutral about this working situation (17.3%) and a few of them somewhat (10%) or disagreed indicating dissatisfaction working completely (8.2%)from home. When employees were assessed for the aspect of professional conflicts (item 2: I have more professional conflicts (e.g. with supervisor/manager or colleagues) because I work more at home because of the corona crisis) majority of the employees either completely (29.1%) or somewhat disagreed (23.6%) indicating no rise in conflicts with their supervisor or colleagues due to working from home in the pandemic. Many of them felt in the middle (27.3%) and a few of them either somewhat (17.3%) or completely agreed (2.7%) indicating experiencing some conflicts at the professional front during work from home.

Looking at the aspect of higher task efficiency (item 3: I can do my job more efficiently during the extended work from home because of the corona crisis) majority of the employees either somewhat agreed (31.8%) or completely agreed (17.3%) meaning that working from home might be a boon rather than a bane. Many of the employees also took a neutral stance (21.8%) and some either somewhat (13.6%) or completely disagreed (15.5%) indicating that overall employees have mixed feelings about doing their job better due to working from home in the pandemic and being more efficient.

When it comes to committing or connectedness to the employer (item 4: I feel more connected to my employer due to the extended work from home because of the corona crisis) majority of the employees either somewhat (29.1%) or completely disagreed (23.6%) meaning that

working from home did not enhance the connectivity with supervisors. Many of them felt neutral (24.5%) about it and a few of them either somewhat (18.2%) or completely agreed (4.5%) indicating that some of the employees might have benefited in some way from working through the screens enhancing their connectivity with their supervisors.

For the work-life balance aspect (item 5: I am experiencing a better work-life balance due to the extended work from home because of the corona crisis) many of the employees somewhat (23.6%) or completely disagreed (21.8%) indicating no improvement in work-life balance while working from home. Whereas some of them somewhat (20%) or completely agreed (16.4%) indicating an enhanced experience of work-life balance due to work from home and few of the employees had a neutral (18.2%) stance about it.

Looking at the relationship aspect among colleagues (item 6: I feel a stronger bond with my colleagues due to the extended work from home because of the corona crisis) majority of the employees either somewhat (37.3%) or completely disagreed (21.8%) indicating that the interpersonal relations and connectivity at work with colleagues took a toll due to working from home in the pandemic. Some of them felt neutral (20%) on this aspect and some of them either somewhat (14.5%) or completely agreed (6.4%) indicating that for some employees work from home helped improve their bond with their colleagues.

When it came to the aspect of work-related stress (item 7: I experience less work-related stress due to the extended work from home because of the corona crisis) majority of the employees somewhat (32.7%) or completely (21.8%) disagreed that they experienced less stress indicating that their stress levels might have stayed the same or else increased working from home. Some of the employees either somewhat (13.6%) or completely (3.6%) agreed to the statement indicating a decrease in their stress levels. Few of them took a neutral stance (18.2%) indicating no change in their stress level or uncertainty about it.

Looking at the aspect of burnout prevention (item 8: I think the extended work from home caused by the corona crisis is reducing my chances of burnout in the near future) many of the employees either somewhat (24.5%) or completely (22.7%) disagreed indicating working from home does not help prevent burnout in the near future. Whereas some of the employees took a neutral (31.7%) stance indicating no change or uncertainty regarding the aspect of burnout. A few of the employees somewhat (17.3%) or completely (3.6%) agreed, indicating for some of them working from home does in some way prevent burnout.

On the aspect of work concentration (item 9: I experience better concentration at work due to the extended work from home because of the corona crisis) many of the employees either somewhat (26.4%) or completely (19.1%) disagreed indicating that their concentration at work while remote working did not improve. Whereas many employees took a neutral (29.1%) stance indicating no change or uncertainty about improving work concentration. Some of the employees somewhat (16.4%) or completely agreed (9.1%), indicating that their concentration did improve while working from home.

Overall, the results indicate that the majority of the employees were satisfied with remote work during the COVID-19 pandemic. There was not much rise in professional conflicts with supervisors or colleagues. Employees had a mixed experience of doing work more efficiently and although almost half of them agreed, their connectedness with the supervisor did not enhance that much for most of them. Most of them were not experiencing a better work-life balance, and relationships or bonds with colleagues took a toll. For the majority of them, workrelated stress did not decrease and there was not much effect of remote work in preventing burnout. For most employees, the concentration at work did not improve as well.



Figure 1: Effect of work from home on employee well-being during the COVID-19 pandemic

The second section of the questionnaire measured perceived support using Eisenberger's Survey of Perceived Organizational Support. The responses to each of the measures were obtained by using a Likert-type response format with response options ranging from 1 = 'strongly disagree' to 7 = 'strongly agree'.

Perceived organizational support (POS) was defined as an employee's perceptions of their organization valuing their work contributions and caring about their well-being. (Eisenberger, et al 2016; Krishnan & Mary, 2012; Rhoades and Eisenberger, 2002). POS was measured with 3 items that assessed employees' performance, consideration of employees' goals and opinions, and organizations' concern toward employees' well-being.

Perceived supervisor support (PSS) was measured using 3 items that evaluated employees' perception of their supervisors' willingness to help them, supervisors' pride in their work, and

supervisors' ability to make the job interesting. Higher scores indicate that participants perceived their organizations and supervisors to be more supportive. Cronbach α for the pilot study was .945, indicating high reliability and goodness of the scale.

Descriptive statistics were computed to summarize and describe the data. The means and standard deviations of the measured variables are displayed in Table 1.

Table 1:	Descript	tive S	tatistics	for	Perceived	Support

Perceived Support	Ν	Mean	Std. Deviation	Std. Error Mean
Employees without MHP	53	28.74	8.769	1.204
Employees with MHP	57	32.54	9.258	1.226

H₀2: There is no significant difference between the perceived support of employees in organizations with and without well-being/mental health programmes.

H_A2: There is a significant difference between the perceived support of employees in organizations with and without well-being/mental health programmes.

Table 2 indicates the results of independent samples t-test of two different populations which are employees with a workplace mental health programme and employees without a workplace mental health programme for perceived support (POS and PSS). It is evident that the p-value (.029) of the t-test is less than 0.05 (p < 0.05; with t value of -2.21) or 5 per cent of the level of significance. As a result, the alternate hypothesis H_A2 is accepted which states that there is a significant difference between the perceived organizational support of employees in organizations with and without well-being/mental health programmes. The null hypothesis H_02 is therefore rejected.

Table 2: R	lesults o	of Independent	Samples	t-test	of	Employees	With/Without	MHP	at the
		*	-						
<u>Workplace</u>									

		t	df	Sig.	Mean	Std.	Error
Equal variances	not			(2-	Difference	Difference	
assumed				tailed)			
		-	107.961	0.029	-3.808	1.719	
		2.215					

The data analysis revealed an interesting finding that was not included in our hypothesis testing. We found a significant difference with respect to gender for perceived support. Table 4 indicates the results of the independent samples t-test between males and females. It is evident that the p-value (.027) of the t-test is less than 0.05 (p < 0.05; with t value of -1.225) or 5 per cent of the level of significance. The means and standard deviations for gender are displayed in Table 3.

Table 3: Descriptive statistics for gender

Gender	N	Mean	Std. Deviation	Std. Error Mean
Male	45	29.42	10.519	1.568
Female	65	31.60	8.102	1.005

Table 4: Output of independent samples t-test for perceived support w.r.t. gender

	t	df	Sig.	Mean	Std. Error Difference
Equal variances assumed			(2-tailed)	Difference	
	-1.225	108	0.223	-2.178	1.777

To conclude, the results of this study accepted the alternate hypothesis H_A2 which stated that there exists a significant difference between the perceived support of employees in organizations with and without well-being/mental health programmes. The data also emphasized that men and women perceived support differently.

3.2 Qualitative Analysis

A qualitative analysis following the quantitative one was performed to reflect the points of view of participants and thereby make the study more comprehensive. Grounded theory was used as a methodological approach and thematic analysis was used for analysing data.

The participants were 4 employees who were working in the private sector, with 3 participants falling in the age group of 18-30 and 1 participant being in the age group of 41-50. The demographic data of the participants are presented in Table 5.

PARTICIPANTS	SEX	AGE GROUP	YEARS WITH ORGANIZATION	PROFESSION	DESIGNATION	SECTOR OF WORK	MH PROGRAMME
NA	F	18 - 30	1-5	Counselling Psychologist	Employee	Private	No
МН	F	18 - 30	1-5	Teacher	Employee	Private	No
RG	М	41 - 50	16-25	Director	Supervisor	Private	Yes
RJ	М	18 - 30	1-5	IT Professional	Employee	Private	Yes

Table 5: Demographic data of interviewed participants

The analysis led to the development of four themes and eight sub-themes. The developed themes and sub-themes are listed in Table 6.

Table 6: Themes, Main Sub-Themes

Themes	Sub-themes			
Managing Transitions	Pandemic's Impact			
	Work-Life Balance (WLB)			
Through The Laptop Screen	The WFH Experience			
	Remote versus Offline Work			
Organizational Perceptions	Organizational Grievances			
	Support during the pandemic			
Maybe You Should Talk To Someone	Effects of Mental Health Programme			
	Desired Workplace Well-being Interventions			
[Note: P1 refers to Participant 1; P2 refers to Participant 2; P3 refers to Participant 3 & P4 refers to Participant 4]

Theme 1: Managing Transitions

1A: Pandemic's Impact: Globally, employees have endured considerably during the COVID-19 pandemic, from having to switch to WFH virtually overnight to losing structured working timings. Throughout the interviews, we observed the effects of gruelling job demands and stresses on the physical and psychological well-being of employees.

One participant, a psychologist, stated "Being a mental health professional during the pandemic, there was a lot of burnout on our end and a lot of emotional exhaustion." [P1]

It was also evident that in the case of some employees, the unpreparedness on part of the organization heavily affected their work schedule and health.

"Travel was a very important part of the job that came absolutely to zero. The screen time increased. I mean, possibly, there were many days, to be honest, in June-July last year, I spent 13-14 hours in front of the screen. And actually, personally, I suffered ergonomics issues and back problems." [P3]

Some participants expressed strong concerns about being infected. Others spoke about the myriad of difficulties they faced in executing their jobs due to them or someone close to them suffering from the virus. They also mentioned how these health issues led to a lack of supervisor support.

"All of us are constantly thinking that you know, we might contract COVID or someone is sick. So, we got really anxious." [P2]

"There was less checking up that way. And since my supervisors were also suffering from COVID and then my family was suffering from COVID. So, there was also a lot of less

communication due to their own health issues. And then my family's health issues. So, there was a lack of availability at times because when we used to call them up, there used to be no response from their end. And when they called us, we were busy. So, that way the support was less." [P1]

Overall, the pandemic scenario affected almost all aspects of employees' lives.

1B: Work-Life Balance (WLB): By merely being a phone call away, the pandemic affected the ability of interviewed employees to achieve an adequate balance of personal and professional duties and activities. Participants conveyed the ordeals they faced due to the blurring boundaries between work and private life in light of longer working hours.

Poor WLB strongly manifested through a lack of autonomy and volition, particularly in terms of changing workload due to household chores.

"We could choose whether we, say, wanted to cook or wanted to clean, you know. We came back from work, and we could actually ignore that in our minds because we just didn't have time. But then, now you're forced to, you know, you're forced to pencil that in even if you are working. And I think it's a fine distinction. I get that it doesn't really make sense on the face of it because either way, you're going to have to do it. But I think that taking away that choice is a big thing." [P4]

While talking about the negative effects of WFH, participants articulated the influence of their families on their work leading to missed opportunities, a lot more responsibilities to juggle with and the additional stress of not having distinguished spaces and boundaries.

"So, at that time, I had time, I was free. I had taken up all those things. But now I had to suddenly take care of the house and look after my parents. So I had to miss out on a lot of things because of that. It made me less confident also at a point. Because I was missing a lot of stuff, I felt that my knowledge was decreasing. And I had this time to build up my knowledge and skills and I was missing out." [P1]

"The stress of work doesn't go away, because there is no change in scenery if you will. When you are at the office, you leave all the baggage of your office at the doors of the tech pack that you work in. But, now that you're sitting at home it doesn't just go away when you close your laptop." [P4]

Familial and household disturbances also made balancing work and home life difficult. The absence of a defined workspace, no change in the work environment and the noises added to the difficulties employees were already trying to manage during this transition in their work life.

"People have to do their housework as well and during the pandemic when they're WFH and they have their parents screaming in the back. So, there's a whole amount of disturbance in that area." [P1]

"So, you know that I think that change in scenery gives you a mental break which doesn't happen to you, it didn't happen during the locked up so yeah." [P4]

"My house is surrounded by like construction work going on all the time. And we also have this covid centre right next to our house so sometimes it gets a bit noisy. That actually disturbs me a lot." [P2]

Theme 2: Through The Laptop Screen

2A: The WFH Experience: The unprecedented nature of the coronavirus crisis left employers grappling with ways to make remote working favourable and collaborative. A supervisor mentioned "having to take into consideration the comfort of client organization and people to accept and participate in a remote delivery program" [P3]. Soon, employees also realised a glaring gap in their skills of working from home and managing remote interactions. Supervisors

and employees alike had to actively achieve proficiency in digital tools to meet job requirements and demands.

The interviews revealed that all participants considered WFH to be a learning curve. They eventually overcame the initial difficulties and became accustomed to the things that were out of their control.

A supervisor said, "When you do a training program of 20 people, you (put them) into groups of five people, so four groups. Now how do you create those meeting rooms inside Microsoft Teams? How do you give them exercises which they can understand better when you are physically not in front of them? How do you make it interactive? How do you have communication between participants, without disturbing other people? Those are some of the things which we learned. (...) And sitting 8-10 hours in front of a laptop, I think none of us were used to it. I mean, definitely, there were problems but we had to adjust to that new working environment." [P3]

"When we started off everybody was just doing it poorly because it's not something that we get used to at, you know, the drop of a hat right. (...) We were like 'okay we don't like doing it but suffer through the pain, and (it) leads to the other side; get work done'. And I think that's what happened. Eventually, we all learnt." [P4]

WFH severely affected the quality of communication at work. There were less healthy and more superficial discussions and employees found it difficult to convey their messages to supervisors successfully. The digital divide impaired cohesive connection and participants felt their professional relationships suffered a lot as there was lack of personal touch.

"The conversations were not as heart to heart as compared to in the office. The communication was less efficient and less of a personal touch. And it was very superficial, more superficial." "If they are willing to listen, the problems get solved. But if they don't listen or understand then there is a bit of miscommunication." [P2]

Moreover, the situation prompted some employees to consider taking up jobs they did not particularly like in exchange for higher pay or for a change even if it was not so fruitful for them regarding their career.

"I think money just became the only motivator. (...) It came to a point where we were willing to like shift jobs, even if the work wasn't the greatest because we'd get a significantly larger chunk of change at the end of the month. So, you know, because of that we were, you know, we were willing to shift jobs that we might not have been necessarily comfortable with in terms of our career." [P4]

2B: Remote versus Offline Work: Depending on their profession and work culture, participants had contrasting accounts of remote working. Some felt it occupied them more while for others, less supervision made them procrastinate and they experienced more productivity working offline.

A teacher stated, "Since it's work from home and we are not physically present there, it is actually very time consuming because we have to prepare beforehand. We have to check the networks to make sure the attendance, we have to keep a record of everything and we have to report to our class. We have to give a detailed report of our class after every class. So, it's actually more hectic than offline." [P2]

Whereas a psychologist explained, "Taking sessions was one part but when you're in the office or you're in the organization, you have to do plenty of things at the same time. And the people, your bosses, will come check up on how much you have done. So, that checking up was not there. We had this lenience of, you know, you can delay some tasks and all that. (...) I think when I joined the office after that, I felt that my productivity had increased. So, at home I was, you know, lazing around a lot and doing work according to my convenience."

A corporate employee felt that offline work offered proximity with colleagues which was absent during remote work. It was difficult having no one to talk to, especially colleagues who used to work in close proximity which helped release bottled emotions.

"...it was tough not having people to talk to. Especially my colleagues, because there was a set of people who I really connected with in the office, and you know, those are the people that you sit next to on a day-to-day basis. (...) And, you know, you also kind of learn how to defuse that kind of tension with each other. (...) even then all that frustration that's built up in you just just like that it just flew away and you know, you just laugh grudgingly, and then you'd be like okay, fine. You know I mean that that's gone now that you've laughed, all that built-up, pentup anger and all that is gone. And that really used to help, right? I think that took a beating as a part of your lockdown because they gauge your moods through proximity and when that was taken away then, you know, that kind of an environment also went away." [P4]

Overall, both remote and offline work have its merits and demerits. Employees' experiences were influenced by their field of work and their work environment.

Theme 3: Organizational Perceptions

3A: Organizational Grievances: Employee dissatisfaction over WFH during the COVID-19 crisis could have been reconciled by acknowledging employee complaints and perceptions. However, the interviewed participants felt that this deed remained unachieved for the most part.

Entry-level employees mentioned feeling "lost in translation" [P4] due to the lack of support rendered. Others felt that the top management did not address pandemic-related issues and pressurized them and there was lack of supervisory support or else the quality of supervisory support was not good.

"As a fresher, we were way beyond our capacity to handle them. Because you are just getting started and you are getting trained in an organization so you would expect more support at that time, more training at that time. But it was like clients were just given to you and it was a lot of pressure initially. So, that made it difficult to, you know, cope with their problems. (...) I look for feedback. So, that does not happen and that is something which demotivates me to work. And it sounds like complaining and comparison on part of the supervisor which seems very unprofessional." [P1]

"The top tier was a bit less understanding and they would push us saying, 'how can you not do this? This is so simple.' There was a bit of a problem in that space." [P2]

A corporate employee vehemently spoke about the facade of the mental health programme in their organization and the price that needs to be paid to seek well-being services in the corporate world where employees are working overtime (12-14 hrs) and given an unacceptable amount of work.

"Well, on the face of it, it promotes mental health, right? Because it needs to have visibility, it needs to have the optics of doing something like that. But at the same time, your work, the methods of work, are not very conducive to you having that kind of an opportunity. (...) They, as a corporate sector, do not tell you at any point, 'don't reach out to them'. But then the brass tacks of it is that everything else needs to be balanced before you can find a time for that, right? So, when you avail the services of somebody who is working in the same company as you, who is working in the same hours as you, how do you balance that?" [P4]

Employees felt that their organisation does not care about them and supervisors lack empathy, show less genuine concern to employees' needs and seem less trustworthy due to power dynamics.

"Like 'managers, ask your direct reportees how they are' and you know. Then that became amusing because then your managers were obligated to ask you how you were. And a lot of times these are not very empathetic people. You know they are like very to the point and blunt (...) Again, that's good business more than anything. You need to keep your employees happy and so there was that kind of an outreach but I don't particularly think it is out of concern for people's mental health, but more rather out of you need to keep you pacify your workforce and you need to engage with them at least a little bit so that they feel that you care." "This was a more cognitive action and that shows that we can't really trust your motives behind it, because of the power dynamic, more than anything else."

3B: Support during the pandemic: Applying healthier work designs and promoting wellbeing may be important more than ever during the COVID-19 crisis. Prioritizing health and safety as an organization can reduce employee stress and make them feel valued.

Organizations implemented initiatives to ensure efficient communication through weekly meetings and an active discussion of problems. These fostered a sense of connection and coordination among employees.

"When there was a really strict total lockdown, we would have two or three regular meetings at the end of every week via Zoom. All of our colleagues have weekly revisions of the problems that we were facing or to discuss which platform was the best for the students. So we were all actually very well connected and everyone was extremely understanding. (...) I think our connectivity was not that much affected. All of us were very well adjusted to whatever was happening." [P1] A supervisor elaborated on how they organized informal weekly meetings to create a sense of belongingness by chatting about light-hearted content.

"We started having weekly team meetings on Friday evening. So it was without agenda and was not for work-related stuff. Okay, this was just coming together virtually, and then talking about movies, weekend plans, how is the family doing. Is there any problem? Any help is required? (...) So, just to maintain that connection with employees and make them feel part of the wider team at the same time." [P3]

While some organizations did not or were unable to assist their employees satisfactorily, others instilled job security. Entry-level jobs were protected by pay cuts for members of the top management.

"We announced upfront that irrespective of whatever happens, we will not reduce our manpower. We will not ask anybody to go home. So, that created a huge amount of comfort and security, a feeling of security amongst the team. (...) In 120, 20-25 people took a salary cut. Because the revenue was not coming in, and we wanted to protect every job. So rather than firing some people and reducing costs, we said that senior people should take lower salaries. But, (for) junior people, there was no cut in their salary." [P3]

Half the interviewed participants had medical assistance and coverage related to the coronavirus through their organization to tackle health problems and provide support as a group.

"They had alternate housing in case your family members are COVID positive, or, you know, they had COVID insurances for your medical bills and things like that. They even had doctors on call, hired by the company itself." [P4]

"We also tied up with some of the medical agencies where remote consulting with the doctor was possible. At that time the problem was that the government infrastructure was definitely not fully equipped. And there was no real medicine for that. So, how do you treat, what precautions do you take? I mean, there will be hundreds of messages on WhatsApp, newspaper, TV. But talking to doctors and getting even the same information provides a different comfort to at least some of them." [P3]

Supervisory support varied tremendously. Some participants felt that their supervisors were going out of their way to provide assistance. Others recognized that the decreased support stemmed from their supervisors dealing with their own struggles and doing the best that they could.

"The supervisors are understanding, supportive and they would guide us through anything. Since we change the platform very often for students to be properly available, teachers used to have problems accessing or trouble in understanding how to create links or how to create a meeting. In those things, the supervisors were extremely helpful." [P2, a teacher]

"They completely forgot about you and you know, that does hit you. Wow. Okay. Is your regard for us only professional, and you know, not as a human being? But then, in retrospect, you understand that you know, they're not doing this cognitively. They just are trying to deal with their own stuff. And so, you don't take priority over their family. (...) And so they might not reach out to you, they might not care. It might not appear like they care but I'm pretty sure that if I reached out with a problem, then, you know (they would help me out)." [P4]

P3, the supervisor, stated how they actively encouraged employees to take support from the organization's mental health programme.

"We had an employee assistance program with an external agency. Like psychologists and counsellors were already there in place. Very few people felt the need to use that. So we communicated with the team. 'Hey! This program is there. These people are there to help us. If you want to connect, please connect with your supervisor or you can connect with the external agency. These will be confidential things and things like that. So we definitely communicated that and some of the people did take this help from an external counsellor."

Theme 4: Maybe You Should Talk To Someone

4A: Effects of Mental Health Programme: WFH has left employees struggling to cope with interpersonal workplace relationships and job satisfaction. Organizations can reduce the psychological impacts of social distancing and self-isolation by creating and updating mental health programmes in the workplace. Their existence can help achieve emotion regulation, advocate self-care practices, and design support systems that alleviate pandemic-induced stress.

Moreover, the absence of a mental health programme at work made participants feel a lack of concern and care from their organization. They highlighted how difficult it had been for them and how having a psychologist on board can make things better for everyone.

"Our needs were not properly addressed by the organization, which I felt if it would've been there, we would have performed better. And we would be able to, I think, take care of our own mental health ourselves. Like, we would be at peace with ourselves so our services would be better as well. So, the lack of that made things very difficult. Also, it made us disconnected to the organization as well." [P1]

"Psychologists can help plan out the timetable or the routines to be as less hectic as possible; be extremely understanding and give advice to the head of the school, teachers and students as well as to how to function more effectively or someone who's always there to understand, sympathise with you. That is extremely important especially at times like this. That is a big loss for schools not to have because everyone is going through a tough time. And if everyone functions in a mechanical way then I don't think it will be a healthy environment for anyone." Participants with workplace mental health programmes were sceptical about its current form of implementation. They believed that its existence meant sacrificing other things but that it could provide support in dire circumstances.

"So, does it help having a mental health counsellor at the workplace? Yes and no. Because yes, if you really need it, and if you're ready to put everything else on hold and yeah there is an option available. But is it there for the maintenance of your health? No. Is it there to fix you once you've completely broken down? Yes. I would put it that way."

4B: Desired Workplace Well-being Interventions: Towards the end of the interviews, participants suggested the interventions they would like to receive. They stipulated that they would like these to continue even after the pandemic and/or if they have to work offline.

In general, participants communicated their wish to have employment engagement activities. These ranged from dedicating a day for employees' mental health to roleplays, listening circles, supervisory check-ins and feedback.

"Keeping a mental health day. Maybe once a week, twice a week. Doing some activities, meditation, anything. So that you know it gives out the impression that we are caring for your mental health. (...) I think it would've been very great if a mental health programme was there in the first place. Even, I think just checking up on your employees about if they are okay - if they need a break. That also would have made a huge difference." [P1]

"I think role-plays are important. We could write down our stories, troubles and we could make a chit and we could pass it. And someone would pick it up and someone would read those things. (...) So when you get to know what others are going through you develop an empathetic understanding towards them. So role-play can be wonderful if we could do it. Like every week or something. Or even listening circles kind of a thing where we would just sit and listen to each other patiently you know trying to know what was the problem that they had." [P2] A corporate employee suggested that mental health programmes (MHPs) could focus on the impacts of overworking on the wellbeing of employees and implement better strategies accordingly.

"Study the consequences of having to work these 12-hour shifts, even though you're only paid for nine hours. Delve into the murky waters of how you're paid and how your overtime works, which we don't have by the way, and then, you know, come to the point where you take cognizance of the fact that there is a problem, or you know there is a likelihood that a problem can occur in terms of mental health of your employees, because of the way the industry is set up. How work is given, how the employer and employee interact. And the policies spoken and unspoken that are enforced in the company and take a good hard long look at that and I would say, figure out something that could, you know, take better care of your employees in that aspect. I would love for the corporate world to take a step back. Assess, reassess rather, the amount of work that is acceptable for one person to do in a day, now that the pandemic is going on. I think that that is very important and I think that's something they failed to do. It will take them 20 years to treat your techies basically like human beings." [P4]

The stigma around mental health in India was also discussed and participants with a mental health programme recommended other companies to start one too and people without mental health programmes suggested to spread more awareness about the importance of mental health and importance of mental health professionals.

"Somewhere mental health is a stigma in India, in our society. And we need to sort of encourage people to take help if they are in a problem." [P3]

CHAPTER 4: DISCUSSION

The purpose of the present study is twofold. First, we aimed to investigate the effects of WFH on employee well-being during the COVID-19 pandemic. Second, we sought to understand the influences of well-being/mental health programmes with respect to perceived support (organizational and supervisor support) of employees. The COVID-19 pandemic hurled employees into challenging work environments without adequate resources to achieve job demands (Annie Rachel et. al., 2020). As part of our commentary, we presented quantitative data from well-validated and reliable scales and qualitative findings from semi-structured interviews to bring attention to the same.

Figure 1 illustrates that a majority of the participants (64.6%) were satisfied with the increase in WFH during the COVID-19 pandemic. This was consistent with studies from Sri Lanka (Sellar & Peiris, 2021), Belgium (Baert et al, 2020); and Indonesia (Dwidienawati et al, 2020). However, through the qualitative findings of this research, it was uncovered that this may not be the entire story. Employees demonstrated an overall deterioration in physical and mental well-being, and some mentioned decreased productivity. Reasons included experiencing eye strain and back pain from the exponential rise of daily screen time and feeling less connected to colleagues. Some were discontented with their remunerations, as has been seen in another Indian sample (Jain et al, 2021), and considered switching to less satisfying but higher-paying jobs.

50.9% participants did not report a higher task efficiency. Evidence from the pre-pandemic era suggests that maintaining boundaries between work and non-work activities is challenging for employees (Ramarajan & Reid, 2013). The mandated social distancing and remote working during the COVID-19 pandemic have worsened this issue. Multiple studies during the

pandemic have suggested that the merging of the private and professional spheres can overburden employees. (Kniffin et al., 2020; Lonska et al, 2021; Dolot, 2020; Xiao, et al, 2021). The present research has confirmed the validity of these claims in the case of Indian employees, with 56.6% of employees identifying the extended WFH to have a negative effect on their work-life balance. Interviewed participants felt encumbered with household chores and encountered a loss of control over their work and social lives, particularly due to lack of defined working hours and social distancing restrictions. They mentioned how they and their colleagues suffered during WFH and eventually resigned to the state of affairs. The 43.4% of employees who were able to find a good WLB may have utilized certain WLB strategies. These encompass physical, relational and cognitive WLB crafting strategies which include, but are not restricted to, managing time, enforcing health-related self-care practices, and spending time with family (Caringal-Go et. al., 2021).

20% of the participants experienced more professional conflicts during the pandemic while working from home.

Participants did not report positive attitudes towards the role of WFH in stress and burnout prevention, and on-the-job concentration. A mere 27.2% of participants experienced less work-related stress and 22.5% accounted for better concentration on their work. Participants mainly attributed stress to personal health, the COVID-19 pandemic, and a lack of organizational and supervisor support. They had to balance long working hours while being infected with the coronavirus and/or while taking care of infected family members. Employees, particularly entry-level ones, felt lost and uncertain about their roles. Studies from Singapore (Teo, 2020) and the United States (Hayes et al., 2020) support these findings by documenting extremely high and increased stress in WFH employees. Sahni (2020) also stipulated that stress can be triggered via ineffective communication at work and a lack of clarity and direction, which were noted by the interviewed participants. Moreover, some mentioned being less focused due to

disturbances at home (family, construction work), interruptions (poor network connectivity), scheduling constraints, and the absence of a distinction between the office and the home. It has been postulated that these factors affect concentration and result in the loss of resources during the pandemic (Kaushik, 2020).

A staggering 47.2% of participants believed that the extended telework increases their chances of burnout in the near future. In the interviews, participants mentioned being emotionally exhausted and overworked due to stressful work conditions, poor well-being, and little or no support. The increase in burnout during the pandemic has been supported by two studies conducted during the period. An Indeed survey (Threlkeld, 2021) examined and found that over the last year, 67% respondents believed that their burnout worsened throughout the pandemic. Limeade's 2020 follow-up report six months into the pandemic showed an increase from 42% to 72% in burned-out employees due to low well-being and high engagement.

A key area discussed in the interviews was dissatisfaction with organizational and supervisor support. Its aspects included comparison amongst employees instead of appreciation, lack of regard beyond work requirements, and indifference towards problems faced in adapting to remote working. There is a consensus in the literature on employees experiencing a deterioration in interpersonal relationships at work (Fana et. al., 2020). From the author's findings of this study, it was evident that the participants, in general, were experiencing a severe decrease in social interaction. More than half (54.5% and 52.7% respectively) noted a weaker bond with their colleagues and felt less connected with their employer. Furthermore, participants felt that achieving optimal communication virtually posed serious challenges and emphasised its impact on their sense of belonging with their supervisors and at large, their organizations. Direct communication does not necessarily imply support. But during times of crisis like the COVID-19 pandemic, being able to communicate with the supervisor can be a critical source of support, which most participants did not receive. Digital platforms hindered

meaningful feedback, discussions and exchange of ideas, and employees felt a lack of personal touch in conversations with colleagues and supervisors.

Quantitative data analysis revealed that there was a significant difference between the perceived support of employees in organizations with and without wellbeing or mental health programmes (H_A2). This indicates that the presence of a mental health programme at the workplace improves the quality of support that employees receive from their organizations and their supervisors. Our qualitative findings informed these results by revealing the struggles of participants without a workplace mental health programme and the experiences of those with one.

During the pandemic, participants were coping with their own sets of personal problems in addition to the increased workload and organizations were barely scraping by to make ends meet. Employee well-being took a backseat and even after 18 months its consequences remain. Participants expected organizations to take some measures for their well-being and act in their best interests. In general, all participants felt that their organizations lacked in offering a holistic model of support. Those without a workplace mental health programme felt "unfulfilled, disconnected, and disappointed" [P1]. They illustrated how, during the pandemic, the absence of a mental health programme made them feel uncared for and how its existence could have helped their well-being. Organizational support could have helped participants who felt helpless at times, as has been demonstrated by Agarwal (2021).

On the other hand, employees with workplace mental health programmes painted a disconcerting picture of the status of said programmes. They explained how the wellbeing or mental health programmes are lip-service and do not help in maintaining routine well-being but rather exist to help when one hits rock bottom. Moreover, as the in-house psychologists work in the same hours as the employees, it is not feasible to avail their services without

sacrificing work. All of these raise questions about the efficacy of existing mental health programmes. Organizations need to evaluate if their mental health programmes are supporting employees the way they should, and if not, make revisions to reach the goal.

Existing literature also suggests employees' relationships with supervisors during the pandemic were rated poorly (Fana et. al., 2020). Our qualitative analysis revealed mixed experiences. Some participants had trouble understanding their changing roles due to reduced communication with their supervisors. Others acknowledged the active support their supervisor extended. As supervisors are seen as representatives of the organization (Eisenberger, Malone, Presson; 2016), their availability can increase employees' connectedness to the organization by raising their trust in their relationship with the organization (DeConinck, 2010). It is also likely for supervisor support to become paramount as employees may look up to them in case of minimal organizational support. Multiple relevant studies have emphasized the role of supervisors in providing crucial support to employees during the COVID-19 pandemic (Dirani et. al., 2020; Carnevale and Hatak 2020). The interviews also showed how weekly meetings kept employees connected, suggesting long-term benefits of active employee engagement activities. These meetings provide employees with a space to "share and normalise work-related concerns" (Laker & Roulet, 2021).

62% of employees globally considered mental health issues to be a major challenge during the COVID-19 crisis (Ellingrud et.al., 2020). The continued effects of the pandemic on employee well-being advance the need to reconsider and broaden the existing scope and structure of mental health programmes. According to Brooks and Ling (2020), there is a need for employers to take proactive steps and develop target strategies to address the mental health needs of employees. In India where seeking help for mental health concerns is stigmatized, organizations must design strategies to educate employees and managers about the value of managing stress, anxiety, and depression, reduce the stigma associated with seeking help, and improve choice and access to services. Increased utilization of mental health programmes at the workplace can help employers provide the support needed by employees while minimizing losses in work-productivity due to the negative effects of stress, anxiety, and depression triggered by the pandemic.

The COVID-19 pandemic revealed the regrettable gaps in existing wellbeing structures in organizations. Only 15% of India's total workforce is covered under employee wellness programs (Redseer, 2021). Naik (2020) talked about Indian employees being subjected to toxic work cultures and the ill-defined role of counselling sessions in corporations. Employees in India have waited far too long for concrete and healthy workplaces. This necessitates tackling unhealthy cultures and going beyond promoting hollow platitudes about well-being. Organizations need to follow through with what they propose on paper.

The first step in this can be recognizing fears of reaching out due to pervasive stigma (Bharadwaj et al, 2017). Our study confirmed this with accounts of participants, both with and without mental health programmes, who emphasized the importance of destigmatizing seeking help for employee mental health. These social challenges need to be identified and acknowledged to inform robust mental health programmes to address employee problems and develop a culture that is sustainable for long term growth. To foster well-being, organizations need to create environments where employees feel comfortable in accessing mental health services. Here, an essential element is maintaining confidentiality (SHRM, 2021). The organization must adhere to strong ethics and protect the tenets of counselling.

A viable solution to build a culture of empathy while working-from-home is the sieve model (Laker & Roulet, 2021). It is a three-step model that focuses on pre-emption, detection, and remedy. To promote self-care ideals and work-life boundaries, the pre-emptive stage places an emphasis on organizational culture. Leaders are encouraged to proactively cater to these objectives by modelling work-life balance, monitoring workloads, defining work timings, and

re-evaluating company values. The second step involves detecting emerging issues. Employees' concerns about seeking help in the workplace can be assuaged by encouraging selfacceptance and awareness-building can better equip employees to support their colleagues. The model recommends actively involving employees in the process by gathering data to assess the well-being climate and to identify key areas of required support. It also includes listening to employees and letting them know that their feedback and concerns have been heard.

When it comes to remedying identified issues, peer support has been deemed essential in reducing the stigma. The paucity of a vigorous infrastructure of mental health could potentially prevent organizations from having an adequate amount of professional mental health support (Singh, 2021). Nothing can substitute the support that mental health professionals offer but supervisors can provide the required support to meet the increasing demands. Employees at different levels in the organization, including HR professionals, can be taught ways to manage one's own and others' mental health. This is in line with other research focusing on the role of supervisors in promoting employee well-being (Oakman et al, 2020). Furthermore, employees and supervisors can collaboratively benefit from training through mentoring programmes.



[Source: Laker & Roulet, 2021]

A safe and supportive workplace can also include sensitization and awareness programmes, starting dialogues about well-being, training on workplace sensitivity, and keeping certified psychologists available considering the working hours of employees. Mental health programmes should also address burnout and exhaustion by inculcating preventive measures and developing systems that can identify the same. Besides restructuring wellbeing or mental health programmes, organizations can give support by acknowledging the pandemic-induced difficulties of employees and expressing appreciation for their efforts (Mihalache & Mihalache, 2021). If organizations are unable to meet the changing demands of wellbeing, it is pertinent that they collaborate with other service providers to help employees avail a wider range of services (Veldsman & van Aarde, 2021). The overarching aim should be to create MHP that are aligned with the vision of making employee well-being practices an indispensable part of the workplace.

The findings of this study complement previous research about the negative effects of workfrom-home and employee wellbeing and elucidate on the situation in the Indian context. The role of human resource practices for employees during crisis situations can be guided by the findings of this study on the influence of perceived support on employees' well-being during the COVID-19 crisis.

Specifically, the research has demonstrated some significant findings. Firstly, employees failed to receive adequate support during the COVID-19 crisis and employee wellbeing was not given a priority in most organizations. Secondly, supervisors largely failed to be accessible and empathetic to their employees. The interviewed employees had candidly communicated the problems they suffered through because of a lack of understanding and support from their supervisors.

CHAPTER 5: CONCLUSION

The current study sheds light on how he colossal shift to work-from-home (WFH) following the outbreak of the COVID-19 pandemic in 2020 affected the wellbeing of employees in India. In particular, we aimed to better understand if the presence of a wellbeing or mental health programme at the workplace had an effect on employees' perceived support (organization and supervisor support).

While earlier research had established the positive relation of perceived organizational support (POS) with various favourable work behaviours of employees (such as job performance) and the negative relation to damaging behaviours at work (such as turnover intentions; Eisnberger et. al., 2002), additional challenges have been he abrupt shift to telecommuting during COVID-19 left very little time for organizations to prepare their systems and processes to effectively accommodate working from home, such as rules on time off, how to access confidential documents, and how to store and retrieve information online (Vyas & Butakhieo, 2021). identified for those who were working from home during the COVID-19 pandemic. The adverse pandemic lockdown circumstances that led to social distancing and compelled stay-athome directives had resulted in negative repercussions on productivity and subsequent psychological distress. Work-from-home, in such challenging circumstances, has been perceived as a captive situation with no respite.

Limitations of the Study

While the current study illustrates meaningful findings, there are some limitations. First, it is vital to recognize that the data were collected during the second wave of the COVID-19 pandemic in India. The country had gone into a stringent lockdown once again and employees were confined to their houses indefinitely. As a result, the findings are not intended to directly represent traditional work-from-home situations and may not accurately reflect experiences

once the restrictions were lifted and work-from-home became more common. Secondly, the demographic characteristics (such as age, gender, education, income, number of family members, number of children, etc.) were not considered in assessing the effects of work-from-home on employee wellbeing and perceived support. More precise conclusions can be drawn if demographic characteristics are considered in more detail.

Thirdly, our sample included employees from major Indian cities and towns. While the inferences from the data are valid, their applications may not be widely generalized, and findings may differ based on geographical locations. Lastly, while the study included a wide range of professions, it was not representative of all the occupational categories, nor do the results fully represent all jobs within each category due to the small sample size.

Implications for Future Research

We were able to identify issues of work-from-home during the COVID-19 pandemic that were not examined in the closed-ended survey items, such as effects of lack of designated workspaces and organizational grievances, using a mixed methods approach. We encourage researchers to conduct mixed methods studies, as opposed to integrating our findings into quantitative questions and include open-ended items for qualitative analysis with a focus on evaluating the variance of work-from-home based on the aforementioned demographic factors. This can aid in collecting data that adequately portrays the personal experiences of employees during these uncertain times.

Participants reported organizations having namesake mental health programmes while doing very little to address employee concerns. Research on workplace wellbeing should, therefore, include intricate details about the genuine functioning of these mental health programmes. Gender also plays a significant role in the experience of work-from-home and employee wellbeing, particularly in terms of work-life balance, as indicated by the findings of our study. We encourage future studies to investigate this aspect and suggest gender-focused wellbeing programmes for organizations.

BIBLIOGRAPHY

Agarwal, U.A., Datta S., Blake-Beard, S., Bhargava, S. (2012). Linking LMX, Innovating Work Behaviour and Turnover Intentions: The Mediating Role of Work Engagement. *Career Development International*, **17** (**3**). pp. 208-230. <u>https://doi.org/10.1108/13620431211241063</u>

Agarwal, Promila. (2021). Shattered but smiling: Human resource management and the wellbeing of hotel employees during COVID-19. *International Journal of Hospitality Management.* **93**. https://doi.org/10.1016/j.ijhm.2020.102765

Allen, T. D., Golden, T. D., & Shockley, K. M. (2015). How Effective Is Telecommuting?
Assessing The Status Of Our Scientific Findings. *Psychological science in the public interest*,
16(2), pp. 40-68. https://doi.org/10.1177/1529100615593273

Annie Rachel, N., & Rimo, Shibe., (2020). Impact of COVID-19 on Work-Life Balance of Employees: A Study of the Indian BPO Sector Employees. *Perspectives on Business Management & Economics*, **1**(1), pp. 142-151. Retrieved from

http://www.pbme.in/papers/17.pdf

Baert, S., Lippens, L., Moens, E., Sterkens, P., & Weytjens, J. (2020). How Do We Think the COVID-19 Crisis Will Affect Our Careers (If Any Remain)? *IZA Discussion Paper Series*, 13164.

Baran, B. E., Shanock, L. R., & Miller, L. R. (2012). Advancing Organizational Support
Theory into the Twenty-First Century World of Work. *Journal of Business and Psychology*,
27(2), pp. 123-147. <u>https://doi.org/10.1007/s10869-011-9236-3</u>

Bharadwaj, P., Pai, M.M., Suziedelyte, A. (2017). Mental Health Stigma. *Economic Letters*, **159**, pp. 57-60.

Bhatnagar, J. (2008). Managing capabilities for talent engagement and pipeline development. *Industrial and Commercial Training*, **40(1)**, pp. 19–28.

https://doi.org/10.1108/00197850810841602

Boehm, J. K., and Lyubomirsky, S. (2008). Does happiness promote career success? *Journal* of Career Assessment, **16**, pp. 101–116. doi: 10.1177/10690727073 08140

Bloom, N., Liang, J., Roberts, J., & Ying, Z. J. (2015). Does Working from Home Work?
Evidence from a Chinese Experiment. *The Quarterly Journal of Economics*, 130(1), pp. 165-218. <u>https://doi.org/10.1093/qje/qju032</u>

Brooks, C.D., & Ling, J. (2020). Examination of the Utilization of Employee Assistance Programs to Support the Mental Health Needs of Employees During the COVID-19 Pandemic. *Journal of Insurance Regulation*, **39** (**8**), pp.1-34.

Brough, P., Timms, C., Chan, X. W., Hawkes, A., & Rasmussen, L. (2020). Work–Life Balance: Definitions, Causes, and Consequences. *Handbook of Socioeconomic Determinants of Occupational Health*, pp. 1–15. <u>https://doi.org/10.1007/978-3-030-05031-3_20-1</u>

Caligiuri, P., De Cieri, H., Minbaeva, D., Verbeke, A., & Zimmermann, A. (2020). International HRM Insights For Navigating The COVID-19 Pandemic: Implications For Future Research And Practice. *Journal of International Business Studies*, **51**, pp. 697–713. https://doi.org/10.1057/s41267-020-00335-9

Campbell, L. (2002). IBM's Culture of Health. Retrieved from https://www.ibm.com/ibm/responsibility/employee well being.shtml Caringal-Go, J.F., Teng-Calleja, M., Bertulfo, D.J. & Manaois, J.O. (2021). Work-Life Balance Crafting During COVID-19: Exploring Strategies of Telecommuting Employees in the Philippines. *Community, Work & Family*, pp. 1-20.

Carnevale, J. B., & Hatak, I. (2020). Employee adjustment and well-being in the era of COVID-19: Implications for human resource management. *Journal of Business Research*, **116**, pp. 183-187. <u>https://doi.org/10.1016/j.jbusres.2020.05.037</u>

Chartered Institute of Personnel and Development. (2016, January 26). "Growing the health and well-being agenda: From first steps to full potential". Retrieved from <u>https://www.cipd.asia/knowledge/reports/health-wellbeing-agenda</u>

Chen, Z., Powell, G. N., & Greenhaus, J. H. (2009). Work-to-Family Conflict, Positive Spillover, And Boundary Management: A Person-Environment Fit Approach. *Journal of Vocational Behaviour*, **74(1)**, pp. 82-93. https://doi.org/10.1016/j.jvb.2008.10.009.

Cole, M. S., Bruch, H., & Vogel, B. (2006). Emotion as Mediators of the Relations Between Perceived Supervisor Support And Psychological Hardiness On Employee Cynicism. *Journal of Organizational Behaviour: The International Journal of Industrial, Occupational and Organizational Psychology and Behaviour,* **27(4),** pp. 463-484.

https://doi.org/10.1002/job.381

Cooper, D., & Schindler, P., (2010). Business Research Methods, 12th Edition. McGraw-Hill/Irwin, a business unit of The McGraw-Hill Companies, Inc.

Creswell, J. W., & Plano Clark, V. L. (2018). Designing and Conducting Mixed Methods Research. (*3rd*). *Sage Publications*. DeConinck, J. B. (2010). The Effect of Organizational Justice, Perceived Organizational Support, And Perceived Supervisor Support On Marketing Employees' Level Of Trust. *Journal of Business Research*, *63*(12), pp. 1349-1355. https://doi.org/10.1016/j.jbusres.2010.01.003

Dewe, P., and Cooper, C. (2012). Well-being and Work: Towards a Balanced Agenda. *Basingstoke: Palgrave MacMillan*.

Diener, E. (1984). Subjective Well-being. Psychological Bulletin, 95(3), pp. 542-575.

Diener, E., Sapyta, J. J., and Suh, E. (1998). Subjective well-being is essential to wellbeing. *Psychological Inquiry*, **9**, pp. 33–37.

Dolot, A. (2020). The Influence of COVID-19 Pandemic on the Remote Work-An Employee Perspective. *E-Mentor*, pp. *35-43*. <u>https://doi.org/10.15219/em83.1456</u>

Dijkema, B. and Gunderson, M. (2019). Work Is About More Than Money: Toward A Full Accounting of the Individual, Social, and Public Costs of Unemployment, and the Benefits of Work. *Cardus*. Retrieved from <u>https://www.cardus.ca/research/work-</u> <u>economics/reports/work-is-about-more-than-money/</u>

Dirani, K. M., Abadi, M., Alizadeh, A., Barhate, B., Garza, R. C., Gunasekara, N., & Majzun, Z. (2020). Leadership competencies and the essential role of human resource development in times of crisis: a response to Covid-19 pandemic. *Human Resource Development International*, **23**(4), pp. 380-394. https://doi.org/10.1080/13678868.2020.1780078

Dolot, A. (2020). The Influence Of COVID-19 Pandemic on the Remote Work -An Employee Perspective. *E-Mentor*, pp. 35-43. https://doi.org/10.15219/em83.1456

Dwidienawati, D., Tjahjana D., Pradipto Y.D., Gandasari D. (2020). Is Your Work from Home Job Satisfying? Lessons Learned from Work from Home during COVID-19 Outbreak in Indonesia. *Journal of the Social Sciences*, **48(30,** pp. 742-752.

Ebersole, P., & Hess, P. (1994). "Toward Healthy Aging." Human Needs and Nursing Response, (4th ed.). *Toronto: Mosby*.

Eddleston, K. A., & Mulki, J. (2015). Toward Understanding Remote Workers' Management of Work–Family Boundaries: The Complexity of Workplace Embeddedness. *Group & Organization Management*, **42(3)**, pp. 346–387. <u>https://doi.org/10.1177/1059601115619548</u>

Eisenberger, R., Huntington, R., Hutchison, S., & Sowa, D. (1986). Perceived Organizational Support. *Journal of Applied Psychology*, **71**(**3**), pp. 500–507. <u>https://doi.org/10.1037/0021-9010.71.3.500</u>

Eisenberger, R., Armeli, S., Rexwinkel, B., Lynch, P. D., & Rhoades, L. (2001). Reciprocation of Perceived Organizational Support. *The Journal of Applied Psychology*, **86(1)**, pp. 42–51. <u>https://doi.org/10.1037/0021-9010.86.1.42</u>

Eisenberger, R., Stinglhamber, F., Vandenberghe, C., Sucharski, I. L., & Rhoades, L. (2002). Perceived Supervisor Support: Contributions to Perceived Organizational Support and Employee Retention. *Journal of Applied Psychology*, **87**(3), pp. 565–573.

https://doi.org/10.1037/0021-9010.87.3.565

Eisenberger, R., Malone, G.P., & Presson W.D. (2016). Optimizing Perceived Organizational Support to Enhance Employee Engagement. *Society for Human Resource Management* and *Socieity for Industrial and Organizational Psychology, University of Houston.* Fana, M., Milasi, S., Napierala, J., Fernandez-Macias, E., & Vázquez, I. G. (2020). Telework, work organisation and job quality during the COVID-19 crisis: a qualitative study *JRC Working Papers Series on Labour, Education and Technology*, No. 2020/11.

Filardi, F., Castro, R. M. P. D., & Zanini, M. T. F. (2020). Advantages and Disadvantages of Teleworking in Brazilian Public Administration: Analysis of SERPRO and Federal Revenue Experiences. *Cadernos EBAPE.BR*, **18**(1), pp. 28–46. https://doi.org/10.1590/1679-395174605x

Finsterwalder, J. and Kuppelwieser, V.G. (2020). Equilibrating resources and challenges during crises: a framework for service ecosystem well-being. *Journal of Service Management*, 31(6), pp. 1107-1129. <u>https://doi.org/10.1108/JOSM-06-2020-0201</u>

Fisher, C. D. (2014). "Conceptualizing and Measuring Wellbeing at Work," in Wellbeing: A Complete Reference Guide, Work and Wellbeing, ed P. Y. Chen (*Somerset: Wiley*), pp. 9–33.

Forbes India (2020). COVID-19: Work from home Burnout Is Real. Retrieved from https://www.forbesindia.com/article/news-by-numbers/covid19-work-from-home-burnout-is-real/63679/1. Accessed on 6th January 2022.

Ford, M. T., Cerasoli, C. P., Higgins, J. A., and Decesare, A. L. (2011). Relationships Between Psychological, Physical, And Behavioural Health And Work Performance: A Review And Meta-Analysis. *Work Stress*, **25** (**3**), pp. 185–204. doi: 10.1080/02678373.2011.609035

Gelfand, M. J., Leslie, L. M., Keller, K., & de Dreu, C. (2012). Conflict Cultures In Organizations: How Leaders Shape Conflict Cultures And Their Organizational-Level Consequences. *Journal of Applied Psychology*, **97(6)**, pp. 1131–1147.

https://doi.org/10.1037/a0029993

Goel, I., Sharma, S., & Kashiramka, S. (2021). Effects of the COVID-19 pandemic in India: An analysis of policy and technological interventions. *Health policy and technology*, 10(1), pp. 151–164. https://doi.org/10.1016/j.hlpt.2020.12.001

Grant, C.A., Wallace, L.M., & Spurgeon, P.C. (2013). An exploration of the psychological factors affecting remote e-worker's job effectiveness, well-being and work-life balance. Employee Relations, 35(5), 527–546. https://doi.org/10.1108/ER-08-2012-0059

Harter, J. K., Schmidt, F. L., & Hayes, T. L. (2002). Business-Unit-Level Relationship Between Employee Satisfaction, Employee Engagement, And Business Outcomes: A Meta-Analysis. *Journal of Applied Psychology*, 87(2), pp. 268–279. <u>https://doi.org/10.1037/0021-</u> <u>9010.87.2.268</u>

Hayes, S. W., Priestley, J. L., Ishmakhametov, N., & Ray, H. E. (2020, July 8). "I'm not Working from Home, I'm Living at Work": Perceived Stress and Work-Related Burnout before and during COVID-19. <u>https://doi.org/10.31234/osf.io/vnkwa</u>

Hebbar, N. (2020, March 24). "PM Modi Announces 21-Day Lockdown As COVID-19 Toll Touches 12." *The Hindu*. Retrieved from <u>https://www.thehindu.com/news/national/pm-</u> announces-21-day-lockdown-as-covid-19-toll-touches-10/article31156691.ece

Hellgren, J., Sverke, M., and Näswall, K. (2008). "Changing Work Roles: New Demands and Challenges," in *The Individual in the Changing Working Life*, eds. K. Näswall, J. Hellgren, and M. Sverke, Cambridge: Cambridge University Press, pp. 46–66.

Henke, R. M., Benevent, R., Schulte, P., Rinehart, C., Crighton, K. A., & Corcoran, M.
(2016). The Effects Of Telecommuting Intensity On Employee Health. *American Journal of Health Promotion*, *30*(8), pp. 604–612. <u>https://doi.org/10.4278/ajhp.141027-QUAN-544</u>

Honavar, S. (2018). Brace Up Or Burnout. *Indian Journal of Ophthalmology*, **66(4)**, pp. 489. https://doi.org/10.4103/ijo.ijo_424_18

Hone, L. C., Jarden, A., Duncan, S., and Schofield, G. M. (2015). Flourishing in New
Zealand Workers Associations With Lifestyle Behaviours, Physical Health, Psychosocial,
And Work-Related Indicators. *Journal of Occupational and Environmental Medicine*, **57** (9),
pp. 973–983. doi: 10.1097/JOM.0000000000 00508

Hamsazwadhwani (2020). Employee Well-Being Survey, 2020. <u>www.The7thFold.com</u>, Retrieved on 26th November 2020.

Institute for Health and Productivity Studies (2015). From Evidence To Practice: Workplace Wellbeing That Works. *John Hopkins Bloomberg School of Public Health*.

International Labour Organization (ILO). (2020). Tackling the COVID-19 Youth Employment Crisis in Asia and the Pacific: International Organization, Bangkok (Thailand), and Asian Development Bank, Manila (Philippines).

International Labour Organization (ILO). (2020). Global Wage Report 2020-21: Wages and Minimum Wages in the time of COVID-19. Retrieved from <u>https://www.ilo.org/wcmsp5/groups/public/---dgreports/---dcomm/---</u> publ/documents/publication/wcms_762534.pdf

International Labour Organization (ILO). (2021). Workplace Well-being. Retrieved from <u>https://www.ilo.org/global/topics/safety-and-health-at-work/areasofwork/workplace-health-promotion-and-well-being/WCMS_118396/lang--en/index.htm</u>.

Jain, A., Dixit, S, Gera, K., Gandhi, M., Agarwal, S. (2021). Employee Satisfaction when Working from Home during COVID-19: Comparison between India and US. *International Journal of Science, Engineering and Management*, **6**(1), pp. 69-79.

Jha, S. (2013). Analysis of Factors Affecting Employee Engagement and Job Satisfaction: A Case of Indian IT Organization. *International Conference on Technology and Business Management*, pp. 328-335.

Kaushik, Meenakshi. (2020). The Impact of Pandemic COVID -19 in Workplace. European *Journal of Business Management and Research.* **12**.

Keeman, Alexis & Näswall, Katharina & Malinen, Sanna & Kuntz, Joana. (2017). Employee
Wellbeing: Evaluating a Wellbeing Intervention in Two Settings. *Frontiers in psychology*, 8,
p. 505. <u>https://doi.org/10.3389/fpsyg.2017.00505</u>

Keyes, C. L. M. (2005). Mental illness and/or mental health? Investigating axioms of the complete state model of health. *Journal of Consulting and Clinical Psychology*, **73** (**3**), pp. 539–548. doi: 10.1037/0022-006X.73.3.539

Keyes, C. L. M., and Grzywacz, J. G. (2005). Health as a complete state: the added value in work performance and healthcare costs. Journal of Occupational and Environmental Medicine, **47** (**5**), pp. 523–532. doi: 10.1097/01.jom.0000161737.21198.3a

Khairuddin, K. N., Omar, Z., Krauss, S. E., & Ismail, I. A. (2021). Fostering Co-Worker Support: A Strategic Approach To Strengthen Employee Relations In The Workplace. *Proceedings Of Green Design And Manufacture 2020*. https://doi.org/10.1063/5.0044728 Kiefer, Ruth Ann (2008). An Integrative Review of the Concept of Well-Being, *Holistic Nursing Practice*, 22 (5), pp. 244-252.

https://doi.org/10.1097/01.HNP.0000334915.16186.b2

Kniffin, K. M., Narayanan, J., Anseel, F., Antonakis, J., Ashford, S. P., Bakker, A. B.,

Bamberger, P., Bapuji, H., Bhave, D. P., Choi, V. K., Creary, S. J., Demerouti, E., Flynn, F.

J., Gelfand, M. J., Greer, L. L., Johns, G., Kesebir, S., Klein, P. G., Lee, S. Y., & Vugt, M. V.

(2021). COVID-19 and the Workplace: Implications, Issues, and Insights for Future Research

and Action. American Psychologist, 76(1), pp. 63-77. https://doi.org/10.1037/amp0000716

Konradt, U., Hertel, G., & Schmook, R. (2003). Quality Of Management By Objectives, Task-Related Stressors, and Non-Task-Related Stressors As Predictors Of Stress And Job Satisfaction Among Teleworkers. *European Journal of Work and Organizational Psychology*, **12(1)**, pp. 61–79. <u>https://doi.org/10.1080/13594320344000020</u>

Kothari, C.R. (2004). Research Methodology: Methods & Techniques. *New Age International (P) Limited, Publishers.* p. 10.

Kottke, J. L., & Sharafinski, C. E. (1988). Measuring Perceived Supervisory and Organizational Support. *Educational and Psychological Measurement*, **48(4)**, pp. 1075–1079. https://doi.org/10.1177/0013164488484024

Kreiner, G. E. (2006). Consequences of Work- Home Segmentation Or Integration: A Person-Environment Fit Perspective. *Journal of Organizational Behaviour: The International Journal of Industrial, Occupational and Organizational Psychology and Behaviour*, **27(4)**, pp. 485-507. https://doi.org/10.1002/job.386

Krishnan J., & Mary, V.S., (2012). Perceived Organisational Support – An Overview On Its Antecedents And Consequences. *International Journal of Multidisciplinary Research*, **2**(4),

pp. 1-13. Retrieved from <u>https://www.researchgate.net/profile/Jayasree-Krishnan-</u> 2/publication/265946420

Laker, B., & Roulet, T. (2021). *How Organizations Can Promote Employee Wellness, Now and Post-Pandemic*. MIT Sloan Management Review. Retrieved from <u>https://sloanreview.mit.edu/article/how-organizations-can-promote-employee-wellness-now-</u> and-post-pandemic/. Accessed on 1 December 2021.

LaMontagne, A. D., Keegel, T., and Vallance, D. (2007). Protecting and Promoting Mental Health in the Workplace: Developing A Systems Approach to Job Stress. *Health Promotion Journal of Australia*, **18**, pp. 221–228.

Lapalme, M. È., Tremblay, M., & Simard, G. (2009). The Relationship Between Career Plateauing, Employee Commitment and Psychological Distress: The Role of Organizational and Supervisor Support. *The International Journal of Human Resource Management*, **20**(5), pp. 1132-1145. <u>https://doi.org/10.1080/09585190902850323</u>

Limeade. (2021). Workplaces in Crisis: Employee Care Still Missing the Mark. Retrieved from <u>https://www.limeade.com/resources/blog/employee-experience-during-the-pandemic-survey/</u>. Accessed on 28 November 2021.

Lonska, J., Mietule, I., Litavniece, L., Arbidane, I., Vanadzins, I., Matisane, L., & Paegle, L. (2021). Work–Life Balance of the Employed Population During the Emergency Situation of COVID-19 in Latvia. *Frontiers in Psychology*, *12*.

https://doi.org/10.3389/fpsyg.2021.682459

Lyubomirsky, S., King, L., and Diener, E. (2005). The Benefits of Frequent Positive Affect: Does Happiness Lead To Success? *Psychological Bulletin*, **131**, pp. 803–855. doi: 10.1037/0033-2909.131.6.803 Ellingrud K., Krishnan M., Krivkovich A., Kukla K., Mendy, A. Robinson, N., Sancier-Sultan, S., and Yee, L. (2021). Diverse Employees Are Struggling The Most During COVID-19 – Here's How Companies Can Respond. *McKinsey & Company*. Retrieved from <u>https://www.mckinsey.com/featured-insights/diversity-and-inclusion/diverse-employees-are-</u> <u>struggling-the-most-during-covid-19-heres-how-companies-can-respond</u>. Accessed on 6th January 2021.

Meyer, J. P., Becker, T. E., & Vandenberghe, C. (2004). Employee Commitment and
Motivation: A Conceptual Analysis and Integrative Model. *Journal of Applied Psychology*,
89(6), pp. 991–1007. https://doi.org/10.1037/0021-9010.89.6.991

Mihalache, M., & Mihalache, O. R. (2021). How Workplace Support For The COVID- 19 Pandemic And Personality Traits Affect Changes In Employees' Affective Commitment To The Organization And Job- Related Well- Being. *Human Resource Management*. https://doi.org/10.1002/hrm.22082

Mostafa, B. A. (2021). The Effect of Remote Working on Employees Wellbeing and Work-Life Integration during Pandemic in Egypt. *International Business Research*, **14(3)**, p. 41. <u>https://doi.org/10.5539/ibr.v14n3p41</u>

Musroor M. (2019). Work and Wellbeing (Insight from Employees in India). *Warwick* Business School, University of Warwick.

Naik, D. (2020). Do Workplace Mental Health Programmes Go Beyond Lip Service? *Mint Lounge*. Retrieved from <u>https://lifestyle.livemint.com/news/big-story/do-workplace-mental-health-programmes-go-beyond-lip-service-111606233616175.html</u>. Accessed on 6th January 2021.

Ng, T. W. H., & Sorensen, K. L. (2008). Toward a Further Understanding of the Relationships Between Perceptions of Support and Work Attitudes: A Meta-Analysis. *Group* & *Organization Management*, **33(3)**, pp. 243–268. https://doi.org/10.1177/1059601107313307

Nilsen, C., Andel, R., Fritzell, J., & Kåreholt, I. (2016). Work-Related Stress in Midlife and All-Cause Mortality: Can Sense Of Coherence Modify This Association? *European Journal of Public Health*, **26(6)**, pp.1055–1061. <u>https://doi.org/10.1093/eurpub/ckw086</u>

Oakman, J., Kinsman, N., Stuckey, R. *et al.* (2020). A Rapid Review Of Mental And Physical Health Effects Of Working At Home: How Do We Optimise Health? *BMC Public Health*, **20**, p. 1825. <u>https://doi.org/10.1186/s12889-020-09875-z</u>

Pan, S. Y., & Yeh, Y. J. Y. (2012). Impact of Value Congruence on Work-Family Conflicts:
The Mediating Role of Work-Related Support. *The Journal of Social Psychology*, **152(3)**, pp. 270-287. <u>https://doi.org/10.1080/00224545.2011.602133</u>

Potter J.A. (1998). Qualitative and Discourse Analysis. In Alan S. Bellack, Michel Hersen's *Clinical Psychology*. pp. 117-144.

Rahaman, M. S., Liono, J., Ren, Y., Chan, J., Kudo, S., Rawling, T., & Salim, F. D. (2020). An Ambient–Physical System to Infer Concentration in Open-Plan Workplace. *IEEE Internet of Things Journal*, **7(12)**, pp. 11576–11586. <u>https://doi.org/10.1109/jiot.2020.2996219</u>

Ramarajan, L., & Reid, E. (2013). Shattering the myth of separate worlds:Negotiating nonwork identities at work. *Academy of Management Review*, *38*, pp. 621–644. http://dx.doi.org/10.5465/amr.2011.0314 Randstad India (2020). COVID-19 Impact Employee Pulse Survey. Retrieved from https://www.randstad.in/employer-brand-research/covid-impact-employee-pulse-survey.pdf

Rawat, D., Dixit, V., Gulati, S., Gulati, S., & Gulati, A. (2021). Impact of COVID-19 outbreak on lifestyle behaviour: A Review of Studies Published in India. *Diabetes & Metabolic Syndrome*, *15*(1), pp. 331–336. <u>https://doi.org/10.1016/j.dsx.2020.12.038</u>

Redseer. (2021). Corporate-Run Health & Wellness Programs See Increasing Maturity & Growing Demand. Retrieved from <u>https://redseer.com/newsletters/corporate-run-health-</u> wellness-programs-see-increasing-maturity-growing-demand/. Accessed on 6th January 2021.

Rhoades, L., & Eisenberger, R. (2002). Perceived Organizational Support: A Review of the Literature. *Journal of Applied Psychology*, **87(4)**, pp. 698–714. <u>https://doi.org/10.1037/0021-9010.87.4.698</u>

Rhoades, L., Eisenberger, R., & Armeli, S. (2001). Affective Commitment to the
Organization: The Contribution of Perceived Organizational Support. *Journal of Applied Psychology*, 86(5), pp. 825–836. <u>https://doi.org/10.1037/0021-9010.86.5.825</u>

Richardson, K. M., & Rothstein, H. R. (2008). Effects of Occupational Stress Management Intervention Programs: A Meta-Analysis. *Journal of Occupational Health Psychology*, **13(1)**, pp. 69–93. <u>https://doi.org/10.1037/1076-8998.13.1.69</u>

Rupietta, K., & Beckmann, M. (2016). Working From Home: What Is The Effect On Employees' Effort? (No. 2016/07). *WWZ Working Paper*. https://doi.org/10.5451/unibas-ep61317

Rosa, A., Basole A., & Kesar, S. (2021). Tracking Employment Trajectories during the Covid-19 Pandemic: Evidence from Indian Panel Data. *Centre for Sustainable Employment*.

Working Paper. Retrieved from

https://cse.azimpremjiuniversity.edu.in/publications/tracking-employment-trajectoriesduring-the-covid-19-pandemic-evidence-from-indian-panel-data/

Ryan, R. M., and Deci, E. L. (2001). On Happiness And Human Potentials: A Review Of Research On Hedonic And Eudaimonic Well-Being. *Annual Review of Psychology*, **52**, pp. 141–166. doi: 10.1146/annurev.psych.52.1.141

Ryff, C. D., and Keyes, C. L. M. (1995). The Structure of Psychological Wellbeing Revisited. *Journal of Personality and Social Psychology*, **69** (4), pp. 719–727. doi: 10.1037/0022-3514.
69.4.719

Sahni, J. (2020). Impact of COVID-19 on Employee Behavior: Stress and Coping Mechanism During WFH (Work From Home) Among Service Industry Employees. *International Journal of Operations Management*, **1**(1), pp. 35-48. <u>http://dx.doi.org/10.18775//ijom.2757-0509.2020.11.4004</u>

Seligman M. E. P. (2011). Flourish. New York, NY: Simon & Schuster.

Sellar T. & Peiris M. (2021). Effect of Work from Home on Job Satisfaction in Response to the Outbreak of COVID 19. *South Asian Research Journal of Business and Management*, 3(5), pp. 112-120.

Settoon, R. P., Bennett, N., & Liden, R. C. (1996). Social exchange in Organizations:
Perceived Organizational Support, Leader–Member Exchange, and Employee Reciprocity. *Journal of Applied Psychology*, 81(3), pp. 219–227. <u>https://doi.org/10.1037/0021-</u>
9010.81.3.219

Sharma, J., Sharma D., Tiwari, D., Vishwakarma V. (2021). The Challenges and Successes of Dealing with the COVID-19 Pandemic in India. *Research and Reports in Tropical Medicine*, 12, pp. 205-218.

SHRM. (2021). Managing Employee Assistance Programs. Retrieved from https://www.shrm.org/resourcesandtools/tools-and-

<u>samples/toolkits/pages/managingemployeeassistanceprograms.aspx</u>. Accessed on 29 December 2021.

Singh, U. (2021). Disentangling India's mental health distress: Does India have the resources to control the impending mental health crisis? *Research Matters*. Retrieved from https://researchmatters.in/news/disentangling-india%E2%80%99s-mental-health-distress-does-india-have-resources-control-impending-mental. Accessed on 29 December, 2021.

Sonnentag, S., Unger, D., & Nägel, I. J. (2013). Workplace Conflict and Employee Well-Being. *International Journal of Conflict Management*, **24**(2), pp. 166–183.

https://doi.org/10.1108/10444061311316780

Suh, A., & Lee, J. (2017). Understanding Teleworkers' Technostress and Its Influence on Job Satisfaction. *Internet Research*, **27(1)**, pp.140–159. <u>https://doi.org/10.1108/intr-06-2015-0181</u>

Teo, J. (2020). More working from home feel stressed than those on Covid-19 front line: Survey. *The Straits Times*. Retrieved from

https://www.straitstimes.com/singapore/health/more-work-from-homers-feel-stressed-thanfront-line-workers-singapore-survey-on. Accessed 16 August 2021

Threlkeld, K. (2021). Employee Burnout Report: COVID-19's Impact and 3 Strategies to Curb It. Retrieved from <u>https://www.indeed.com/lead/preventing-employee-burnout-report</u>. Accessed on 28 November 2021. Tomaževič, N., Seljak, J., & Aristovnik, A. (2014). Factors Influencing Employee Satisfaction in the Police Service: The Case of Slovenia. *Personnel Review*, **43**(2), pp. 209– 227. https://doi.org/10.1108/pr-10-2012-0176

Vanhove, A. J., Herian, M. N., Perez, A. L. U., Harms, P. D., and Lester, P. B. (2016). Can Resilience Be Developed At Work? A Meta-Analytic Review Of Resilience-Building
Programme Effectiveness. *Journal of Occupational and Organizational Psychology*, 89 (2), pp. 278–307. doi: 10.1111/joop.12123

Veldsman, D., & van Aarde, N. (2021). The impact of COVID-19 on an employee assistance programme in a multinational insurance organisation: Considerations for the future. *SA Journal of Industrial Psychology*, **47**, p.10.

Vyas, L. & Butakhieo, N. (@021). The Impact of Working From Home During COVID-19 on Work And Life Domains: An Exploratory Study on Hong Kong. *Policy Design and Practice*, **4**(1), pp. 59-76. https://doi.org/10.1080/25741292.2020.1863560

Wang, B., Liu, Y., Qian, J., & Parker, S. K. (2020). Achieving Effective Remote Working During the COVID-19 Pandemic: A Work Design Perspective. *Applied Psychology* = *Psychologie Appliquee*, 10.1111/apps.12290. <u>https://doi.org/10.1111/apps.12290</u>

World Health Organization. (2020, March 11). "WHO Director-General's Opening Remarks At The Media Briefing On COVID-19 - 11 March 2020." Retrieved from <u>https://www.who.int/director-general/speeches/detail/who-director-general-s-opening-</u> remarks-at-the-media-briefing-on-covid-19---11-march-2020.

Worley J.A. (2006). A Factor Analytic Study to Evaluate The Structure of the Survey of Perceived Organizational Support. *Oklahoma State University*.

Xiao, Y., Becerik-Gerber, B., Lucas, G., & Roll, S. C. (2021). Impacts of Working From Home During COVID-19 Pandemic on Physical and Mental Well-Being of Office Workstation Users. *Journal of occupational and environmental medicine*, **63**(3), pp. 181– 190. <u>https://doi.org/10.1097/JOM.00000000002097</u>

APPENDIX A: SURVEY ITEMS CONCERNING OUTCOME VARIABLES

A.1. Perceived impact of extended telework during the COVID-19 crisis on various life and career aspects*

The following statements are about your experience with increased teleworking due to the current COVID-19 crisis. Please indicate to what extent you agree with the statements on a scale from 'completely disagree' (1) to 'completely agree' (5).

[Note: The rejected items from the original questionnaire have been marked with an asterisk.]

1.(Happy with extended telework) I am globally satisfied that I am working more at home because of the corona crisis.

*2. (More family conflicts related to extended telework) I have more conflicts with my family because I work more at home because of the corona crisis.

3. (More professional conflicts related to extended telework) I have more professional conflicts (e.g. with supervisor or colleagues) because I work more at home because of the corona crisis.

*4. (Often disturbed by roommates during extended telework) I am often disturbed by family members during extended homework because of the corona crisis.

*5. (Difficult to combine different means of communication during extended telework) I find it difficult to combine different means of communication (such as phone, e-mail and Skype) during extended homework due to the corona crisis.

*6. (Well guided by my employer during extended telework) I feel well guided by my employer (or supervisor) during the extended home working due to the corona crisis.

*7. (Difficult to convince employer to introduce extended telework) It was hard to persuade my employer to allow me to participate in extended telework.

8. (Higher task efficiency related to extended telework) I can do my job more efficiently during the extended homework because of the corona crisis.

9. (Higher commitment to employer related to extended telework) I feel more connected to my employer due to the extended homework because of the corona crisis.

10. (Better work-life balance related to extended telework) I am experiencing a better work life balance due to the extended homework because of the corona crisis.

11. (Better relationship with colleagues related to extended telework) I feel a stronger bond with my colleagues due to the extended homework because of the corona crisis.

12. (Better stress management related to extended telework) I experience less work-related stress due to the extended homework because of the corona crisis.

13. (Better burnout prevention related to extended telework) I think the extended homework caused by the corona crisis is reducing my chances of burnout in the near future.

14. (Higher work concentration related to extended telework) I experience better concentration at work due to the extended homework because of the corona crisis.

A2. Perceived Organisational Support

POS

1. My organization values my contribution to its well-being.

2. My organization strongly considers my goals and values.

3. My organization really cares about my well-being.

PSS

4. My supervisor is willing to extend him/herself in order to help me perform my job to the best of my ability.

5. My supervisor takes pride in my accomplishments at work.

6. My supervisor tries to make my job as interesting as possible.

APPENDIX B: ADDITIONAL QUALITATIVE STUDY MATERIAL

Interview Questions

1. With MH programme

Employees:

Do you think having a MH programme benefits you? If yes, how has it affected your wellbeing? [Ask what initiatives are already there.]

How efficiently were you able to work from home during the COVID-19 pandemic? How well were you able to stay connected and work with your colleagues and supervisors? How has support from your supervisor been during work from home?

What more (mental health) initiatives would you recommend your organization/supervisor take to help you during remote working?

Supervisors:

Do you think having a MH programme benefits your employees/organisation? If yes, how has it affected you and your employees' well-being? [Ask what initiatives are already there.] How efficiently were you able to work from home during the COVID-19 pandemic? How well were you able to stay connected and work with your colleagues and employees? What (mental health) initiatives would you implement to help your employees during remote working?

2. Without MH programme

Employees

Do you think not having a MH programme impacts you? If yes, how has it affected your well-being?

How efficiently were you able to work from home during the COVID-19 pandemic? How well were you able to stay connected and work with your colleagues and supervisors/employees? How has support from your supervisor been during work from home? What (mental health) initiatives would you recommend your organization/supervisor take to help you during remote working?

B2. Thematic Analysis, Transcripts, Coding

Use link to access and download the file:

https://docs.google.com/document/d/1IiGlWF6M6qemk6MGWRZQYG5tsCSJ4Yc00n5Bxjx

Y5ko/edit?usp=sharing